

Research Article

The Elderly Neglect Residing in the Families of Delhi: A Cross-sectional Study

Shilpi Sarkar¹, Ellen Beck², Rohini Sharma³, Shabana Khatun⁴

¹Assistant Professor, ^{2,3}Research Scholar, Rufaida College of Nursing, Jamia Hamdard, Delhi, India

⁴Lecturer, College of Nursing, SGPGIMS, Lukhnow, India

DOI: <https://doi.org/10.24321/2455.9318.202410>

I N F O

Corresponding Author:

Shilpi Sarkar, Rufaida College of Nursing, Jamia Hamdard, Delhi, India

E-mail Id:

shilpisarkar@jamiyahamdard.ac.in

Orcid Id:

<https://orcid.org/0000-0001-9446-6925>

How to cite this article:

Sarkar S, Beck E, Sharma R, Khatun S. The Elderly Neglect Residing in the Families of Delhi: A Cross-sectional Study. Int J Nurs Midwif Res. 2024;13(3):27-33.

Date of Submission: 2024-07-15

Date of Acceptance: 2024-09-12

A B S T R A C T

Background: According to the World Health organisation, abuse of older people can lead to serious physical injuries and long-term psychological consequences. Abuse of older people is predicted to increase, as many countries are experiencing rapidly ageing populations.

Objectives: The present study was aimed at assessing the elderly neglect in families residing in the capital city of India and at finding the association between elderly neglect and the socio-demographic variables of elderly people.

Methods: A cross-sectional study was done, and data was collected from five distinct urban colonies of Delhi. Using quota sampling, a non-probability sampling technique, fifty elderly people were enrolled in the study in January, 2024. A structured, pre-tested and validated interview schedule was used to collect information related to self-perceived experience of neglect in their family from elderly people of age 60 years and above. Informed voluntary consent was obtained from all the study participants. Data was analysed with descriptive statistics and the chi-square test/Fischer's exact test using SPSS 16 with $p < 0.05$ level of significance.

Results: The study findings revealed that 40 out of 50 (80%) elderly were affected by neglect in their families with a mean score of 6.2 ± 3.4 (95% C.I.: 5.258–7.142). However, there was no association between elderly neglect and socio-demographic characteristics of the elderly people.

Conclusion: The study concludes that the majority of the elderly people are neglected in their families residing in Delhi. They need care, emotional and other life-essential support from their family members, society and nation at large. The study hereby recommends an urgent need for spreading the awareness about the need for elderly people's care and counselling of youth of the family and society at large.

Keywords: Elderly Abuse, Elderly Neglect, Older People, Geriatric Care, Elderly Issues

Introduction

In India, the proportion of senior citizens was 8.1% of the overall population in 2018—a 2% increase from the 1991 census.¹ Economic challenges, health problems, psychological problems, and elder abuse are among the most frequently mentioned issues in old age in Indian contexts.² Because only one out of every twenty-four occurrences of elder abuse is documented, this problem is underreported globally.³ According to WHO, the word 'elderly 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.'⁴ This type of violence constitutes a violation of human rights and includes physical, sexual, psychological and emotional abuse; financial and material abuse; abandonment; neglect; and serious loss of dignity and respect (World Health Organisation). Elderly neglect is a form of maltreatment that is thought to occur when a carer ignores the physical, emotional, and social needs of the elderly person or denies them access to food, medication, or medical care.⁵ There are two types of neglect; active neglect is defined as "the wilful or unwilful withholding of care or the fundamental rewards of life," and passive neglect is defined as "the failure to provide adequate care due to lack of knowledge, information, experience, or ability"⁶ More elderly people feel "neglected" in their families as a result of rapid urbanisation and the rise in nuclear families. Physical trauma, low self-esteem, a lack of safety and security, and even an increased chance of dying young are known to occur in elderly people subjected to neglectful behaviour.^{7,8} Several personal-social factors compound the risk of becoming a victim, like poverty, cognitive impairment, poor mental and physical health, and functional dependence/disability.⁹ Daughter-in-law was identified as the primary perpetrator of elder abuse in India (50.2%), followed by son (27.9%) and other family members (24.7%), including daughters (20.2%), grandchildren (16.1%), son-in-law (15.3%), and other carers (6.5%).⁶

Family members who live along have a crucial duty to take good care of their elderly parents. News from the World Health Organisation revealed that the population of elderly people (aged 60 years and more) in the world will increase from 900 million in 2015 to approximately 2 billion in 2050⁹ There is a dearth of knowledge about the occurrence of elderly neglect, which often tends to remain more under-reported than the other types of elderly abuse. The present study is a cross-sectional study which was conducted with the objectives to assess the occurrence of elderly neglect in the families of Delhi and to correlate the occurrence of elderly neglect with the selected socio-demographic variables of elderly people.

Materials and Methods

A quantitative study was conducted using a cross-sectional design among an elderly population (aged 60 years and above) in January 2024 residing in five urban colonies of Delhi, namely Khanpur, Daryaganj, Tuglaqabad, Okhla and Badarpur. Ten participants were chosen by the quota sampling technique from each of the five colonies who met the sample criteria. A total of 50 senior citizens were chosen who were over 60, living in Delhi with at least one family member, and who were not a known case of any chronic medical, surgical or mental problems.

Data -collecting methods included a self-structured socio-demographic data sheet including items such as age, gender, educational status, marital status, religion, daily activity status, children, type of family, family members, and source of income. The other tool is a self-structured, sixteen-item interview schedule (pre-validated for content by seven nursing experts of Jamia Hamdard, New Delhi) to assess elderly neglect [including items categorised in five domains: physical abuse (item nos. 11, 16), psychological or emotional abuse (item nos. 2, 13, 14), financial or material abuse (item nos. 3, 5, 12), neglect (item nos 1, 4, 6, 7, 8, 15), and restriction to freedom/socialisation (item nos 9, 10)]. No elderly neglect was indicated if a total obtained score was 2 or less, and elderly neglect was indicated by an obtained score between 3 and 16.

All the investigators had earned Masters' degrees in nursing who participated in gathering the data. Administrative approval for data collection was obtained from the RWA of all the five colonies. Data was collected from the elderly in the parks of the chosen colonies after receiving their informed consent for their participation in the study. Each participant was subjected to a 15- to 20-minute one-on-one interview. The data thus collected was statistically analysed using SPSS-16.

Results

The result of the study is summarised under two sections using tables, figures and text (interpretation of tables and figures).

Section 1: Socio-demographic variables

As displayed in Table 1, More than half (26.52%) of the elderly participants were between the ages of 62 and 66. There were significantly more female participants (29, 58%) than males (21, 42%). Approximaely half of the participants either had no formal education (19, 38%) or had only primary education (8, 16%). Fourteen elder adults (28%) had already experienced a spouse death. Fifty per cent of participants identified as Hindu, and forty-six per cent identified as Muslim.

Over one-third of the elderly were found to be financially dependent on a spouse, kid, or other relative. (19, 38%). More than half (54%) of elderly people were housebound, and less than fifty percent were socially outgoing. Over half of the elderly (54%) had three or more children, and nearly all of the participants (49, 98%) had at least one surviving daughter or son. The majority of older people (34, 68%) had four or five more family members residing with them. A majority of the participants, 38 (76%), had at least one child in the home that was under the age of 12 years old.

Table 1. Frequency distribution of socio-demographic characteristics of elderly people

n=50

Demographic variables	Frequency	Percentage
Age (in years)		
60-62yrs	10	20%
62-64yrs	9	18%
64-66yrs	17	34%
66-68yrs	6	12%
68-70yrs	8	16%
Gender		
Male	21	42%
Female	29	58%
Educational status		
No formal education	19	38%
Primary	8	16%
Secondary	13	26%
Higher secondary	4	8%
Graduation	4	8%
Post graduation and above	2	4%
Marital status		
Married	32	64%
Unmarried	2	4%
Divorced	2	4%
Death of spouse	14	28%
Source of income		
Pension	11	22%
Private job	7	14%
Dependent on spouse/ children/relative	19	38%
Investment in property/bank etc.	6	12%
Business	1	2%
Agriculture	2	4%
None	4	8%

Religion		
Hindu	25	50%
Muslim	23	46%
Sikh	2	4%
Daily activities status		
Socially active	23	46%
Home bound	27	54%
Number of children		
Nil	1	2%
1	6	12%
2	16	32%
3 or more	27	54%
Type of family		
Nuclear family	33	66%
Joint family	17	34%
	4	8%
No. of family members		
Living with sons/daughter	4	8%
Living with Spouse	5	10%
3 Members	7	14%
4 Members	16	32%
5 or more	18	36%
No. of children below 12 years		
Nil	12	24%
1	7	14%
2	19	38%
3 or more	12	24%

Section II: Findings depicting the elderly neglect and association between elderly neglect and socio-demographic variables of the elderly

The self perceived elderly neglect was found to range between 0 to 12 and is shown in Table 2 and Pie diagram (Figure 1). Majority of the participants (40, 80%) were found to have elderly neglect.

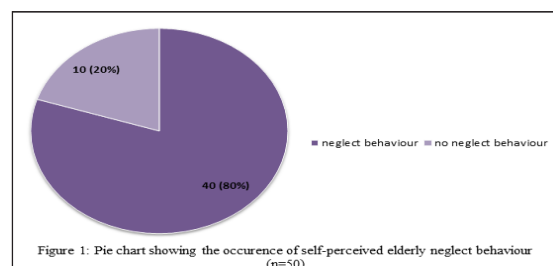


Figure 1. Pie Chart showing the occurrence of self-perceived elderly neglect behaviour

Table 2. Frequency distribution of participants based on the occurrence of elderly neglect behaviour

n=50

Occurrence of elderly neglect behaviour	Obtained range of scores	Frequency (%)	Mean± Standard deviation	Margin of error (95% C.I.)	Median (IQR)
No Neglect behaviour (0-2)	0-12	10(20%)	6.2±3.4	5.258 -7.142	7(3)
Neglect behaviour (3-14)		40(80%)			

Table 3 displays the distribution of elderly individuals depending on their replies to questions on elder abuse. The majority of elderly people (31, 62%) said they were frequently depressed or lonely at home. Approximately half of the participants were refrained from acquiring the food, clothing, prescriptions, glasses, hearing aids, or medical care they needed or were not allowed to spend time with the people they wanted to be with (25, 50%).

The association between self-perceived neglect and the selected demographic variables of the elderly was assessed using the chi-square/ Fisher exact test, as shown in Table 4. The analysis hereby revealed no significant association, indicating that scores of self-perceived elderly neglect were not associated with any of the selected demographic variables of elderly participants.

Table 3. Frequency distribution of responses of elderly people to items related to elderly abuse

n=50

Item no	Elderly abuse related item statements	Yes f(%)	Remarks
I	Has anyone prevented you from getting food, clothes, medications, glasses, hearing aids, or medical care or from being with people you wanted to be with?	25 (50%)	
II	Have you been upset because someone talk to you in a way that made you feel shamed or threatened?	10 (20%)	
III	Has anyone tried to force you to sign papers or to use your money against your will?	14 (28%)	
IV	Do you have anyone who spent time with you, taking you to shopping or to the doctor?	23 (46%)	Positively stated
V	Are you forced financially to give your earnings in the family?	14 (28%)	
VI	Are you sad or lonely often?	31 (62%)	
VII	Do you feel that nobody wants you around?	15 (30%)	
VIII	Do you feel uncomfortable with anyone in your family?	14 (28%)	
IX	Do you have the freedom to move around inside home and in the neighbourhood places?	11 (22%)	Positively stated
X	Does someone in your family make you stay in bed or tell you that you are sick when you know you are not?	25 (50%)	
XI	Has anyone forced you to do things you did not want to do?	31 (62%)	
XII	Has anyone taken things that belonged to you without your consent?	24 (48%)	
XIII	Do you trust most of the people in your family?	18 (36%)	Positively stated
XIV	Does anyone tell you that you give them too much trouble?	21 (42%)	
XV	Do you have enough privacy at home?	15 (30%)	Positively stated
XVI	Has anyone in your family physically attempted or harm you recently in last 6 months?	19 (38%)	

Table 4. Statistical association between self-perceived neglect and demographic variables of the elderly parents

Demographic variables	Neglect behaviour		df	#p value
	No	Yes		
Age(in years)				
60-62yrs	1	9	4	352 (NS) Chi square test
62-64yrs	3	6		
64-66yrs	4	13		
66-68yrs	2	4		
68-70yrs	0	8		
Gender				
Male	2	19	1	160 (NS) Chi square test
Female	8	21		
Educational status				
No formal education	5	14	5	278 (NS) Fisher exact test
Primary	0	8		
Secondary	3	10		
Higher education	2	2		
Graduation	0	4		
Post graduation and above	0	2		
Marital status				
Married	8	24	3	.618 (NS) Fisher exact test
Unmarried	0	2		
Divorced	0	2		
Death of spouse	2	12		
Religion				
Hindu	6	19	2	.654 (NS) Fisher exact test
Muslim	4	19		
Sikh	0	2		
Christian				
Any other				
Source of income				
Pension	2	9	6	.347 (NS) Fisher exact test
Private job	2	5		
Dependent on spouse/children/relatives	3	16		
Investment in property/bank etc.	2	4		
Business	1	0		
Agriculture	0	2		
None	0	4		
Daily activities status				
Socially active	6	18	1	.281 (NS) Chi square test
Home bound	3	23		

Number of children				
Nil	0	6	3	.555 (NS) Fisher exact test
1	4	12		
2	6	21		
3 or more	0	1		
Type of family				
Nuclear family	6	27	1	.717 (NS) Chi square test
Joint family	4	14		
Extended family				
Type of community				
Urban	8	35		.616 (NS) Fisher exact test
Rural	2	5		
Number of family members				
Living son/daughter	1	3	4	.780 (NS) Fisher exact test
Living with spouse only	0	5		
3	1	6		
4	4	12		
5 or more	4	14		
Number of children below 12 years				
Nil	0	12	3	.178 (NS) Chi square test
1	1	6		
2	6	13		
3 or more	3	9		

Chi square test/Fisher exact test

* $p \leq 0.05$

Discussion

In the current study, 40 (80%) elderly people were found to experience neglect in their families. In agreement with the current findings, a study by Sijuwade et al.¹⁰ found that elderly persons were neglected physically in 48% of cases and financially in 20% of cases. Over two-thirds of senior Indians (based on a survey of 5000 elderly individuals) are neglected in their families, according to comparable findings reported in an article by the Times of India (TOI).¹¹

In contrast to the current findings, an earlier study conducted in India by Mattoo KA et al.¹² found that the prevalence of elder maltreatment ranged from 14% to 40%. Another multistate research by Skirbekk V et al.¹³ conducted in India that included Himachal Pradesh, Kerala, Maharashtra, Odisha, Punjab, Tamil Nadu, and West Bengal, revealed elderly neglect to be only 5.2%. Elderly neglect was also reported to be somewhat less (15.8%) in China than in the United States (Wu L et al., 2014).¹⁴ Perhaps gaps in the senior-child interaction were caused by urbanisation and the development of technology, leaving elderly people in their own houses unattended.

None of the specified socio-demographic characteristics in the current study were shown to be related to the elderly being ignored. Contrarily, in several prior studies (Gaikwad et al., Sebastian D et al., Ajdukovic M et al., Chokkanathan S et al.),¹⁵⁻¹⁸ female elderly, higher age groups (>75 years),¹⁹ absence of formal education (Ramalingam A et al.)²⁰ low education (Gaikwad et al.),¹⁵ social isolation (Sooryanarayana R et al.),²¹ economic dependence, a lower number of family members and a higher number of children (Gaikwad et al.).¹⁵ were found to be significantly associated with increased occurrence of elderly abuse and neglect.

Additional risk factors have been linked to an increased incidence of elderly abuse and neglect, including cohabiting with an elderly dependent, experiencing marital conflict, going through intense job-related stress that interferes with personal time, and lacking social support.²¹

In order to promote both the health and well-being of the elderly and the behaviour of young people towards older people, the study makes the urgent recommendation that young people in families and society as a whole receive counselling. Additionally, there is a need to assist

elderly people who are vulnerable by educating them about services, support networks, legal protections, and informal networks of assistance, as well as helplines that are accessible in India.

Limitations

The current study has a few drawbacks: one is the small sample size; secondly, the study did not examine other elements such as social support or living circumstances that could have some bearing on the frequency of elder neglect in families.

Conclusion

A substantial proportion of elderly people were being neglected by their relatives. Although no significant correlation was found between the occurrence of neglect behaviour and selected demographic variables of the elderly, there is an urgent need for spreading the awareness and counselling of youth about elderly people's care.

Conflict of Interest: None

References

- General R. Census Commissioner, India. Census of India. 2011;2000.[Google Scholar]
- Amiri M. Problems faced by old age people. Available at SSRN 4886229. 2018 May 1.[Google Scholar]
- World Health Organization. Elder abuse [Internet]. [cited 2020 Nov 13]. Available from: https://www.who.int/ageing/projects/elder_abuse/en/ [Ref list]
- World health organization. Elder abuse- the health sector role in prevention and response [internet]. World health Organization: 2016 [cited 2020 Dec 30]. Available from: https://www.who.int/ageing/media/infographics/EA_infographic_EN_Jun_18_web.pdf [Ref list]
- MaRS Monitoring and Research Systems Private Limited: Help Age India Report 2015. A Youth Perspective on Elder Abuse (Elder Abuse: The Indian Youth Speaks Out). New Delhi. Available from <https://www.helpageindia.org/pdf/Elder-Abuse-The%20Indian-Youth-Speaks-Out.pdf> Accessed on 14/06/2022
- NIA- NIH, US dept of Health and Human Services Available from Elder Abuse | National Institute on Aging (nih.gov) (accessed on 6/12/2021)
- Dong XQ. Elder abuse: Systematic review and implications for practice. *Journal of the American Geriatrics Society*. 2015 Jun;63(6):1214-38.[Google Scholar] [PubMed]
- Lachs MS, Pillemer KA. Elder abuse. *New England Journal of Medicine*. 2015 Nov 12;373(20):1947-56. [Google Scholar][PubMed]
- WHO news: Elder abuse. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/elder-abuse>. Accessed on 14/12/2021.
- Sijuwade PO. Elderly care by family members: Abandonment, abuse and neglect. *The Social Sciences*. 2008;3(8):542-7.[Google Scholar]
- TOI report: Over 65% elderly face neglect in old age-Study PTI / Updated: Jul 12, 2015, 14:48 IST. Available from <https://timesofindia.indiatimes.com/india/over-65-elderly-face-neglect-in-old-age-study/article-show/48040965.cms>. Accessed on 10/12/21.
- Mattoo KA, Shalabh K, Khan A. Geriatric forensics: A dentist's perspective and contribution to identify existence of elder abuse among his patients. *Journal of forensic dental sciences*. 2010 Jul 1;2(2):81-5.[Google Scholar][PubMed]
- Skirbekk V, James KS. Abuse against elderly in India—The role of education. *BMC public health*. 2014 Apr 9;14(1):336.[Google Scholar][PubMed]
- Wu L, Chen H, Hu Y, Xiang H, Yu X, Zhang T, Cao Z, Wang Y. Prevalence and associated factors of elder mistreatment in a rural community in People's Republic of China: a cross-sectional study. *PloS one*. 2012 Mar 20;7(3):e33857.[Google Scholar][PubMed]
- Gaikwad V, Sudeepa D, Madhukumar SU. A community based study on elder abuse and depression in Bangalore rural. *Int J Public Health Hum Rights*. 2011;1:1-4. [Google Scholar]
- Sebastian D, Sekher TV. Abuse and neglect of elderly in Indian families: Findings of elder abuse screening test in Kerala. *J Indian Acad Geriatr*. 2010 Jun;6(2):57-9.[Google Scholar]
- Ajdukovic, M., Ogresta, J., & Rusac, S. (2009). Family violence and health among elderly in Croatia. *Journal of Aggression, Maltreatment & Trauma*, 18(3), 261-279.
- Chokkanathan S, Lee AE. Elder mistreatment in urban India: A community based study. *Journal of elder abuse & neglect*. 2005 Apr 19;17(2):45-61.[Google Scholar] [PubMed]
- Reay AC, Browne KD. Risk factor characteristics in carers who physically abuse or neglect their elderly dependants. *Aging & mental health*. 2001 Feb 1;5(1):56-62. [Google Scholar][PubMed]
- Ramalingam A, Sarkar S, Premarajan KC, Rajkumar RP, Subrahmanyam DK. Prevalence and correlates of elder abuse: A cross-sectional, community-based study from rural Puducherry. *National Medical Journal of India*. 2019 Mar 1;32(2):72-6.[Google Scholar][PubMed]
- Sooryanarayana R, Choo WY, Hairi NN, Chinna K, Hairi F, Ali ZM, Ahmad SN, Razak IA, Aziz SA, Ramli R, Mohamad R. The prevalence and correlates of elder abuse and neglect in a rural community of Negeri Sembilan state: baseline findings from The Malaysian Elder Mistreatment Project (MAESTRO), a population-based survey. *BMJ open*. 2017 Aug 1;7(8):e017025.[Google Scholar][PubMed]