

Elder abuse: Working together to ensure healthy, meaningful, and dignified life

Sir,

Owing to the prioritization of health and improvement in the various determinants of health, a major proportion of people living in different regions of the world can expect to live beyond the age of 60 years.^[1] In fact, it has been anticipated that in the next 35 years, the proportion of the world's population over 60 years will increase up to 22% from the current 12%, with almost 4/5th of them will be from low and middle income nations.^[1] Although, it is a fact that a longer life brings multiple opportunities, its benefit can only be realized if these years are spent in a healthy state.^[1]

The current trend suggests that a rise in the incidence of elder abuse has also been observed with almost 10% of elderly being exposed each month to various forms of abuse leading to injuries and long-lasting psychological aftermaths.^[2] Further, these estimates are often not accurate as a major proportion of people often do not report it to the friends/health authorities due to fear or other reasons.^[2] From the policymakers' perspective, it is essential to first understand the potential risk factors operating at different levels so that an integrated approach can be framed to address the menace of elder abuse.^[3]

A wide range of factors such as poor physical/mental health of the elderly, gender, becoming a widow, history of poor family relationships, social isolation, lack of supportive services, negative perceptions about older people in society, property issues, financial constraints, and institution-related factors, have been identified in variable settings.^[2-4] Acknowledging the magnitude of the elderly people, the prevalence of the elder abuse, and the associated long-term adverse consequences, there is an immense need for each of the nations to ensure that their health and allied sectors are strengthened enough to respond to abuse among the elderly.^[5]

Multiple strategies have been planned and even implemented to address the menace of elder abuse such as organizing awareness campaigns for the community and health professionals, conducting programs for various generations of people in school settings, extending supportive services for the victims,

screening of potential victims and abusers, sensitizing people who are abusing older persons, creating a helpline number to provide assistance/referral services, notifying abuse to authorities mandatorily, creating self-help groups in the society, roping in a team of experts to identify and address the variable needs of the elderly, developing a network of safe houses and emergency shelters, and improving standards of institutional care.^[1,4]

However, the success of all the above strategies can only be achieved provided all the concerned sectors (health, education, social welfare) work together in full collaboration.^[1,5] Further, the World Health Organization has realized the importance of elder abuse as well, and has intensified their efforts to identify, quantify, and effectively respond to the problem of elder abuse.^[1]

To conclude, in order to reduce the magnitude of the elder abuse, there is an indispensable need to involve all the stakeholders and work together toward making the world a better place for the elderly.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

Saurabh R Shrivastava, Prateek S Shrivastava, Jegadeesh Ramasamy

Department of Community Medicine, Shri Sathya Sai Medical College and Research Institute, Chennai, Tamil Nadu, India

Address for correspondence: Dr. Saurabh R Shrivastava, 3rd Floor, Department of Community Medicine, Shri Sathya Sai Medical College and Research Institute, Ammapettai Village, Thirupporur - Guduvanchery Main Road, Sembakkam Post, Kanchipuram - 603 108, Tamil Nadu, India.
E-mail: drshrishri2008@gmail.com

REFERENCES

- World Health Organization. Ageing and Health — Fact Sheet No. 404; 2015. Available from: <http://who.int/mediacentre/factsheets/fs404/en/>. [Last accessed on 2015 Sep 25].
- World Health Organization. Elder Abuse — Fact Sheet No 357; 2015. Available from: <http://who.int/mediacentre/factsheets/fs357/en/>. [Last accessed on 2015 Oct 05].
- Burnes D, Pillemer K, Caccamise PL, Mason A, Henderson CR Jr, Berman J, *et al*. Prevalence of and risk factors for elder abuse and neglect in the community: A population-based study. *J Am Geriatr Soc* 2015;63:1906-12.
- Dong X. Screening for elder abuse in healthcare settings: Why should we care, and is it a missed quality indicator? *J Am Geriatr Soc* 2015;63:1686-8.
- World Health Organization. A Global Response to Elder Abuse and Neglect: Building Primary Health Care Capacity to Deal with the Problem World. Geneva: WHO Press; 2008. p. 1-7.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55

Access this article online	
Quick Response Code:	Website: www.jmsjournal.net
	DOI: ****

This is an open access article distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms.

How to cite this article: Shrivastava SR, Shrivastava PS, Ramasamy J. Elder abuse: Working together to ensure healthy, meaningful, and dignified life. J Res Med Sci 2015;??:???-???.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55