

Violence against elderly: An integrative review

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Abstract

This study aimed to conduct an integrative review of scientific knowledge produced in Brazil between 2013 and 2017, emphasizing the descriptors violence and the elderly. The scientific productions were selected in the SciELO database with crossings of the descriptors used in the title of the articles, available online in

full form, with the period limitation from 2014 to 2018, in Brazil collections and Portuguese language. The search in the database generated 26 articles, and ten of them were chosen for the final analysis after applying the inclusion and exclusion criteria. The present integrative review showed that the central violence suffered was psychological, along with physical violence, with the elderly being the main victims. The findings related to violence against the elderly and associated factors reveal a scenario that is most prevalent in the home, an environment where the belief of a welcoming, loving and protective nature of external violence is deposited. In contrast, the intrafamilial relationship emerges concomitantly as a generator of conflicts that expose the elderly to the risk of violence of a character veiled, caused by the constituents themselves, which requires high vigilance and notification. Violence is a social challenge. We must prioritize research, work, and discuss the abuse of older people in political circles and understand the best way to prevent and help implement the necessary measures.

Keywords: elderly; violence; integrative review.

1. Introduction

One of the most significant cultural achievements of a people in its humanization process is the aging of its population, reflecting an improvement in living conditions. Aging is a universal process that characterizes a stage of life permeated by social, psychic, environmental, and biological changes that make up the regular and integral development of man [1].

Given this context, it becomes evident the health condition of the elderly, contextualized by Pitanga [2] as a multiplicity of aspects of human behavior aimed at a complete physical, mental, and social well-being. It can be divided into positive or negative health associated with the human condition represented by physical, social, and psychological dimensions. Positive health would be related to the ability to enjoy life and overcome daily challenges, and negative health would be associated with morbidity and mortality.

Regarding the aging process, Debert [3] reflects on the reinvention of old age as a set of interfaces, alluding to old age as a reality with their stories and experiences. Here represented by stories and unique life experiences, lived in the socioeconomic, cultural, and ethnic context in which each one is inserted.

Population aging has become a worldwide reality and, in Brazil, it has been accelerated, imposing changes in social policies and new challenges for public health. Among these, violence against the elderly stands out, since it affects all social levels and can cause emotional disturbances, isolation, feelings of guilt and denial, physical trauma, and death. Elder abuse refers to physical, psychological, sexual, abandonment, neglect, financial abuse, and self-neglect [4].

Violence against the elderly is the outbreak of any act or omission, whether intentional or involuntary, that causes physical, psychological, financial, or material harm. It is the representation of the loss or violation of human rights that results in unnecessary suffering, injury or pain, with the consequent reduction in the quality of life of individuals [5].

Violence against the elderly is present at various social levels and has relevant consequences on the health of this population. Violence impacts negatively on the physical and mental health conditions of older people, as it has social impacts contributing to low self-esteem, social isolation, feelings of insecurity and

it also reinforces the negative aspects of old age. Thus, it is a challenge for public health, as it imposes the need for specific social policies and new directions for full health care attention for the elderly [6].

Internationally and in Brazil, according to Minayo and Souza [7], some categories have been used to classify the different types of violence of which the elderly are victims. Physical abuse, mistreatment or physical violence are expressions that refer to the use of physical force to compel older people to do what they do not want to, to hurt them, to cause them pain, disability or death. Psychological abuse, psychological violence, or mistreatment are verbal or gestural aggressions aimed at terrorizing the elderly, humiliating them, restricting their freedom or isolating them from social life. Sexual abuse and sexual violence are terms that refer to homosexual or hetero-related sexual acts or games that use older people to obtain arousal, sexual intercourse, or erotic practices through grooming, physical violence, or threats. Abandonment is a form of violence that manifests itself in the absence or defection of governmental, institutional, or family leaders to provide relief to an older person in need of protection. Negligence refers to the refusal or omission of due and necessary care for the elderly by family or institutional leaders. Neglect is one of the most prevalent forms of violence against the elderly in the country. It is often associated with other forms of violence that generate physical, emotional, and social injuries and trauma for the elderly, in particular for those who find themselves in a situation of multiple dependency or disability. Financial and economic abuse is the improper or illegal exploitation of the elderly or the unauthorized use of their financial and patrimonial resources. This type of violence occurs mainly in the family environment. Self-neglect refers to the conduct of the elderly who threatens their own health or safety by refusing to provide necessary care to themselves.

Violence against the elderly is part of social violence, that is, in Brazil and the world, it is expressed in how society organizes its relations of class, gender, ethnicity and age groups, and how power is exercised in the macro and micropolitical, and institutional spheres. In this specific case, relationships within the family institution have peculiar relevance [7].

Family violence is emphasized as the most frequent form of abuse that older people suffer. Researches show that about 2/3 of the perpetrators are children, relatives, and spouses. The abuses and neglect that are perpetuated by the clash of generations, problems of crowding people in households or lack of conditions and willingness to care for them are particularly relevant [8, 3].

Given the above, this study aims to perform an integrative review and analyze the Brazilian scientific production of the descriptors violence and elderly available in the SciELO database.

2. Methodology

It is an integrative review, whose purpose is to gather and synthesize research results on a delimited theme or issue, in a systematic and orderly manner, contributing to the deepening of the knowledge of the investigated theme. For the development of the study, the methodological steps, constituted from the identification of the theme, were followed, together with the elaboration of the research questions, establishment of the inclusion and exclusion criteria, sample selection, definition of the information to be extracted from the selected studies, organization and presentation of the studies in table format, description of results and discussion [9].

The research of the articles was carried out from June 16 to July 17, 2018, online, using the scientific productions selected in the SciELO database and the descriptors crossing in the title of the articles: violence and the elderly. The criteria for the inclusion of articles were: papers published in the format of scientific articles that had the descriptors in the title, available online in full, with the period limitation from 2014 to 2018, in collections Brazil and in the Portuguese language. Studies in which the information contained in the abstract showed no relation to the theme were excluded. The search in the database generated 26 articles, available online in the SciELO database. After applying the inclusion and exclusion criteria, thirteen articles approached the theme. However, considering the methodological context of the studies, ten articles were chosen for final analysis.

3. Results

The selected articles were analyzed in full, in order to respond to the objective of this study and grouped by themes in the Execution Matrix (Chart 1).

1. Execution Matrix

Title/Author/Journal/Year	Objectives
1. Violence against the elderly in three Brazilian municipalities. RODRIGUES, R. A. P. et al. Rev. Bras. Enferm., 2017. [10]	Identifying violence against the elderly in different regions of the country. This study brings an analysis of the bulletins registered by seniors at the Police Station for the Elderly, in three Brazilian municipalities.
2. Mistreatment of the elderly in Porto Alegre, Rio Grande do Sul: a documentary study. IRIGARAY, T. Q. et al. Estud. psicol. (Campinas), 2016. [11]	Verifying the prevalence and types of abuse suffered by the elderly in the city of Porto Alegre (RS), registered at the Police Station for the Elderly. Describe the profile of the victim and the perpetrator and identify the reported reasons related to the occurrence of abuse in this age group.
3. Violence Against the Elderly in the Family: Motivations, Feelings, and Needs of the Aggressor. SILVA, C. F. S.; DIAS, C. M. S. B. Psicol. Cienc. Prof., 2016. [12]	Investigating violence against the elderly in the family, from the perpetrator's perspective, specifically the motivations that drove them to violence, the feelings and needs felt by them.
4. Prevalence of violence against the elderly and associated factors, a population-based study in Florianópolis, SC. BOLSONI, C. C. et al., Rev. Bras. Geriatr. Gerontol., 2016. [13]	Estimating the prevalence of violence against the elderly and analyzing its association with demographic and socioeconomic factors and health conditions.
5. Elderly victims of abuse: five years of documentary analysis. GARBIN, C. A. S. et al. Rev. Bras. Geriatr. Gerontol., 2016. [14]	Verifying the occurrence of abuse against the elderly and its characteristics (location, type, reason, alcohol/drug involvement, profile and kinship among victims and aggressors), based on the police records of a specialized police station, over five years.

6. Physical and psychological violence against the elderly: prevalence and associated factors. PAIVA, M. M.; TAVARES, D. M. S. Rev. Bras. Enferm., 2015. [4]	Verifying the prevalence and factors associated with physical and psychological violence against the elderly and tracing the sociodemographic profile and clinical indicators of this population.
7. Physical and sexual assaults on elderly reported in the city of São Paulo. RODRIGUES, C. L.; ARMOND, J. E.; GORIOS, C. Rev. Bras. Geriatr. Gerontol., 2015 [15].	Characterizing the elderly population that suffered physical and sexual violence and describing the characteristics of this aggression, based on the Violence and Accident Surveillance Information System (VASIS), of the Municipal Health Secretary of the city of São Paulo.
8. Violence against the elderly: description of cases in the city of Aracaju, Sergipe, Brazil. AGUIAR, M. P. C. et al., Esc. Anna Nery, 2015. [16]	Characterizing violence against the elderly, identifying the socio-demographic profile of the victim and their aggressors, as well as knowing the conduct applied by professionals after identifying the elderly victim of abuse.
9. Functional capacity and situations of violence in the elderly. FAUSTINO, A. M.; GANDOLFI, L.; MOURA, L. B. A. Acta paul. enferm., 2014. [17]	Verifying if there is a relationship between the functional capacity of the elderly and the presence of situations of violence in their daily lives.
10. Expression of intrafamily violence against the elderly. REIS, L. A. et al., Acta paul. enferm., 2014. [18]	Unveiling the forms of expression of intrafamily violence experienced by the elderly with impaired functional capacity

According to the investigation of violence against the elderly carried out by Rodrigues et al. [10] in the municipalities of Ribeirão Preto (SP), Teresina (PI) and João Pessoa (PB), the results revealed a predominant age of 60 to 69 years old, mostly women and married. The perpetrators were mostly adults, men, and relatives of the victim, living or not with the older person. In Teresina, there were some cases where the aggressor lived with the elderly. In this study, the offender's use of alcohol and drugs was also highlighted, indicating that the use of illicit substances impairs their health and brings consequences to other family members, thus being a significant risk factor against the elderly in three Brazilian municipalities in the analysis of violence. The records analyzed contained more than one type of violence by the elderly, but the predominant one was psychological, in their residence. This data allows us to understand the map of family relationships and the reasons for this violence. This view contributes to intervention projects for family members of the elderly. In the city of Ribeirão Preto, the second most frequent type of violence was physical, and in the cities of Teresina and João Pessoa, the financial one. These findings are significant because they are two capitals whose populations have low incomes. Most older people receive social benefits and suffer this kind of problem, including with family members.

The results of the study by Irigaray et al. [11] showed that, among the police reports analyzed, the prevalence and types of abuse suffered by the elderly in the city of Porto Alegre (RS) were, mostly, situations of abuse, being the most frequent the psychological abuse committed by family members within the home of the elderly. Regarding the victim's profile, in most cases, it is female, with advanced age, without a partner (widow, single or separated) and with low education. In general, the mistreatment was mainly committed by middle-aged male children who had a financial interest in the victim.

In the study by Silva and Dias [12], from the city of Recife, the verbal and physical aggressions, that occurred concurrently in the disputes, prevailed. Generally, the situations that culminated in violence began with verbal aggression and later the physical one. The main motivations that drove violence were: alcohol abuse; physical proximity, in the sense of lack of physical space making it difficult for privacy; the aggressor's financial dependence on the elderly; relationship permeated with violence due to the occurrence, or not, of aggression suffered in the family, especially by the elderly. In this study, there have also been portrayed the feelings experienced by the elderly and their families, evidencing frequent mention of sadness, disappointment, impatience, anger, injustice, anguish, resulting in difficulty sleeping, crying, anger, loneliness.

In the study by Bolsoni et al. [13], held in Florianópolis, SC, showed that approximately 12.4% of participants reported having suffered some violence. The prevalence found is twice that estimated by the WHO for the elderly population. Among the types of violence, the psychological one was more prevalent. Financial violence ranked second among the most frequent. Women reported suffering more violence compared to men, a recurring finding in studies of violence. The elderly who live with children and grandchildren are the most abused, as are women, low education, single/divorced, and those with functional dependence.

In the study by Garbin et al. [14], the rate of cases of elder abuse registered in the police unit studied was 4.62%, and that can be considered low when compared to all occurrences recorded in this police unit. The most prevalent age group of the victim was from 60 to 65 years old, indicating that the degree of independence of the elderly is directly related to age, facilitating the search for help. Most of the victims were married and homemakers. Regarding the profile of the aggressor, most were male and had a close relationship with the victim. The fragility of family relationships can explain this situation, worn out by routine problems because the main reason that led to the aggression was the discussions and disagreements.

In the study by Paiva and Tavares [4], carried out in the city of Uberaba, MG, the most significant proportion of elderly people submitted to physical and psychological violence refers to those who lived with their spouse; had adverse self-rated health; were hospitalized in the last year; and had a higher number of morbidities compared to those who were not victims of violence. Physical and psychological violence was associated with the age group of 60-80 years old, women, living with their spouse, and being dependent for Instrumental Activities of Daily Living (IADL).

The reported cases of physical aggression in the study by Rodrigues, Armond, and Gorios [15], in the city of São Paulo, SP, were higher in the elderly male (52.3%), with the use of body strength, predominant in the age group between 60 and 64 years old, committed by relatives and/or acquaintances of the victims. Sexual assault was predominant in females. Most of these aggressions (physical and sexual) occurred in the residence of the elderly. According to data collected from the Violence and Accident

Surveillance Information System, the main diagnosis was head trauma, and 65.0% of the cases were immediately discharged.

The findings found in the city of Aracaju, Sergipe, in a study by Aguiar et al. [16] showed that retired women are the most frequently assaulted in their homes by their male children, over 40 years old and who are unemployed. These men had no more than elementary school, were under suspicion of drug use and were charged in most cases. Moreover, the study shows that, despite the predominance of psychological violence, it occurs in an associated way, due to the overlap of sociodemographic factors.

A study by Faustino, Gandolfi, and Moura [17], conducted in the city of Brasilia (DF), Midwest region of Brazil, showed a statistically significant association between being dependent on basic self-care activities and suffering physical violence, that is, the more the elderly needs help to perform body hygiene activities, transfers, food aid, among others, the higher the chance of exposure to the situation of physical abuse.

The narratives of the elderly interviewed in a municipality located in the southwest region of the state of Bahia, in the study by Reis et al. [18] points out that they realize that dependence on others exposes them to situations of violence, expressed here by neglect, psychological violence, and financial exploitation, especially through the misappropriation of assets.

4. Discussion

The studies of this review showed that the most elderly who suffered aggression is represented by women, which denotes a gender cut in the violence suffered by older people. This result corroborates data from the National Health Survey conducted in 2013, which identified, among the cases of violence against people aged 60 and over, that 61.3% were against females [19]. This occurrence portrays the woman as a vulnerable member to physical and psychological violence within the family environment.

Another factor observed about violence against the elderly was the close relationship between the victim and the aggressor. The occurrence of violence against the elderly is more frequent in the family environment. This relationship can be intensified when the elderly have their autonomy impaired by illness and disability, and family members acquire the role of caregivers. The National Health Survey, conducted in 2013, found that of the aggressions suffered by the elderly, 70.1% were performed at their residence (BRAZIL, 2015). Among the reasons related to this proximity to aggression, the family context is highlighted, which is often stressful and contains the presence of unprepared or overwhelmed caregivers, or even the dependence relationship (physical, emotional, cognitive and financial) that leads vulnerability during the aging process[20].

The studies of this review showed remarkable results related to psychological violence, since the elderly often feel depressed by the powerlessness in the face of the situation, triggering an avalanche of losses related to financial, psychological and physical aspects, often irreversible [21]. Older people become more vulnerable to violence as they are more dependent due to the physical, emotional, and cognitive limitations inherent in the aging process. Stressful family life and unprepared or overwhelmed caregivers tend to aggravate this situation [20].

Financial violence, the use of drugs or alcohol by the aggressor are among the reasons portrayed in studies that lead to aggression, constituting a risk factor evidenced in the studies, with children and grandchildren as the main agents of this type of violence. This scenario may be related to dependence on the family member, the income of the elderly, or the inability of the elderly to manage their own financial lives. This type of mistreatment is not related to the social class of the victim, as it occurs in both the most privileged and those with the least possessions [21].

Through this integrative review it was also possible to verify situations of violence and mistreatment associated with increased dependence, that is, elderly who need help for self-care or to perform more complex daily activities, mainly due to physical disabilities, have higher risk, especially when there is not a good relationship between the elderly and family or caregiver. According to Reis et al. [18], old age carries the stigma of the functional and social disability of the individual, reducing the elderly, often, to a burden to their guardians, thus contributing to family and social exclusion, and intrafamily violence.

Concern about violence against the elderly, as well as the demand for public policies to fight it, certainly require a review of this glamorous perception of the most advanced stages of life. For some authors, the view of old age as a situation of loss and dependence has been replaced by a more positive view of aging. It is, however, necessary to note the coexistence of these distinct stages of old age and how public policies notice one or the other of these stages. Debert and Oliveira [22] emphasize that a more positive view of aging needs to be addressed, signaling the situation of violence against this older person and its struggle along with public policies. This view should be in order to create mechanisms capable of strengthening and stimulating the family and its members to perform their roles, thus giving specific impetus to the functioning of police stations, the complaints presented there, the profile of the victims and the identification of their aggressors.

5. Conclusion

The findings related to violence against the elderly and associated factors reveal a scenario that is most prevalent in the home, an environment where the belief of a welcoming, loving and protective nature of external violence is deposited. In contrast, the intrafamilial relationship emerges concomitantly as a generator of conflicts that expose the elderly to the risk of violence of a character veiled by the constituents themselves, which requires high vigilance and notification.

Despite the existence of laws that guarantee the defense of dignity and well-being in old age, many efforts still need to be made to fulfill them. A stimulus is needed so that the public power, together with health professionals and the general population, will discuss this issue and develop public policies that reduce the rate of violence against the elderly. Violence is a social challenge. We must prioritize research, work, and discuss the abuse of older people in political circles to understand the best way to prevent and help implement the necessary measures.

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