



## Prevalence and Factors Associated with Abuse among Elderly in a Community of Kirtipur Municipality

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### Abstract

Elderly Abuse is a public Health concern. Elderly people in a community may only perceive physical abuse as an abuse and may not think other abuse as abuse to them therefore is left unrecognized and unreported. According to World Health Organization, 2021 around 1 in 6 people of age 60 years above experienced some form of abuse in community setting during past year. More research and depth study is needed regarding elderly abuse. The main objective of the study was to assess the prevalence of elderly abuse and its associated factors in community of Kirtipur municipality. A Cross-sectional study on prevalence and associated factors of abuse among elderly in a community of Kirtipur municipality was conducted. Semi-structured interview schedule was used. Data analysis was done by using SPSS version 25.0 in descriptive statistics (mean, median, standard deviation, frequency and percentage) and inferential statistics chi- square test was used to find out association between level of awareness and selected demographic variables. The findings of the study show prevalence of elderly abuse to be 11.4%. Caregiver neglect (9.5%) and psychological abuse (9.5%) were found to be most experienced by elderly. Among the socio-demographic variables the present study showed elderly abuse significantly associated ( $p < 0.05$ ) with elderly's health status, elderly's dependency level in daily living activities and involvement in income generating activities. The study concluded that elderly with poor health status, who are dependent for daily living activities and those who are not involved in income generating activities are more vulnerable to abuse. Although this study shows lower prevalence rate in elderly abuse measures need to be taken to prevent it.

*Keywords:* Prevalence, Factors, association, elderly abuse, cross-sectional design

### Introduction

Elderly abuse is the global public health in the world. According to “Elder abuse is a single or repeated act or lack of appropriate action, occurring within any relationship where there is an

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expectation of trust, which causes harm or distress to an older person” or elder abuse, is an intentional act, or failure to act, by a caregiver or another person in a relationship involving an expectation of trust that causes harm to an adult 60 years and older. Globally one in six people aged 60 years and older experience abuse in the community each year. The abuse rate in institutions is still higher [World Health Organization (WHO) 15 June, 2022]. Globally, the number of people aged 65 and up is increasing faster than any other age group. As a result, the proportion of elderly people in the total population is rising almost everywhere. Many developing countries are experiencing population aging at a far faster rate than developed ones in the past [United Nation (UN), 2015]. The majority of affluent countries accept the age of 65 as a definition of elderly, whilst developing countries choose a lower age. An elderly citizen in Nepal is defined as someone who is 60 years old or older (Aryal, 2019). As to the 2011 Nepalese census, the elderly population accounted for 2.1 million, or 8.1% of the nation's total population. According to the study, a substantial percentage of older people (58%) had experienced elder abuse before entering an old age home in Kathmandu (Rai et al., 2018). The prevalence of senior abuse was determined to be 54.5%. Neglect (23.1%), psychological abuse (20.6%), physical abuse (6.5%), financial abuse (2.4%), and sexual abuse (1.9%), were the most prevalent forms of maltreatment among the older population. Elderly females were much more likely to face physical and psychological abuse (Acharya et al., 2021).

According to the statistics, 61.7 percent of those aged 60 and up have been mistreated in some way (physical 2.4%, psychological 22.4%, caregiver neglect 57.5%, financial 12.1% and stranger-inflicted 8.3%). Elder mistreatment was linked to the following characteristics of elders: illiteracy, concentration problems, living in a living arrangement with their son(s)/daughter(s)-in-law, taking regular medications, belonging to the Dalit community according to the Hindu traditional caste system, and taking regular medications, and residing with a caregiver having a monthly family income <sup>6</sup> of less than NRs. 20,000 (Yadav et al., 2018). Older adults, on the other hand, are frequently frightened to report situations of abuse to family, friends, or the police. In undeveloped countries, there is even less information on elder abuse in institutions (Sharma, 2012).

Because elder abuse is frequently linked to societal taboos and people typically want to keep quiet about it, it is a hidden problem. But things are shifting due to rising awareness, more transparent societies, expanded media reach, and, of course, an increase in elder abuse instances as a result of societal changes (Geriatric Centre Nepal, 2012). Another round of Covid-19 vaccinations for older persons nationwide in the 60–64 age range was initiated by the Ministry of Health and Population. Nevertheless, it has been reported that local leaders have abused the vaccinations that were sent to the districts and local units for the elderly citizens. They were discovered sharing the shots both inside and outside the Kathmandu valley with themselves, their relatives, family members, political party cadres, and civil servants. It appears that many elderly people, who are more vulnerable to contracting the coronavirus, have been prevented from receiving this vaccination (Budhathoki, 2022) .

### **Materials and Methods**

A Cross-sectional study on prevalence and associated factors of abuse among elderly in a community of Kirtipur municipality was conducted. Semi-structured interview schedule was used. Pretested, semi -structured questionnaire was used to collect data. The development of tool was based on objectives of the study and was done on the basis of extensive literature review and consulting research advisor. Content validity of the tool was maintained by consulting with

subject expert and also consulting with concerned research advisor, teachers and extensive literature review. Pre-testing in 10% of sample size in similar other situation was done to check out the clarity of instrument and those subjects were not included in final data collection and modification was done with feedback incorporated. Ethical consideration was maintained by taking formal written approval from Research management committee. Permission was taken from concerned administrative authority. Written informed consent was taken from each respondent. Privacy, confidentiality of information of all the respondents was maintained. Respondent participated voluntarily. Participants were interviewed in a separate space without involvement of their family members. Researcher self was involved in data collection and prevent contamination by conducting face to face interview session involving one participant only at a time. All the data were checked daily for accuracy. Data processing was done by using computer Statistical Package for the Social Sciences (SPSS) version 25.0. Descriptive statistics such as frequency, percentage, mean, median and standard deviation were used to describe socio-demographic variables. Inferential statistics was used to find out the association dependent and independent variables.

## Results

**Table 1**

*Socio-demographic Characteristics of Elderly People*

Variables	Frequency(f)	Percentage(%)
Age (in completed years)		
60-70	71	67.6
71-80	27	25.7
81-90	9	8.7
Sex		
Female	56	53.3
Male	49	46.7
Education		
Illiterate	77	73.3
Literate	28	26.7
Marital Status		
Married	94	89.5
Widow/Widower	8	7.6
Divorced/Separated	2	1.9
Unmarried	1	1.0
Ethnicity		
Dalit	2	1.9
Janajati	18	17.1
Brahmin/Chhettri	85	81.0
Living Arrangement		
Son & Daughter-in-law	89	84.8
Daughter & Son-in-law	10	9.5
Couple	4	3.8
Relatives	2	1.9
Income generating activities		

Yes	84	80.0
No	21	20.0
Dependency in DALYs		
Yes	15	14.3
No	90	85.7
Health status of elderly		
Poor	4	3.8
Fair	66	62.9
Good	35	33.3

N=105

Table 1 illustrates about two- third (66.7%) of the elderly population were found in age group of 60-70 years and few were found in age group 80-90 (8.6%). As per the gender perspective more than half were found to be female (53.3%) whereas male were (46.7%). About three-fourth were illiterate (73.3%) whereas more than one-fourth were literate (26.7%). Majority of elderly were found to be married (89.5%). Majority of the elderly people were of Brahmin/Chhettri ethnicity (80%). As per the perspective of living arrangement of the elderly majority of them were found to be living with their son and daughter-in-law (84.8%) whereas few were found to be living with their relatives (1.9%). Dependency in daily living activities has greater influence in determining the prevalence of elderly abuse. Majority of the elderly (85.7%) were found to be independent in carrying out their daily living activities whereas only few (14.3%) were found to be dependent on others. Health status of the elderly also determine the prevalence of elderly abuse. The elderly people of poor health and good health were found to be (3.8%) and (33.3%) respectively.

**Table 2**

*Prevalence of Overall Abuse and Types of Abuse*

Overall/Types of Abuse	Frequency (f)	Percentage(%)
Experienced any Abuse		
Yes	12	11.4
No	93	88.6
Types of Abuse		
Caregiver Neglect	10	9.5
Psychological abuse	10	9.5
Physical abuse	8	7.6
Financial abuse	4	3.8

Table 2 highlights the distribution of 105 elderly people as per the types of abuse. Prevalence elderly abuse was found to be 11.4% . however more than three fourth , (88.6%) of elderly were not subjected to abuse. Caregiver Neglect (9.5%) and psychological abuse (9.5%) were found to be the most common types of abuse followed by physical abuse (7.6%), Financial abuse (3.8%) whereas Sexual abuse was nil.

**Table 3***Association between elderly abuse with socio-demographic characteristics*

Socio-demographic Characteristics		Frequency (f)	P-Value
Age Group	60-70	6 (41.7%)	0.228
	71-80	4 (25.0%)	
	81-90	2 (33.3%)	
Gender	Male	5 (41.7%)	0.712
	Female	7 (58.3%)	
Literacy Status	Illiterate	8 (66.7%)	0.579
	Literate	4 (33.3%)	
Living arrangement	Son & daughter-in-law	11 (91.7%)	0.833
	Daughter & Son-in-law	1 (8.3%)	
	Couple	-	
	Relatives	-	
Marital status	Married	9 (75.0%)	0.081
	Single#	3 (25.0%)	
Ethnicity	Brahmin/Chhettri	10 (83.3%)	0.759
	Others**	2 (16.7%)	
Income generating activities	Yes	84 (80.0%)	0.046*
	No	21 (20.0%)	
Dependency	Dependent	7 (58.3%)	0.000*
	Independent	5 (41.7%)	
Health status	Poor	3 (25.0%)	0.000*
	Fair	7 (58.3%)	
	Good	2 (16.7%)	

*N= 105\* (association by chi-square), others \*\* (Dalit, Janajati), # (unmarried, divorced/separated, widow/widower)*

The data presented in the table 3 highlights the association between the prevalence of abuse and socio-demographic variables of the elderly. The association between Income generating activities and elderly abuse is seen ( $p=0.046$ ). Dependency and health status of elderly with elderly abuse are also significantly associated with elderly abuse ( $p=0.000$ ).

### Discussion

This study showed prevalence of elderly abuse to be 11.4% which is less than previous study done in Jureli village (46.6%). The lower prevalence may be due to different research setting and socio-demographic variables (Timalsina, 2021). Among the types of abuse Caregiver neglect (10%) and psychological abuse (10%) were found to be most experienced by elderly which is similar to the findings of the study done in syanga, Nepal which was 23.1% and 20.6% respectively. Similarities may be due to same age group (Acharya et al., 2021).<sup>11</sup>

Among the socio-demographic variables the present study showed elderly abuse significantly associated with elderly's health status (which is similar to the findings of the study

done in Jureli village, Bakaiya (Timalsina, 2021). These findings are also supported by previous study done in Sunsari district (Chalise,2017). The present study found that elderly having fair health were more subjected to abuse than elderly with good health status. Previous study in Jureli village contradicts the association between elderly abuse with dependency of elderly on daily living activities as my study shows significant association between elderly's dependency level in daily living activities with elderly abuse. The indifference may be due to different research setting (Timalsina, 2021). .

The present findings of income generating activities is also associated with elderly abuse ( $p=0.046$ ) but the findings of the study done previously in Bardia district of Nepal contradicts with my present findings which may be due to the difference in research setting and population sample size (Chalise, 2017). The present study findings shows no association of elderly abuse with literacy but previous study contradicts with the findings by showing association of literacy with the elderly abuse (Timalsina, 2021).

### **Conclusion**

The findings of my present study showed that more than one tenth of elderly was found prevalence rate of elderly abuse. Most common form abuse were found to be caregiver neglect and psychological abuse followed by physical and financial abuse. According to the findings of study elderly with poor health status, who are dependent for daily living activities and those who are not involved in income generating activities are more vulnerable to abuse. In this study shows lower prevalence rate in elderly abuse although which is serious issues in our context so prompt need to be taking action prevent it.

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**Conflict of interest:** None

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