

Abstract

Introduction:

Elder abuse is defined 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". However, due priority was not given to identify abuse of the elderly in Sri Lanka. The present study was undertaken with the objectives of developing a valid and reliable instrument to estimate the prevalence of elder abuse among elders of 60 years and/or above group in the MOH area of Kaduwela in the District of Colombo and to identify the correlates associated with elder abuse.

Methodology

Component I of the study developed and validated an interviewer administered questionnaire – the Elder Abuse Assessment questionnaire (EAAQ), to assess the prevalence of elder abuse in a community setting. Subtypes and methods of abuse common to the Sri Lankan situation were generated by reviewing existing instruments, literature review and focus group discussions. Item reduction of EAAQ was established through the process of the Modified Delphi Technique. Judgmental validity (face content and consensual) was assessed by a group of experts and the criterion validity was assessed by calculating the sensitivity and specificity of the EAAQ by using the clinical diagnosis of a Consultant Psychiatrist as the gold standard.

Component II of the study was a cross sectional survey conducted among a community based sample of 1500 elders aged 60 and/or above to assess the prevalence and correlates of elder abuse. The elders included in the survey were chosen by cluster sampling and the Grama Niladari Division was considered as a cluster. Fifty seven of such clusters were within the MOH area while 27 elders were selected from one cluster. Only one eligible elder was randomly selected from one household.

Component III was a comparative cross sectional study which assessed the correlates in elder abuse. The elderly persons who had experienced any physical, emotional, financial abuse and neglect during the prevalence study was considered as study units and considered to be having at least two types of abuse.

Results:

The sensitivity for overall abuse in the EAAQ was 83.7% (95% CI 70.9-91.4) and specificity for overall abuse was 92.7% (95% CI 87.4-92.7). The reliability of the EAAQ, assessed using KR-20 was found to be satisfactory.

The overall response rate was 96.5%. The prevalence of any type of abuse was 19.2% while the prevalence of physical abuse was 2.7% (95% CI 1.9-3.7) and the prevalence of financial abuse was 3.7% (95% CI 2.8-4.6). The prevalence of emotional abuse was 14.4% (95% CI 12.7-16.6) while prevalence of neglect was 15.1 (95% CI 13.3-17.0). Children were the main perpetrators of abuse followed by the daughters or sons-in-law. About 16% of the abused elders were unwilling to disclose about the perpetrators.

Correlates of elder abuse (victims) in the present study in bivariate analysis were increasing age; illiteracy; low educational level; no occupation or occupation with an irregular income; low standard of living; ownership of the living place by children or others; problems of children and grandchildren; poor practical support by caregivers; uncertainty of care giving; dissatisfaction about visits by children living away from the elders; low social relationships and low social activities; no income or less income; totally dependent on care givers financially; and having depression.

The correlates for elder abuse identified in the multivariate analysis included lower educational level of elder (AOR 2.2; 95%CI 1.2-3.4); problems of grand children (including disabling chronic disease, disability mental disability, alcohol and drug abuse, gambling and illegal work) (AOR 4.0: 95% CI 1.2-13.9); poor practical support from the family members (AOR 4.6: 95% CI 2.8-7.7); and having depression (AOR 11.1; 95% CI 6.5-18.5).

Conclusions and Recommendations:

The EAAQ is proved to be a valid screening instrument to identify elderly people who suffer abuse or who are at high risk of being abused.

As elder abuse exists to a considerable extent in Sri Lanka, it is recommended that availability of valid instrument for its measurement (EAAQ) and correlates of elder abuse made known to the relevant authorities and also to the scientific community. Health care professionals are encouraged to screen elders who are at risk under their

care using EAAQ. Awareness programmes should be initiated by Ministry of Social Services and further social support done through elder protective services.

Key words: elder abuse, mistreatment, prevalence, correlates