

ABUSE OR DISABUSE: COPING WITH ELDERLY ABUSE IN THE ASAIMAN MUNICIPALITY, GHANA

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ABSTRACT

The study examined the coping approaches of the elderly to abusive experiences in the home. Cross-sectional descriptive survey design was used for the study. Convenience and snowballing sampling techniques were used to sample 184 respondents for the study. The Elderly Abuse and Psychological Wellbeing Inventory (EAPwI) was used to collect data from the elderly. Data collected were analysed using descriptive statistics. It emerged from the results that abuse of the elderly in the home setting is marginally prevalent in Ashaiman Municipality with the elderly psychological abuse topping the list of the self-reported forms of abuse. It was found that many elderly persons relied on prayers as a coping strategy to abusive experiences from their caregivers. It was concluded that the exposure of the elderly to abuse knows geographical bounds. The prevalence reported raises the questions of general wellbeing of the elderly. The study recommended that there should be easy and accessible complaint centres created in all electoral areas in the municipality for reporting of abuses. A media campaign aimed at raising community awareness about the rights of the elderly and protection of elder persons from elderly abuse should be encouraged.

Keywords: Elderly abuse, Coping approaches, physical abuse, financial abuse, psychological abuse.

INTRODUCTION

Worldwide, the elderly population has seen unprecedented increase and it is estimated that the global population of those aged 60 years and older will reach about 1.2 billion by the year 2025 and more than 2 billion in 2050 due to improved healthcare and declined fertility (United Nations Population Division [UNPD], 2002; United Nations Department of Economic and Social Affairs [UNDESA], 2013). In Ghana, the elderly population is also projected to grow by 2.5 million by 2025 to 6 million by 2050, representing about 12% of the total population (Ngenbe, 2015). However, the complexity of life, pressure on the family and social relations and needful adjustments to physical and psychological changes, pose significant limitations in finance, mobility and health status of elderly persons (O'Leary, D'alton, Brian, & McCarthy, 1996). These limitations make the elderly more susceptible to various forms of abuse. According to the APA (2012), abuse of the elderly refers to a continuation of long-standing patterns of violence and physical, emotional, or financial abuse within the family, due to changes in living situations and relationships brought about either by the older person's growing frailty and dependence on others for companionship and for meeting basic needs. Considering elderly abuse as a continuation of long standing patterns of violence is completely parallel to the earlier notion held by AEA (1995) that abuse could be a single dossier of violence. This definition also considers significant reason why older persons are vulnerable to abuse (e.g. lack of vitality due to tremendous damage to the somatic cells).

Abuse of the elderly remains one of the hidden social problems with different global perspectives (Acierno, Hernandez, Amstadter et al., 2010; Akpan & Umobong, 2013; Lacey, 2014). Statistics indicate that reported prevalence of abuse of the elderly in studies range between 1% - 44% in most developed economies (Lacey, 2014; McDonald & Collins, 2000; WHO, 2012; Yan, 2014) and 13.8% - 81.1% in few studies conducted in Africa (Akpan & Umobong, 2013; Bigala & Ayiga, 2014; El-Gammal, Khattab, Fahmy & Soltan, 2010; Kabole Kioli, & Onkware, 2013). It has been established that for every one reported case of abuse of the elderly, there are between 20-23 other related cases that go underreported daily (APA, 2012; Canadian Department of Justice [CDoJ], 2015).

In most parts of Africa, elderly persons are often accused of witchcraft and as such, subjected to inhumane treatments (e.g. beating, killing, ritual baths, among others.). For instance, in Kenya, Webb (2016) reports that hundreds of elderly people from Kilifi County are murdered every year for being accused of witchcraft, often by their own relatives. In Ghana, Welsing (2017), reports a gruesome murder of a 67 year old woman who was stoned to death by the people of Trindongo in the Upper East region for allegedly practising witchcraft. Hope (2016) reports of gruesome murder of 85 years old woman by her 20 years grandson for allegedly exchanging his “bright” future in favour of his younger brother’s. Similar case was reported of a 72-year-old woman who was burnt to death on suspicion of being a witch in Tema on 30th November, 2010. (Smith, 2010).

Abuse of the elderly in studies are reported mainly in four forms. Namely physical, psychological, financial and neglect (APA, 2012; Lachs & Pillemer, 2015; Laumann, Leitsch, & Waite, 2008). Physically, elderly persons are abused mainly through acts of commissions such as hitting, beating, shaking, pushing, shoving, kicking, pinching, burning, or biting constitute physical abuse. It may also include the inappropriate use of medications, over-sedation or withholding drugs to bring on a crisis and precipitate admission to hospital and physical restraints (APA, 2012; Johnson, 1991). Physical abuse among the elderly population had been significantly reported in studies in Africa (Bigala & Ayiga, 2014; Kabole et al., 2013). Psychologically, the elderly may be exposed to name calling, receiving of harsh orders, humiliation, intimidation, threats, yelling, swearing and receiving of insulting or disrespectful comments (Ananias & Strydom, 2014; Peri, Fanslow, & Hand, 2009). Psychological abuse was found to be commonly perpetrated against the elderly population in Egypt (El-Gammal et al., 2010), China (Yan & Tang, 2004), Macedonia (Pesheyska et al., 2014), India (Chokkanathan & Lee, 2005), Japan (Anme et al., 2005) and USA (Laumann et al., 2008).

Financial abuse includes fraud, taking money under false pretences, forgery, forced property transfers, purchasing expensive items with the older person’s money without that person’s knowledge or permission, or denying the older person access to his or her own funds or home (APA, 2012). Financial abuse have been reported in studies in Ireland (Naughton et al., 2010) and Canada (Podnieks, 1993). Elderly neglect includes failure to provide food, water, clothing, medications and assistance with activities of daily living or help with personal hygiene (Ananias & Strydom, 2014; Sev’er, 2009). Elderly neglect was found among the Irish and the United Kingdom’s elderly population (Naughton et al., 2010; O’Keeffe et al., 2007). In Africa, Akpan and Umobong (2013) indicate that a sample of Nigerian aged population are neglected by the caregivers. In China, Dong & Simon (2010) identified elderly neglect as the most common self-reported form of abuse of the elderly.

When these abuses occur, the elderly may immediately try to insulate himself/herself using one or combination of generic coping approaches (e.g. keeping the feelings to self, expressing

anger to the abusive person, apologising and moving on, praying over difficulties, etc.). Lazarus and Folkman (1984) describe coping approach as the ongoing cognitive and behavioural efforts to manage specific (external and/or internal) demands that are appraised as taxing or exceeding the resources of the individual. The authors presented eight (8) main coping approaches, using 66-item Inventory to assess ways of coping with internal and external demands of specific stressing events. These include confrontation, distancing, self-control, social support, accepting responsibility, escape avoidance, problem solving and positive re-appraisal (Damião, Lisabelle, Fari, & Dias, 2009).

With confrontive approach, the abused may present aggressive behaviour toward the abuser as a way of demonstrating frustrations (Damião et al., 2009). However, Carver, Weintraub and Scheier (1989) warned that focusing on ones emotions (particularly for long periods) can impede adjustment and may distract the person from developing other active coping efforts. Distancing approach corresponds to defensive strategies in which the individual avoids the threat in an effort to change the situation. Denying the fact of the abuse to themselves and not considering what is said by other people (Damião et al., 2009). For instance, abused may went on with life as if nothing had happened or try to forget the whole abusive acts all together. It is often suggested that denial is useful at early stages of a stressful transaction, minimizing distress and thereby facilitating coping (Cohen & Lazarus, 1973). Regarding self-controlling approach to coping, the abused may try to control emotions by keeping their feelings to themselves. Having self-control also means not doing anything quickly or following the first impulse.

Seeking for social support is a coping approach that takes into account the support found in people and the environment (Damião et al., 2009). The social support approach presents three different aspects. These include social support to find solutions, emotional support by friends and family members and professional support. According to Aldwin (2000), the abused may seek social support for either of two reasons. First, seeking social support for instrumental reasons (e.g. seeking advice, assistance, or information) and seeking social support for emotional reasons (e.g. getting moral support, sympathy, or understanding). In daily hassles, these approaches often co-occur (Aldwin, 2000). Another coping approach is accepting responsibility. Here, the abused may quickly accept reality and commit to the process of coping with a stressing situation. The abused may feel responsible for triggering stressful situations and therefore face feelings of self-criticism and self-blame. However, these feelings can be motivating, stimulating them to cope with their problems in another way, keeping their taxing feelings under control and showcasing autonomy (Damião et al., 2009). With escape avoidance coping approach, the abused may fantasize about possible solutions to the problem without taking any concrete actions to actually change the prevailing circumstances. This approach could be described as an effort to escape and/or avoid the stressing agent. This approach could only provide temporal relief to the abused person.

With planful problem-solving approach, Damião et al. (2009) alluded that instead of avoiding stressful and traumatic events or distancing oneself from daily hassles, the individual may choose to respond to abusive behaviours by changing their attitudes. This to large extent, make them able to cope with the pressure from people and the environment around them, thereby decreasing or eliminating the stress-generating sources. Finally, with positive re-appraisal approach, the abused may cope with their unstimulating experiences using their own means. They are able to do so by changing something within themselves such as not losing faith when facing difficulties in life, growing as a person and engaging in rigorous prayers. It also involves reframing a traumatic situation to see it in a positive light. These

approaches were not extensively explored among the elderly population, given limited or no space in the literature. This study aimed at examining how elderly persons in the Ashaiman Municipality cope with abusive experiences in the home. From the ongoing discussion, the study sought to investigate the self-reported forms of abuse and ascertain perceived coping approaches of the elderly in the Ashaiman Municipality.

Research Question

The following research questions guided the study:

1. What are the self-reported forms of abuse of the elderly in the Ashaiman Municipality?
2. What approaches do the elderly in the Ashaiman Municipality use to cope with self-reported forms of abuse?

METHODS

Respondents

The study adopted a quantitative approach underpinned by the positivist paradigm. The study was a cross sectional descriptive survey, since the data was collected at one point in time without making any necessary follow-ups on them (Creswell, 2012). The population comprised all the elderly people aged 65 years and above, living in informal setting in the Ashaiman Municipality. The sample of the respondents comprised 184 elderly persons. In recruiting the elderly respondents, convenience and snowballing sampling techniques were used.

Instrumentation

The Elder Abuse and Psychological-wellbeing Inventory (EAPwI) was administered to all elderly persons who participated in the survey. Content-related validity evidence of the inventory, which ensured that items included tap the various concepts measured, was ascertained using experts' judgements. The internal consistency of subscales in EAPwI ranged from $\alpha = 0.76$ to $\alpha = 0.82$. Overall, the EAPwI demonstrated satisfactory reliability (Kline, 1986; Streiner, & Norma, 2008).

Data Collection

The inventory was administered using the face-to-face interview (Mellenbergh, 2008) in the respondents' home. Informed consent was sought from the respondents prior to the administration of the inventory.

Statistical Analysis

The data collected was edited for completeness, double responses and non-response. The responses to each item in each set of scale were scored to enhance easy data entry and statistical manipulations using SPSS software, version 22.0. The data of the respondents were descriptively analysed and presented in frequency and percentage table and charts.

RESULTS

Demographic Information of Respondents

The demographic characteristics of the respondents (N = 184) explored in the survey include the gender and age. Figure 1 presents the demographic information of elderly respondents.

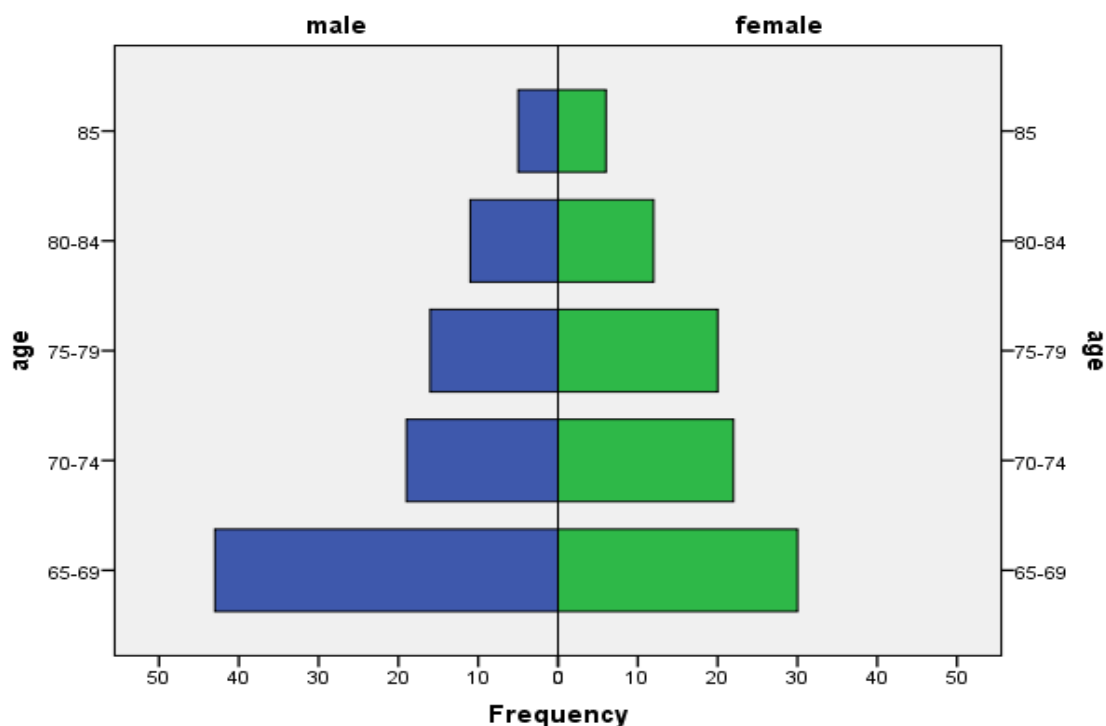


Figure 1: Gender and Age Pyramid of Elderly Respondents

From Figure 1, out of the 184 elderly respondents who participated in the survey, 94 (51.1%) respondents were males and 90 (48.9%) respondents were females. In terms of age, 73 (39.7%) respondents were between 65-69 years, 41 (22.3%) respondents were between 70-74 years, 36 (19.6%) respondents were between 75-79 years, 23 (12.5%) respondents were between 80-84 years and 11 (5.9%) respondents were 85 years and above.

Self-reported forms of abuse of the elderly persons in the Ashaiman Municipality

The first objective of the study was to investigate the self-reported forms of abuse of the elderly persons in the Ashaiman Municipality. The elderly respondents were first asked to estimate the number of times they have been exposed to some forms of abuse in the past six months, including today (i.e. the day of instrument administration) by their caregivers. The responses are summarised in Table 1.

Table 1: Frequency Analysis of Self-reported Forms of Abuse of the Elderly

Scenario	Never	Some- times	Often	Very Often
Elderly Physical Abuse				
Held forcefully to take medication.	67(36.4) *	45(24.5)	54(29.3)	18(9.8)
Locked up in the room.	100(54.3)	37(20.1)	29(15.8)	18(9.8)
Forced to eat.	62(37.7)	46(25.0)	45(24.5)	31(16.8)
Received beating, shoving, hitting, etc.	109(59.2)	35(19.0)	20(10.9)	20(10.9)
Elderly Psychological Abuse				
Called funny and abusive names.	35(19.0)	30(16.3)	32(17.4)	87(47.3)
Yelled at for refusing to do something.	34(18.5)	54(29.3)	52(28.3)	44(23.9)
Threatened to be sent away.	83(45.1)	32(17.4)	34(18.5)	35(19.0)
Received insulting comments	100(59.8)	36(19.6)	18(9.8)	20(10.9)
Elderly Financial Abuse				
Money withheld for your upkeep.	112(60.9)	35(19.0)	20(10.9)	7(3.8)
Money stolen from you.	78(42.4)	52(28.3)	34(18.5)	20(10.9)
Money taken under false pretence.	110(59.8)	34(18.5)	20(10.9)	20(10.9)
Elderly Neglect				
Denied visitors from visiting.	120(65.2)	31(16.8)	21(13.0)	9(4.9)
Left unattended to.	104(56.5)	39(21.2)	23(12.5)	18(9.8)
Asked to prepare own meal.	110(59.8)	32(17.4)	21(11.4)	21(11.4)

* Percentages are in parentheses

Table 1 displays self-reported experiences of abuse among the elderly in the hands of their caregivers in the Ashaiman Municipality. The responses are presented under four generic areas namely, physical abuse, psychological abuse, financial abuse and elderly neglect. Concerning elderly physical abuse, the respondents reported marginal prevalence of abusive

behaviour “Being forced to eat”, saw some 62 (37.7%) reported never, 46 (25.6%) reported sometimes, 45 (24.5%) reported often and 31 (16.8%) reported never. Concerning the presence of elderly psychological abuse among the elderly persons, 35 (19.0%) reported never, 30 (16.3%) reported sometimes, 32 (17.4%) reported often and 87 (47.3%) elderly reported very often to experiencing the behaviour “Called funny and abusive names”. Regarding the victimization of elderly financial abuse, the scenario, “Money stolen from you”, saw 78 (42.4%) elderly said they have never experienced that, 52 (28.3%) said it happens sometimes, 34 (18.5%) said it happens often and 20 (10.9%) said it happens to them very often. Final, concerning the prevalence of elderly neglect, second scenario “Left unattended to” saw 104 (56.5%) reported never, 39 (21.2%) elderly reported sometimes, 23 (12.5%) reported often and 18 (9.8%) reported very often.

From the results, it can be deduced that abuse of the elderly is pervasive in the Ashaiman Municipality. To obtain the self-reported forms of abuse commonly received by the elderly, the mean of means and standard deviations were computed for each construct and the results are presented in Table 2.

Table 2: Means and Standard Deviations Analysis of Self-reported Forms of Abuse

Forms	Mean of Means (MM)	Mean of Standard Deviations (MSD)
Elderly Psychological Abuse	2.27	1.05
Elderly Physical Abuse	1.75	.90
Elderly Financial Abuse	1.48	.76
Elderly Neglect	1.37	.74

As shown in Table 2, psychological abuse (MM = 2.27, MSD = 1.05) was highly reported by the elderly. It was followed by physical abuse (MM = 1.75, MSD = .90). The incidence of elderly financial abuse (MM = 1.48, MSD = .76) was also recorded. Elderly neglect was least reported abuse among the elderly in the Ashaiman Municipality (MM = 1.37, MSD = .74).

Coping approaches to the self-reported forms of abuse

The research objective sought to ascertain the perceived coping approaches used by the elderly to cope with abuse. The responses to the statements are summarised in Table 3.

Table 3: Frequency Analysis of Perceived Coping approaches to Self-reported Forms of Abuse

Statements				
	Not Used	Used Some-times	Used Quite Often	Used Great Deal
Keep the feelings to myself.	22(12.0)*	51(27.7)	64(34.8)	47(25.5)
Express anger to the person.	54(29.3)	66(25.9)	40(21.7)	24(13.0)
Try to forget about what happen.	28(15.2)	64(34.8)	54(29.3)	38(20.7)
Apologise and move on.	40(21.7)	67(36.4)	41(22.3)	36(19.6)
Take alcohol and drugs to feel better.	49(26.6)	53(28.8)	53(28.8)	29(15.8)
Talk to someone about my feelings.	27(14.7)	43(23.4)	60(32.6)	54(29.3)
Pray over my difficulties.	29(15.8)	33(17.9)	36(19.6)	86(46.7)
Just concentrate on what to do next.	55(29.9)	56(30.4)	48(26.1)	25(13.6)

* Percentages are in parentheses

Table 3 shows how elderly persons in the Ashaiman Municipality approach or react to the self-reported forms of abuse. The significant approaches used include keeping the feelings to self, talking to someone about their feelings and praying over their difficulties. From Table 3, the approach “Keep the feelings to myself” saw 22 (12.0%) of the respondents not using it, 51 (27.7%) used the approach sometimes, 64 (34.8%) used the approach quite often and 47 (25.5%) used the approach great deal. Regarding the approach, “Talk to someone about my feelings” saw 27 (14.7%) respondents reported not using it, 43 (23.4%) reported using it sometimes, 60 (32.6%) reported using the approach quite often and 54 (29.3%) reported using the approach great deal. Similarly, the approach “Pray over my difficulties” was not used by 29 (15.8%) respondents. However, 33 (17.9%) respondents sometimes used the approach, 36 (19.6%) respondents used the approach quite often while 86 (46.7%) respondents used the approach great deal.

DISCUSSION

Elderly psychological abuse was common form of reported by the respondents. This finding is supported by El-Gammal et al. (2010) in Egyptian elderly study. Yan & Tang (2004) and Laumann et al. (2008) also found similar results among the elderly in China and USA elderly respectively. Elderly psychological abuse is commonly used because the real effects are often out of public notice for strong reprimand. Most often, in dealing with cases of abuse, we dwell much on physical defects to the neglect of psychological effects. Perpetrators most often find solace in the psychological weapons such as name calling (witch or wizard), yelling, insulting, and verbal threats since there are no existing legal consequences for these

actions. Elderly physical abuse, in the form of coercion to eat was also commonly reported by the respondents. The use of force to coerce the elderly to eat is an emerging kind of physical abuse that elderly persons are exposed to on daily basis in the Ashaiman Municipality. These kinds of physical abuse were not included in the lists of physical abuse in the work of Burnight and Mosqueda (2011). Though caregivers may have good intention of using force to administer medicine or food to the elderly, the manner and nature of the force leaves much to be desired. Forcing the elderly person to eat or take medicine may produce laceration and fractures around the arms, neck and face.

On elderly financial abuse, it was found that the elderly mainly reported about stolen money (Ananias & Strydom, 2014; Lachs & Pillemer, 2015). This could happen when the caregivers use the elderly person's money without proper authorisation. Sometimes, financial difficulties on the part of the caregiver would trigger this kind of behaviour. Also, chronic conditions such as dementia could trigger the feeling of the elderly into believing that his/her caregiver is responsible for his/her missing money. The least perpetrated form of abuse among the elderly in the Ashaiman Municipality was elderly neglect. Though it has been speculated that some aged population in United Kingdom, Ireland, China and Nigeria were significantly neglected by their caregivers (O'Keeffe et al., 2007; Naughton et al., 2010; Dong & Simon, 2010; Akpan & Umobong, 2013), the outcome of this study proved otherwise. The typical Ghanaian places much value on the family system. According to Awoniyi (2015), without the family there would be none of the kinship ties that are essential to a comprehension social life, with an intricate network of social relationships (p.9). Children owe it a responsibility to reciprocate the love and care for their parents in their old age as part of their contributions toward the sustainability of the family system.

The second objective of the study endeavoured to ascertain how abused elderly respond to abusive behaviours from caregivers. It emerged from the findings that abused elderly use one or combination of approaches in handling cases of abuse. Praying over difficulties (positive re-appraisal) is one of the most mentioned coping approaches which enables abused elderly to endure incidence of abuse. The elderly reappraise caregivers' abusive behaviours as demonically motivated, an act which can only be remedied by the Supreme Deity (God). In the Ashaiman, just like in many other places in Africa, the belief is that God created the world and the whole affairs (including abuse) of the world are under his unitary control. Concurring with this claim, Awoniyi (2015) posits that religion (of which prayers form strong basis) has always been a sense of belonging to God in Africa, as well as the basic belief that this world is God's world. To the African man, a prayer is religious requirement against difficulties which aims at minimising the potential effects of abuse, providing spiritual protection, and changes the individual's ways of doing things. Prayers provide the needed safety net that comfort and reassure the elderly that there is hope for the future. According to Pedersen (2014), prayer helps regulate emotional swing which is brought about by anxiety and depression in individuals. Prayer is indeed, the pivot on which all other coping approaches revolve for a positive effect.

CONCLUSION AND RECOMENDATION

Based on the findings of the study, it is concluded that abuse of the elderly knows geographical bounds. The prevalence reported was quit alarming. The Goal 3 of the Sustainable Development Goals, which reads "Ensure healthy lives and promote wellbeing for all at all ages" raises serious concerns when we consider the magnitude of abuse the elderly are exposed to on daily basis. Notwithstanding, the findings is a ground breaking

empirical evidence in Ghanaian literature on elderly abuse studies, accentuating on filial responsibility towards the elderly in the elderly-caregiver relationship. The study recommended among other things that the municipal directorate, traditional rulers and opinion leaders should enact bye-laws to curb abuse of the elderly in the municipality. Also, easy and accessible complaint centres should be created in all electoral areas in the municipality for reporting of abuses. A media campaign aim at raising community awareness about the rights of older adults and protection of elder person from elderly abuse should be encouraged. Finally, to have positive approach towards abuse, it is recommended for abused elderly to use prayers to cope with abuse since it has been found to contribute to sound mental wellbeing.

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