

## STUDY ON ABUSE AMONG RURAL ELDERLY

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### **Abstract**

The elderly are often faced with associated problems due to various factors. This article examines a comprehensive understanding of elder abuse among rural elders. Data collected from 335 elders. Nearly three fourth of the respondents were young old with women constituted 57%. Majority of the respondents belonged to Hindu religion, widowed elders with low literacy level. Women living alone and working is more than men. The gender, age, educational level, and living arrangements have influence on the abuse faced by elderly where as health status and work participation does not have any influence. The disrespect was shown as the most prevalent type of elder abuse followed by financial, neglect, verbal and physical. The primary Perpetrator was the daughter-in-law in 58% cases with son in law as least abuser (7%). The reasons attributed for abuses were dependency, inability, illness, poverty and property distribution. More than 80% of these did not report the matter to any authority for uphold of family honour. There is a need to sensitize of family members especially children and strengthening of intergenerational bonding is the most effective mechanisms to tackle Elder Abuse.

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**Introduction:**

Elder abuse is now considered as a global social and public health problem threatening older people. Elderly are often faced with associated problems due to, e.g., chronic illness, family mobility, shrinking public and medical resources. Such factors strain families' ability to provide optimal care and increase the likelihood of elder abuse. This article examines a comprehensive understanding of elder mistreatment. Such understanding is critical to identifying the risk, improving early detection, and providing sensitive intervention for elders in communities with increasingly diverse populations.

**Elder Abuse:**

WHO defined elder abuse (2002) as 'A single or repeated act or lack of appropriate action occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person'. The abuse may be Physical, Emotional, Sexual, Exploitation, Neglect and Abandonment. Elder abuse may be domestic; taking place in the home of the abused or in the home of a caregiver, or it may be institutional, taking place in a residential facility for the elderly.

**Need for the study:**

There is also a recent legislation on Maintenance and Welfare of Parents and Senior Citizens Bill', which provides an understanding of 'elder abuse' in the Indian context. Many of the elders are not aware of the programmes related to them offered by the govt. and their entitlement from their families. Thus this study is undertaken to determine the important factors of elder abuse in rural setting.

**Objectives:**

1. To study socio-economic profile, types and source of abuse among elders in rural area.
2. To study level of awareness and utilization of welfare and social security schemes available for Elderly.
3. To find out the suggestions to prevent abuse among elders.

**Materials and Method:**

The study is based on the data of 335 elderly who are residing in rural area of Dindigul district, Tamil Nadu during 2014. The descriptive study design is followed in this investigation. The respondents were interviewed using the pre-tested interview schedule. The interview was carried out in the local language after obtained oral consent of the respondents.

**Sample selection:**

For this investigation two community development blocks were randomly selected in Dindigul district. From each community development block two primary health centres were selected randomly. From each primary health centre two health sub centres were randomly selected. From each health sub centre area 40 respondents were selected randomly, likewise 335 respondents selected.

**Results: Socio-demographic characteristics:**

The majority (73.4%) of the elders was young old (60-69 years). The women respondents constituted 57.3% whereas men constituted 42.7%. The highest of respondents belonged to Hindu religion (80%) followed by Muslim 11% and Christian 9%. It is observed that the percentage of widowed elders is more (49.2%) followed by married (44.2%) and unmarried (6.6%) elders. The literacy level was found to be low (37%). The findings indicated that about 22% of the elderly are currently living alone. The percentage of women (78%) respondents living alone is more than men (22%) respondents. There is a significant difference noted among gender in their living arrangements ( $p=0.000$ ). Majority of elders are working (58%) for their livelihood. The percentage of working is more among men (56.4%) than women (43.67%). When explored the necessity for work participation a majority (70%) of them work due to economic necessity and not by choice.

**Table: 1 Demographic and socio-economic characteristics**

Characteristics	Men=143		Women=192		Total=335		Chi Square	P-Value
	No	%	No	%	No	%		
<b>Age group (in years)</b>								
Young Old (60-69)	93	65	153	80	246	73	9.085*	0.011*
Adult Old (70-79)	23	16	19	10	42	12		
Oldest old (80+)	27	19	20	10	47	14		
	143	43	192	57	335			
<b>Religion</b>							0.012	0.994 NS
Hindu	114	80	154	80	268	80		
Muslim	16	11	21	11	37	11		
Christian	13	9	17	9	30	9		

<b>Marital Status</b>								
Married	114	80	34	18	148	44	134.375**	0.000**
Unmarried	9	6	13	7	22	7		
Widowed	20	14	145	76	165	49		
<b>Educational Qualification</b>							21.648**	0.001**
Illiterate	70	49	141	73	211	63		
Up to Vstd.	30	21	22	12	52	16		
VI-VIII std	23	16	17	9	40	12		
High School	15	10	8	4	23	7		
Graduate	2	2	2	1	4	1		
Others	3	2	2	1	5	2		
<b>Living Arrangements</b>							38.832**	0.000**
Alone	16	11	57	30	73	22		
With spouse	34	24	8	4	42	13		
With unmarried children	20	14	31	16	51	15		
With married children	72	50	93	48	165	49		
With others	1	1	3	2	4	1		
<b>Work participation</b>							0.13	NS
Working	110	77	85	44	195	58		
No work	33	23	107	56	140	42		
<b>Present Health status</b>							26.367**	0.000**
Healthy	50	59	35	41	85	25		
Fairly healthy	62	49	65	51	127	38		
Unhealthy	31	25	92	75	123	37		

Note: \*\* significant at 1% level; \* Significant at 5% level NS: Not significant

### Health status:

The respondents were asked to rate their health during the last year on three point scale namely, healthy, fairly healthy and unhealthy in comparison to the previous year. It is found that 25 % rated their current health status as healthy, 38% of rated as fairly healthy and 37% rated as

unhealthy. The men (59%) are healthier than their counterpart (41%). There is a significant difference among men and women elderly with respect to their health status (p value 0.00\*).

### **Abuses among Elderly:**

About 38% of elders are facing abuses. It is noted that 48.4% of the abused elderly are young old. The elderly women respondents are facing more abuse than men in all age groups. The significant difference is noted with respect to the abuse faced among men and women respondents (p value 0.003\*\*). The women respondents were faced abuse more frequently than men whether it is rarely or often. The difference is not statistically significant among the respondents whether it is rarely or often faced abuse by the respondents. Elderly who were widowed are more susceptible to ill treatment as 52% of them reported to have suffered from abusive behaviour while the corresponding figure for married elderly is 36% and unmarried elderly is 13%. It is appeared that women elderly faced more abusive behaviour than men elderly in all categories of marital status which is not statistically significant (p value 0.867). Out of those who faced abuse nearly 54% of elderly were illiterates. The women illiterates are faced more (85%) abuse than the men (15%). The differences noted among different educational status among men and women are statistically significant (p value 0.000\*\*\*). The women respondents who are living alone, with unmarried/married children and with others are facing more abuse than men except those who are living with spouse. The significant difference is noted among the respondents who had faced abuse with their living arrangements (p value 0.001\*\*\*).

The unhealthy elders are faced more abuses (60.3%) than those who were fairly healthy (30.2%) and healthy (9.5%). Women respondents are more susceptible to ill treatment than men respondents irrespective of their health status. The health status does not have any influence among elderly with respect to the abuse faced. This finding is somewhat against to the prevailing view, which suggests that oldest of the old are the most vulnerable group who receive ill treatment. The respondents who are not working (58.7%) faced more abuse than those who are working (41.3%). The women are facing more abuse than men, irrespective of their working status. The work participation does not have any influence on the abuse faced by the elders (Table 2).

### **Table 2 Per cent distribution of Elderly faced Abuse**

Variable	Men		Women		Total	Chi Square	P-Value
	No	%	No	%			
<b>Abuse faced</b>							
Yes	41	33	85	68	126	8.499**	0.004**
No	102	49	107	51	209		
<b>Total</b>	<b>143</b>	<b>43</b>	<b>192</b>	<b>57</b>	<b>335</b>		
<b>Frequency of abuse</b>							
Rarely	25	36	45	64	70	0.72	NS
Often	16	29	40	71	56		
<b>Total</b>	<b>41</b>	<b>33</b>	<b>85</b>	<b>68</b>	<b>126</b>		
<b>Age in years</b>							
Young Old (60-69)	11	18	50	82	61	11.378**	0.003**
Adult Old (70-79)	13	45	16	55	29		
Oldest old (80+)	17	47	19	53	36		
<b>Total</b>	<b>41</b>	<b>33</b>	<b>85</b>	<b>68</b>	<b>126</b>		
<b>Marital Status</b>							
Married	15	33	30	67	45	0.285	0.867NS
Unmarried	6	38	10	63	16		
Widowed	20	31	45	69	65		
<b>Total</b>	<b>41</b>	<b>33</b>	<b>85</b>	<b>68</b>	<b>126</b>		
<b>Educational level</b>							
Illiterate	10	15	58	85	68	22.512**	0.000**
Up to V Std.	13	62	8	38	21		
VI-VIII Std.	8	47	9	53	17		
High School	10	50	10	50	20		
<b>Living Arrangements</b>							
Alone	2	40	3	60	5	19.314**	0.001**
With spouse	14	70	6	30	20		
With unmarried children	8	42	11	58	19		
With married children	17	21	63	79	80		

With others	0	0.0	2	100	2		
<b>Present Physical Condition abuse faced</b>							
Unhealthy	25	33	51	67	76	0.0238	NS
Fairly healthy	12	32	26	68	38		
Healthy	04	33	08	67	12		
<b>Work participation</b>							
No work abuse faced	25	34	49	66	74	0.13	NS
Working abuse faced	16	31	36	69	52		

Note: \*\* Significant at 1% level      NS: Not significant

**Types of abuses:**

In this investigation disrespect (60.3%) was shown as the most prevalent type of elder abuse followed by financial (49.2%), neglect (43.7%), verbal (34.1%) and physical (27.8%) abuses which can be seen from Table: 3.

**Table: 3 Types of Abuse faced by Elderly**

Types	Men=41		Women=85		Total=126	Z value	Significant
	No	%	No	%	No		
Neglect	25	61	30	35	55	2.758*	*
Verbal	22	54	21	25	43	3.210**	**
Physical	12	29	23	27	35	0.235	NS
Financial	20	49	41	48	62	0.105	NS
Disrespect	27	6	49	58	76	0.861	NS
Multiple	11	27	21	25	32	0.241	NS

Note: \*\* Significant at 1 % level      \* Significant at 5%      NS: Not significant

The physical abuse was reported as least one (27.8%) among the respondents. Nearly one fourth of them faced multiple abuses. The women elderly are facing more abuses of all types than men except verbal abuse. The difference is significant only among elders who faced verbal and neglect abuses (P value is 2.758 and 3.21, significant 5% and 1% levels respectively). Those who faced abuse, nearly 56% of them faced rarely whereas the rest (44%) faced often.

**Sources of abuse:**

Those who faced abuse the primary abuser was the daughter-in-law in 58% cases with son in law as least abuser (7%). The older women (70%) identified daughter in law as the primary abuser followed by relatives (65%), neighbours (60%), spouse (68%), son in law (56%), daughters (53.1%) and sons (50%). Among men the primary abuser was son with least abuser was daughter in law (30%). The women respondents are facing more abuse in all categories of abusers than the men. A significant difference is noted among the respondents when the abusers were sons and daughters (Table 4 Z value 3.444\*\*, 2.050\*). There is no significant difference noted among the other sources of abuses.

**Table 4: Source of Abuse among Elderly**

Sources	Men N=41		Women N=85		Total N 126	Z value	Significant
	No	%	No	%			
Son	25	61	25	29	50	3.444**	**
Daughter	15	37	17	20	32	2.050*	*
Son in law	4	10	5	6	9	0.809	NS
Spouse	14	34	30	35	44	- 0.11	NS
Daughter in law	22	54	51	60	73	- 0.639	NS
Relatives	13	32	24	28	37	0.462	NS
Neighbours	20	49	30	35	50	1.506	NS

**Note: significant at \*\* 1 % level, \* significant at 5% level; NS not significant**

**Reasons for abuse among elderly:**

Those who are dependant faced more (65%) abuses. The other reasons attributed for abuse are inability (63%), illness (63%) poverty (60%) and property distribution (53%). There are significant differences are noted among men and women respondents when poverty, dependency, property distribution and illness are reported as reasons for abuses (Table 5, Z value is significant at 5% and 1 % levels).

**Table: 5 Reasons for abuse**

Reasons for abuse	Men=41		Women=85		Total= 126	Z value	Significant
	No	%	No	%			
Poverty	31	76	44	55	75	2.574*	*
Dependency	17	42	65	77	82	-3.849**	**



Property Distribution	37	90	30	35	67	5.795**	**
Illness	34	83	45	53	79	3.264**	**
Inability	26	63	53	62	79	0.109	NS

**Note: \*\* Significant at 1 % \* Significant at 5% NS: Not significant**

**Report of the abuses face:**

It is reported in this study 38% of older persons reported facing abuse one or the other. More that 80% of these did not report the matter to any authority for uphold of family honour. Nearly 75% of them suggested that sensitization of children and strengthening of intergenerational bonding is the most effective mechanisms to tackle elder abuse and the rest (25%) stated it to be economic independence.

**Discussion:**

The care of elders and their relations in the family are undergoing many changes. There is an evidence from crime records and court proceedings which indicate that elder abuse is prevalent in India (Senior’s Cell at police Headquarters, Delhi, June 2007). Eriksson, 2001 found that elder abuse was prevalent found in Sweden, among men 13% and 16% of women over 65 years reported experiencing some form of abuse. In another study by Dong, Simon, & Gorbien, 2007, found that over 35% of elders reported being mistreated or abused. Eisikovitz, et al, 2005 indicated that Jewish and Arab Israeli elders, over 18% of elders had experienced at least one form of abuse. Jamuna,2003 found that there is increased elder abuse and neglect have been voiced in India, where a growing percent of the total population is elderly and two-thirds of older people live in rural villages far from medical or social services.

The findings of this study also supported that the elder abuse is prevalent in rural areas of Tamil Nadu. It is found that 37.6% of elders are facing abuses. The elderly women respondents are facing more (67.5%) abuse than elderly men respondents (32.5%). It is noted that majority (48.4%) of the abused elderly are young old, i.e., between 60-69 years (Ismail Tareque, et, al 2008, Mathew Cherian 2012). This finding is somewhat against to the prevailing view, which suggests that oldest of the old are the most vulnerable group who receive ill treatment. This result can be explained by the fact that many oldest elderly respondents embarrassed to admit their ill-treatment openly. Or it may be due to the new generation elders are unable to adjust them with the younger generation.

Elderly who were widowed are more susceptible to ill treatment as 52% of them reported to have suffered from abusive behaviour while the corresponding figure for married elderly is 36% and unmarried elderly is 13% only. Out of those who faced abuse nearly 54% of elderly were illiterates. The educational status has influence among elder abuse which is endorsed by findings of Ismail Tareque, et, al 2008. The significant difference is noted among the respondents who had faced abuse with their living arrangements. The unhealthy elders are faced more abuses (60.3%) than those who were fairly healthy (30.2%) and healthy (9.5%). Women respondents are more susceptible to ill treatment than men respondents irrespective of their health status. The health status does not have any significant influence among elderly with respect to on the abuse face by elderly. The women are facing more abuse than men, irrespective of their working status. Nearly one fourth of them faced multiple abuses. The women elderly are facing more abuses of all types than men except verbal abuse and also they faced abuse more frequently than men whether it is rarely or often. (Rao 1995, Siva Raju, 1999, et, al). Those who faced abuse the primary abuser was the daughter-in-law, in 58% cases with son in law as least abuser (7%). It is noted that daughter in law as the primary abuser among women whereas it is son among men. The reason for the abuse is dependency (65%). It is found that 38% of elders are facing abuse one or the other. More than 80% of them did not report the matter to any authority. Nearly 75% of them suggested that sensitization of children and strengthening of intergenerational bonding is the most effective mechanisms to tackle Elder Abuse and the rest stated it to be economic independence.

**Conclusion:**

Elder abuse was reported worldwide. Similar concerns of increased elder abuse have been reported in India also. Elders suffering from depression, poor health or physical impairments were more at risk of being abused than those of similar age and normal health status. A large section of victims of elder abuse are less educated and with no regular income of their own are found to be subject to abuse. It is essential to involve of society at large in prevention of elder abuse. It is essential that sensitization of health care providers to recognize the importance for care and treatment of elders. Mobilize the support from the media through information dissemination in fighting Ageism and creating awareness on general issues of ageing. The school and college students are to be sensitized on the care elders. The NGOs may be properly involved in provision of care to the elders. The national policies for the elder's

welfare are to be effectively monitored and implemented with state govt. support and other sectors.

**References:**

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