

# Chapter 11

## Contextualizing Elder Abuse and Neglect in Institutional and Home Settings: Case Studies from India

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### Introduction

Elder abuse or mistreatment refers to ‘intentional actions that cause harm or create serious risk of harm (whether or not harm is intended) to a vulnerable elder by a caregiver or other person who stands in a trust relationship to the elder or [...] failure by a caregiver to satisfy the elder’s basic needs or to protect the elder from harm’ (National Research Council 2003: 1). The World Health Organization (2008) used the term ‘elder abuse’, adopting the definition developed in 1995 by Action on Elder Abuse in the United Kingdom, and has defined elder abuse 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’ (WHO 2008: 6). Elder abuse and neglect are increasingly recognized as emerging global social care and public health issues (Lachs and Pillemer 2004) and India is no exception (Sachan and Kaur 2014). Traditionally, the older adults’ care responsibility was borne by the immediate family members with great respect and filial obligations in India. But due to rapid urbanization and modernization, the

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traditional joint family system has been deteriorating fast and showing a nucleation of family system and changing value patterns among younger generations (Nayar 1999; Singh 1997). Therefore such strong filial obligations and mutual ties, the main feature of the traditional joint family, are weakening and have placed the older adults at economic and psychological stress (Sharma and Dak 1987). Kashyap (2004), reviewing various studies (Das and Bardis 1978; Gupta 1978; Kapur 1978; Jha 1985; Nair 1986; Rao and Rao 1982) argues that the modernization and subsequent social changes have affected the family structure, social roles, relationships and status of its members and its relationship with the kinship system.

Abuse includes physical assault, psychological aggression, violation of personal rights, sexual abuse, financial exploitation, neglect, and self-neglect. Such forms of abuses are particularly damaging to the older adults as most of the abusers are the victims' own adult offspring or trusted ones (Yan et al. 2015). Among these varied forms of elder abuse, verbal abuse has been identified as the most common type of mistreatment (Comijs et al. 1998; National Elder Abuse Incidence Study (NEAIS) 1998; Ogg and Bennett 1992; Yan and Tang 2001). Besides, physical abuse (Pillemer and Finkelhor 1988), financial abuse (Podnieks 1992) and neglect (Valentine and Cash 1986) have also been found to be common forms of elder abuse.

Elder abuse is a universally prevalent phenomenon and studies have shown that in the USA about 5–10% of people aged 65 or above have been abused by their care-givers on whom they depended for everyday activities (Fulmer et al. 2002; National Research Council 2003). As many countries are proceeding towards rapid ageing of the population, the number of elderly people who become potentially vulnerable to abuse is also expected to increase. This is particularly acute in Asia, whose population is ageing at an unprecedented pace. In 2012, 11% of Asians were aged 60 or older, a figure expected to rise to 24% by 2050 (HelpAge International 2012). The greatest increase in the ageing population will occur in those over 75, from 15% in 2000 to 27% in 2050 (HelpAge International 2013). In this chapter we explore the different forms of emotional abuse as reported and experienced by the older adults both in home and institutional settings.

## **Contextualizing Elder Abuse and Mistreatment**

Old age and care of older adults were never a problem for India when a value-based joint-family system prevailed and the older adults enjoyed support and comfort in the joint-family system (Chokkanathan and Lee 2005). Revering the older adults was an integral part of the culture (HelpAge India 2012). A significant proportion (84.4%) of the older adults in India lives or co-resides with their children (Rajan and Kumar 2003). But now this delicate dyadic care relationship between the care-receivers and the care-providers has greatly changed and is being renegotiated. The changing inter-generational relation has created a care difference or care-gap in the present-day care practices, both in the family care and in institutional old-age

care. This care-gap is viewed differently by both the older adults who see it as a function of societal changes and their care-givers who are sandwiched between the care needs of two generations. Studies by HelpAge India (2012) have found that inadequate housing in metropolitan cities sometimes led to a lack of physical and emotional space or basic necessities that make the older parents shift to one corner of the house. Moreover, with increasing dual career households, the older adults who co-reside with family members are becoming more marginalized, isolated and insecure. In this context there is growing concern among older adults that they are more often being abused and neglected.

To understand the issue of elder abuse in any society it is necessary to understand the cultural background of that society because inter-personal and inter-generational relations are culturally constructed (Yan et al. 2015). Traditionally, in the Asian cultural context, adult children provide care, respect and financial support for their parents with reverence (Cheng and Chan 2006; Ng et al. 2000, 2002; Sung 2001). Earlier studies have shown that older adults continued to have high filial expectations of the younger generation and that young people still accepted these obligations for their parents (Lee and Sung 1997). However, recent findings show that young people are now likely to interpret filial duty differently from their parents, and this reciprocal filial duty depends on their future circumstances (Tsai et al. 2008). Tam and Neysmith (2006) in their qualitative study of home care-givers in China reported that disrespect is the main form of elder abuse in the Chinese community. Similarly, disrespect and lack of dignified living conditions are also considered as a major form of elder abuse by older Indians (HelpAge India 2012; Nagpaul 1998). Qualitative interviews with Chinese older adults affirmed that disrespect leads to unsettled feeling as expressed in phrases like *being ignored by children* and *behaving as if [the elder person] is the enemy* (Dong et al. 2010).

Similar observations have also been made in other Asian cultures. Chang and Moon (1997) found that older Koreans consider lack of respect and inappropriate care by the family members as major forms of elder abuse. They used examples such as ‘failure to employ language that denotes respect’, ‘direct expression of disagreement with the mothers-in-law’, from their studies to show the cultural perceptions of Korean elder abuse. The study of Arai (2006) in Japan showed that *blaming* by the young generation is the prominent form of abuse as older parents are blamed for whatever problems the adult children are facing. While the studies of Anme et al. (2006) stated that 17.9% of Japanese older adults living in agricultural villages reported abuse and 34.9% of family care-givers were engaged in potentially harmful behaviour against the older care recipients (Sasaki et al. 2007).

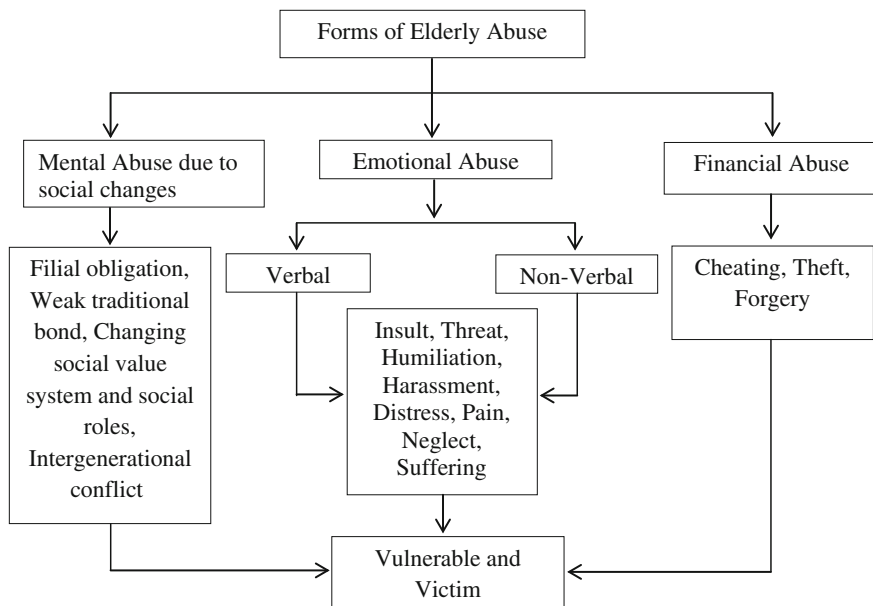
Notwithstanding the emerging consensus on perpetual elder abuse of Indian older adults (Prakash 2001; Vaswani 2001), the exact nature and magnitude is not well documented. The earlier studies showed that the existing evidence on elder abuse is sparse (Desai and Veeton 1993; Jamuna 1999) and even that was too largely based on qualitative studies (Jamuna 2003; Nagpaul 1998; Veeton 2001). Among 140 older adults studied, verbal abuse (80.7%) was the most frequent form of elder abuse followed by neglect (52.9%), financial abuse (37.1%), and physical

abuse (22.9%) (Srinivas and Vijayalakshmi 2001 as cited in Chokkanathan and Lee 2005). While the studies of Chokkanathan and Lee (2005) revealed 14.1% prevalence of elder abuse in a sample of 400 community-dwelling Indians aged 55 or above, with chronic verbal abuse being the most common (10.8%) followed by financial abuse (5%), physical abuse (4.3%) and neglect (4.3%). In a more recent study of a representative household survey of 300 older Indians, Sebastian and Sekher (2011) argued that nearly half of the participants (49%) reported having experienced abuse or neglect from their family members. HelpAge India (2012) in a large-scale representative study of 5400 community-dwelling participants aged 60 or above found that 31% of older adults had been abused and 24% experienced abuse on a daily basis. But very few studies have focused on emotional neglect of older adults due to loneliness arising out of inter-generational relation conflict and gap. Apart from all these forms of elder abuse mentioned above, we made an attempt to bring out emotional and verbal forms of elder abuse in this study.

In the Asian cultural context, the issue of elder abuse is perceived as a private family matter (Dong et al. 2007; Yan and Tang 2001). Therefore, it is difficult to theoretically frame the nature and magnitude of elder abuse. The older adults predominantly perceived that confessing one's own abuse meant acknowledging to others that family members, especially adult children, were not fulfilling their filial obligations of respecting and caring for their elders (Cheng and Chan 2006). Disclosing family matters with others, particularly if the problem is one's own child's abusive behaviour, is perceived as shameful because such behaviour may be attributed to poor parenting (Lee and Eaton 2009). In Indian culture, acknowledging and reporting abuse are considered a taboo topic. A study in India found that 55% of older adults had not reported their abuses by their family member to anyone. Of these, 80% argued that they wanted to protect family honour and reputation (HelpAge International 2012 as cited in Yan et al. 2015). However, Desai and Raju (2000) attempted to explain elder abuse through different theoretical accounts: social isolation, stress, intra-individual dynamics, impairment dependence, negative attitudes towards older adults, and cycle of abuse of inter-generational transmission of violence. In this chapter an attempt has been made to explain the forms and issues of elder abuse through emotional abuse and neglect of older adults due to inter-generational conflict (see Fig. 11.1). Emotional abuse is an infliction of distress, pain or suffering through verbal or non-verbal acts. It also includes insults, threats, intimidation, humiliation and harassment (Singh et al. 2015).

## Methodological Approach

The study applied a qualitative research design. The methods employed included in-depth interviews, the non-participant observation and field diary. A total of 116 in-depth interviews were conducted, out of which 42 were from Kolkata, 37 were from Delhi and 37 from Kerala. In this study, 79 in-depth interviews of older men and their care-givers were conducted in Kolkata and Delhi, both from homes and



**Fig. 11.1** Conceptual framework on forms of elder abuse. *Source* Authors

old-age institutions, to understand the forms of elder abuse and mistreatment in dyadic care relationships. Out of these 79 in-depth interviews, 47 were with older men and 32 were with their care-givers in Delhi and Kolkata. Out of these 47 older men, 25 were from Kolkata and 22 were from Delhi. Among the care-givers, 17 were from Kolkata and 15 were from Delhi. The main focus of the study in Kerala was to understand the place attachment and home-making process of older adults in various types of institutional care settings (old-age homes). There were a total of 37 in-depth interviews conducted at three old-age homes in Kerala. Each of these three old-age homes is used by older adults from different socio-economic classes. Among these 37 older adults, 23 were female and 14 were male participants. Besides, three more in-depth interviews were carried out among care-givers in each of the old-age homes. Participants were selected through purposive sampling, and interviews were conducted till the saturation of data. The data were collected in the months of June, July and August 2013 in Kolkata, and in the months of December 2013 and February and March 2014 in Delhi. On the other hand, the interviews in Kerala were conducted during the period from June to December 2015.

## Participant Recruitment

In this study we have included older adults aged 60 and above who are dependent on the care-givers for day-to-day activities. The process of participant recruitment involved two stages: the first was to define the appropriate study population, and then to identify strategies for recruiting. The participants were accessed with prior permission in both the settings (i.e. in the homes as well as in the old-age homes). First, permission was taken from the authority of the institutions. Later we sought separate permission from participants, that is older adults and care-givers. We didn't recruit participants from among those who were sick and couldn't talk. Each participant was informed about the research before their participation and care was taken to get their consent. Photographs were taken and used only with the prior permission of participants. On the other hand, the older adults staying in homes were accessed through gatekeepers and were interviewed with prior permission of the family members. Still there were some constraints in accessing the older adults and their care-givers living in homes in Delhi. The constraints were mainly the age and gender of the first two authors who collected the data.

## Interviews and Observation

The in-depth interviews were conducted in the institutional care centres (commonly known as old-age homes in India) and homes (Delhi and Kolkatta). An in-depth interview guide was used for the personal interview of the older men and their care-givers. The interview guide was prepared in English but was translated into the local language. There were few participants who preferred English over local language for the interviews. For older adults living at home, most of the interviews were conducted in park spaces where they go for meeting fellow older adults in the afternoons. Parks were selected so that interviewees could share their everyday life experiences away from their family members. The interviews for the institutional care-receivers were conducted in their personal room and in open spaces of the institutions.

Besides, much information was collected through observation as mere interviews cannot reveal the attitudes and the behaviour changes of the care-receivers as well as the care-givers in a particular setting. It also helped to cross-check the information shared by the participants in their interviews on particular issues such as behaviour towards each other. These observations were noted down in the field diary during the field study and incorporated while explaining the contexts.

## Data Analysis

This study is based on the personal interviews data that were digitally recorded and transcribed in Bengali and in Hindi. All the transcribed data were translated into the English language. The interviews were analysed with the help of WeftQDA,

a software package for qualitative data analysis. This software helped to develop codes for categories from the stories of the participants. Then each of the code family was described comparing different statements and quotes made by the participants. After that these descriptions were contextualized further with the observation data. Though the research was conducted through both the deductive and inductive methods, this particular study of perceptions and prevalence of elder abuse has come out as an inductive code. The results are analysed with the narratives of the care receivers and their emotional attachments and relationships with the people and place. For the interviews conducted in Kerala, we present the first results and impressions as the data was collected till December 2015.

## Results and Discussion

The findings of the study indicate that the older adults report being ill-treated by their family members as well as by institutional care-providers. It has been observed that some of the older adults who were abused by their family members shifted to the institutions. Some continued to co-reside with children due to societal pressure and economic dependency. The older adults experienced mistreatment and verbal abuse as the prominent form of abuse. In this study, different forms of abuse have been discussed in two different settings; one is in the homes and the other is in institutions.

### Multiplicities of Abuse

In a definition of the elder abuse it has been mentioned that one of the essential characteristics of elder abuse is the mistreatment by a trusted one in the family. In the interviews of the older adults, living in homes, they hesitantly narrated their bitter experiences. The most prominent form of emotional abuse is the use of foul language by the care-providers. **Verbal abuse**, disrespect and being threatened by the younger family members led to feelings of loss of status and security for the older adults. Alcohol addiction was mentioned as one of the precursors of violence. This may be seen below in the case of Kalam, where he tries to reason with his son about the ill-effects of alcohol on his already compromised state of health. The ensuing verbal abuse reflects the changing power relations where the son questions the ability of the father to stop the alcohol use. The consequence is older men, such as Kalam, retreat from such confrontations and refrain from engaging with the lives of their family members. Such disengagement then leads to loneliness and possible feelings of depression among older adults.

When they become angry they abuse me; they use rough language. Once one of my sons was drunk and I asked him 'Why did you drink? We spend fifty thousand for your kidney

recently and you are drinking why?' Then he replied, What the f\*\*\* you are saying? What can you do if I drink?' But he himself behaves like this. He drinks and takes name; 'What f\*\*\* you can do?' So I do not talk with him much. (Kalam, care-receiver at home, Kolkata)

Sebastian and Sekher (2011) state that older persons who are economically dependent on their children are more vulnerable to verbal abuse and neglect than those who are not. In this study some of the older adults mentioned that their family members are not compatible with them; therefore, they feel disrespected and neglected. Yan et al. (2015) report that inter-generational conflicts are likely to result from differing generational expectations and aspirations. Subhas perceives that loss of respect and abuse contribute to his suffering. This relative powerlessness against his son and daughter-in-law indicates the status of the older adult in the family. His use of the term 'today's daughter-in-laws' also shows that there is disconnect between what he expects from his daughter-in-law and the lived reality of him expressing his authority within the household. His coping mechanism then relies on withdrawing from any kind of communication and becoming more of a passive care receiver.

No, no. Not at all. I am not only getting less care and respect but also I am suffering. I think the young generation feel pain for caring for the elderly. Today's daughters-in-law do not tolerate our words. If I say something strictly then they will fill their husbands' ears and then my sons will rebuke me 'Why did you say like this to my wife?' Why should I say anything like this? Whatever they will provide I take and if they are not giving then I will not take; I will eat if they provide otherwise not eat; that's all. (Subhas, care-receiver in home, Kolkata).

**Economic abuse** in the forms theft of property, neglect in payment for living necessities and forcible transfer of assets was mentioned by most participants in our studies. The abuse by the family member, particularly by sons, was largely due to financial reasons such as distribution of property or sharing income in the family. We present here the case of Eliyamma who, though born into a rich family, has been left to fend for herself and has found shelter in a government old-age home. The case study highlights the experience of unmarried older women and their status in the families. Legal aid and protection also did not help Eliyamma get what is rightfully hers.

Eliyamma Geevarghese, 82, is an unmarried woman; she is living in a government-run old-age home in Kerala. She had two brothers and two sisters but now she is the only one alive. She has several nephews and nieces. She was born into a rich family and got lot of ancestral property worth cores of rupees from her father. As she was unmarried she has suffered a lot. She was thrown out from her house in the middle of the night. Her brothers and their sons tried to grab her property. So she went to the Supreme Court in Delhi and won the case. The Court ordered that the property belongs to her and she must have the same standard of living as her brothers' families. She claimed that her nephews must pay her rent per month as per the Supreme Court verdict. However, one day when she visited her home, the extended family members didn't open the door. She is distressed because no-one from her family likes her presence; they don't even answer her phone calls.

**Physical abuse** was usually the result of inter-generational conflicts, and women were more vulnerable to such abuse than men in the study. In this study,



participants revealed that they had been physical abused largely due to financial issues. This conflict could also be due to unmet care of the older adults and care-gap in their expectations. Such inter-generational conflicts sometimes lead to strong disputes and result in physical abuse of the older adults. The perpetrators of violence come largely from within the family and in most cases are children or spouses. The case study of Chempakam shows how physical violence is closely related to economic abuse.

Chempakam is a 75-year-old woman who lives in Govt. Old Age Home in Kerala after she was mistreated in home by her son and daughter-in-law. She had handed over each and every property to her son and daughter-in-law. Her son also took money from her without her knowledge. She mourns that she has given everything to them and has nothing left for her own use. Once her son brought bottles of liquor though he already had enough *kallu* (liquor). Then he behaved badly, her daughter-in-law called the police. Police came to her house and enquired. Her son thought it was his mother who called the police. But she does not like him to be touched by police, to be maltreated. Then he threatened that *'if he is caught by police as informed by someone, he will come back and do his first murder. Isn't that me?'* Thus when there arose a quarrel, he pulled her hair and hit her. After the hit she cried out for help but nobody came from neighbourhood. Her family members did not tell her to go away but she herself decided to live in an institutional care centre largely due to the fear of being physically abused again.

Older women are the ones who are more vulnerable and suffer the larger share of abuse. The change in power relations at home upon the death of the husband makes the lives of the older women more precarious. They have less access to family property and legal aid. Those who do manage to take control of their assets are abused, cheated and abandoned by the family.

My husband is a drunkard. I have suffered a lot. After drinking he used to attack me physically. He grabs me and throws me away. Not only my husband's attack but I had to suffer the assaults of his first son from his first marriage. One day he grabbed me and pushed me and hit me hard. (Saradha, care receiver in institution, Kerala).

## Neglect and Mistreatment

Neglect is another prominent form of elder abuse in the contemporary changing family dynamics and deteriorating inter-generational relations. In this study the participants articulated how they were being neglected by their family members as well as by society. Neglect in the domestic setting comes in many forms: lack of communication, not providing for the necessities for the older adults, not providing food, not taking care of health problems or doctor visits. The care-gap is due to the unmet care expectations of the older adults.

Whatever I say they might not like and the answers are given by the daughters-in-law not the son. So this becomes intolerable. And now what has happened is my sons have no say in anything, they support anything that their wives say. (Raghu, home care-receiver, Kolkatta).

In the institutional setting, older adults who expressed their opinions on negligence had to bear the consequences of complaining to the higher authorities. There were instances where the care-providers also articulated about the negligence of the older adults' care. It has been found that there is a close relation between negligence and loneliness; that is, the neglected care-receivers felt the loneliness in homes as well as in the institutions. The older men used words like *just passing my time, no hope, avoid me, not give attention* and *does not care* to express their discontents. In Delhi and Kolkata, the majority of care-receivers in the institutions perceived that they were dumped by the family members first then neglected and deserted in the institutions. They perceived that as they age and stay in the institutions they are less respected in society. They realized that when they were in homes people used to respect them. The case was different in Kerala, where older adults paid large amounts of money to stay in old-age home. This changed the power relations as they could demand the care they paid for. One has to also acknowledge that some older adults may not reveal the mistreatment due to societal norms and personal inhibitions of being the seen as the victim. Similarly, Nagpaul (1998) and Pablo and Braun (1998) report that older adults refuse to acknowledge such experiences of abuse because of personal disgrace, family honour and protecting family members' reputations (Gupta 2007).

## **Abuse and Push to Institutions or Independent Living**

To avoid being abused and neglected by their family members, some of the older men preferred to leave the house and stay in a separate house with a domestic maid. In the Indian scenario the burden of care for older men is largely on the women in the household; in cases where the spouse is available, she is the main care-giver and after her it is the daughter-in-law. Incompatibility of co-residence with son and daughter-in-laws was seen as the major reason for inter-generational conflicts. Chokkanathan and Lee (2005) also found that inter-generational gap, adjustment problems of daughter-in-laws in a new environment, mother-in-laws' authoritative attitudes and sons' active or passive support of wives are cumulative reasons for elder abuse in the changing social and family system. To avoid such conflicts, many older adults then lived apart or moved into an institutional care home.

Whatever I say they might not like and the answers are given by the daughters-in-law not the son. So this becomes intolerable. And now what has happened is my sons have no say in anything, they support anything that their wives say. But I think if we were living somewhere nearby this kind of thing might have happened. But since I do not live in their proximity I am saved from such abuses. This is the reason I stay away from them. (Manoj, care-receiver at home, Kolkata)

Other older adults stated that their family members, particular sons, were rude and abusive and they were not ready to spend on their fathers' medical and other aspects of care. So some older adults left the home and shifted to institutional care

centres. Those who decided to live apart from their children or moved to care homes where they had to pay for the care were relatively well-off, most often with a pension by which they could afford the facilities.

I became a burden for them and they asked me to get out of the house. I worked hard for my family. All my assets utilized for this family. Now I became a useless fellow for my family. They treated me as like their slave. They wanted me to become their slave'. (Parameswaran, care-receiver in institution, Kerala)

They curse me, saying I should die. They say that we should die so that they don't have to spend so much of money on us. I had to get a pacemaker. What can I expect from them, they are educated, they are graduates; one of them has a MSc degree, what is the use of it? For whom did I spend lakhs of rupees? So I got disgusted and came here. I don't have a lack of money. By God's grace, there is no lack of house or car, but I am fed up. I have told my children that they can do anything but they should not tell me anything. (Soumen, care-receiver, Kolkatta)

There is a strong gender discrepancy in this movement to old age homes. Women who were not in paid employment or who were abandoned by their family members usually found themselves at the mercy of the government old-age homes. Conversely, men who had assets and pensions were in better position to choose a care home that matched their requirements.

## Conclusion

In this chapter we have explored the various forms of abuse faced by older adults both at home and in institutional settings. Abuse of any kind on a vulnerable population is a matter of concern. As shown in this rich empirical material, the larger share of abuse takes places within domestic settings and the perpetrators are often family members. The powerlessness older adults and their inability to seek protection make elder abuse less visible for social intervention. The application of rigorous qualitative methods has enabled us to examine this sensitive issue in both the settings. The findings clearly reveal the need for government and community interventions to protect the rights of older adults. The gender dimension in these case studies further highlights the inequalities and discrimination women face in Indian society. Patriarchal norms and loss of rights gravely affect older women and make them more vulnerable to abuse. Based on our study, we recommend setting up helplines and elderly support groups which can aid in finding psychological and legal support for the older adults. Abuse in any form and at any age robs the victims of their dignity. It is one of the basic human rights we need to protect to promote the well-being of older adults.

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