



VIOLENCE AGAINST THE ELDERLY IN HEALTH RESEARCH: AN INTEGRATIVE REVIEW

VIOLÊNCIA CONTRA A PESSOA IDOSA NAS PESQUISAS EM SAÚDE: REVISÃO INTEGRATIVA VIOLENCIA CONTRA LAS PERSONAS MAYORES EN LAS INVESTIGACIONES EN SALUD: UNA REVISIÓN INTEGRADORA

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ABSTRACT

Objective: analyzing the scientific production about violence against the elderly. **Method:** an integrative review in order to answer the question << How is addressed the theme violence against elderly in health researches? >>. The search was conducted in LILACS database, through the CAPES Journal Portal and the virtual library SciELO, published between 2009 and 2013. The sample consisted of 26 articles. **Results:** the journal that most published was Science and Public Health (46,2%). The main topics addressed were: main types of violence; victim's profile; profile of the aggressor; self-inflicted violence; factors associated with violence; suffering makes acquire chronic diseases; family context; preventive measures against violence; reasons hindering the recognition of violence; health services; legal instruments; social and public health issue. **Conclusion:** health professionals should reflect and deepen more in relation to the theme of violence against the elderly. **Descriptors:** Abuse of the Elderly; Violence; Elderly.

RESUMO

Objetivo: analisar a produção científica sobre a violência contra a pessoa idosa. **Método:** revisão integrativa com vista a responder a questão << Como é abordada a temática violência contra a pessoa idosa nas pesquisas em saúde? >>. A busca foi realizada na base de dados LILACS, no Portal de Periódicos da CAPES e na biblioteca virtual SciELO, publicada entre 2009 a 2013. A amostra foi constituída por 26 artigos. **Resultados:** o periódico que mais publicou foi Ciência e Saúde Coletiva (46,2%). As principais temáticas abordadas foram: principais tipos de violência; perfil da vítima; perfil do agressor; violência autoinfligida; fatores associados à violência; sofrimento faz com que adquiram doenças crônicas; contexto familiar; medidas preventivas contra a violência; motivos que dificultam o reconhecimento da violência; serviços de saúde; instrumentos legais; questão social e de saúde pública. **Conclusão:** os profissionais da saúde devem refletir e se aprofundar mais em relação à temática violência contra a pessoa idosa. **Descritores:** Maus-Tratos ao Idoso; Violência; Idoso.

RESUMEN

Objetivo: analizar la producción científica sobre la violencia contra los ancianos. **Método:** una revisión integradora con el fin de responder a la pregunta << ¿Cómo abordó el tema de la violencia contra las personas de edad avanzada en la investigación en salud? >>. La búsqueda se realizó en la base de datos LILACS, a través del Diario Portal CAPES y la biblioteca virtual SciELO, publicada entre 2009 y 2013. La muestra estuvo constituida por 26 artículos. **Resultados:** el periódico que más publicó fue Ciencia y Salud Pública (46,2%). Los principales temas abordados fueron: principales tipos de violencia; el perfil de la víctima; perfil del agresor; auto-infligida la violencia; los factores asociados con la violencia; hace que el sufrimiento adquieren enfermedades crónicas; contexto familiar; las medidas de prevención contra la violencia; razones que impiden el reconocimiento de la violencia; servicios de salud; instrumentos jurídicos; asuntos sociales y de salud pública. **Conclusión:** los profesionales de la salud deben reflejar y profundizar más en relación con el tema violencia contra las personas mayores. **Descriptor:** Abuso a los Ancianos; Violencia; Ancianos.

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INTRODUCTION

Population aging becomes a challenge both in developed countries and in developing countries. We know that is a claim of any society, but not enough by itself. It is necessary that this process be accompanied by quality of life and respect for the elderly population.¹ However, often aging is treated as a "problem" and not as an achievement, and the elderly seen as a burden on the family, for State and society. The process of population aging reflected and still reflects on the different spheres of social structure, economic and political society, since the elderly have specific needs for adequate living conditions.²

The difficulties faced by older people are many, some of having fragile and physiological vulnerability of this age group, which make them potential victims of various social problems, among which the growing violence observed in our days; however, many forms of violence not come officially to institutional and scientific knowledge, which sets the underreporting and consequently affect the reliability of the information about this reality.³

The World Health Organization (WHO) defines violence against elderly person like "actions or omissions committed once or many times, damaging the physical and emotional integrity of the elderly, preventing the performance of their social role." In the field of health such violence is recorded as ill-treatment and its impacts are represented in the "external causes" of the International Classification of Diseases (ICD-10), in which are included unnatural events that lead to death or cause injury and trauma.⁴

In order to standardizing the classification and study of violence in this population, the final report of the Study on National Violence Incidence of Abuse National Center on Senior Washington, summarized the most used terms and thus described them: physical abuse as and the use of physical force that may result in damage completely, pain or physical injury; sexual abuse is non-consensual sexual contact of any person with an elderly; have emotional or psychological abuse is defined as potentiation of distress or emotional pain to the elderly. Financial abuse is the illegal or improper use of the assets of elderly goods; abandonment is the defection of the elderly by an individual who had physical responsibility or had taken charge for providing care; already negligence is the refusal or failure to fulfill obligations or duties to the elderly; and self-neglect is

characterized as the behavior to the elderly that threatens their safety or health.⁵

In Brazil, specific studies on violence against the elderly, but also on the possible associated factors are scarce, although knowledge of these issues is essential for health promotion, early diagnosis and monitoring of victims. It is known that it is extremely important that health professionals working with disease prevention, which emphasizes violence against elderly, are more informed on this subject that is a serious public health problem. Given this perspective, the purpose of this article is:

- Analyzing the scientific production about violence against the elderly.

METHOD

It is an integrative review, a method that provides the synthesis of knowledge and the incorporation of the applicability of significant study results in practice.⁶

The phases for the development of this study were: definition of the subject, setting the descriptors, search in databases, and collection of articles, refinement, and analysis of the included articles, discussion of the results and presentation of the integrative review.

To guiding this review it was formulated the question: How is approached the theme violence against the elderly in health researches?

To conducting the survey on violence against the elderly, there were used the descriptors: abuse the elderly, elderly and violence, with the latter used as a term "nursing" for sample refinement, which are inserted in the Descriptors Health Sciences (MeSH). For the location of the studies have been consulted the database Latin American and Caribbean Health Sciences (LILACS), the journal portal of Higher Education Personnel Training Coordination (CAPES) and the virtual library Scientific Electronic Library online (SciELO).

The inclusion criteria were: articles available in the form of original articles, full text, in Portuguese, published between 2009 and 2013, and be confined in the selected theme. Thus, 18 articles were selected in LILACS, 20 articles in SciELO and 27 articles on the portal of CAPES, after excluding the repeated stayed a total of 26 articles that were presented in table form allowing better visualization and summarization and then interpreted as the proposed objective.

Regarding the exclusion criteria were those who presented twice in databases, those who

did not fit the theme, but also not up to the inclusion criteria.

The instrument used to validating the study sample to the categorization of publications contemplated for data analysis, relevant to the interpretation of the results of each search.

We designed a form with the following items: item identification, type of journal, year of publication, methodological approach, objectives, main results and conclusions. For examination and synthesis of the papers used a framework built for this purpose, which included the following: type of journal, year of publication, methodological approach, and main themes.

The presentation of the review and discussion of data were performed descriptively in order to allow the reader to critical evaluation of the results obtained and its applicability.

RESULTS AND DISCUSSION

Regarding the journals that most published on the theme, stood out Science and Public Health (46,2%); School Anna Nery and the Brazilian Journal of Geriatrics and Gerontology, each representing 7,9% of the studies analyzed (Table 1).

Table 1. Distribution of studies on violence against the elderly person, published between 2009 and 2013, according to journal. Brazil, 2014.

Journal	n	%
Science and Public Health	12	46,2
School Anna Nery	02	7,9
Journal of Geriatrics and Gerontology	02	7,9
Psychology in Study	01	3,8
Psychology: Reflection and Critics	01	3,8
Journal Kairós Gerontology	01	3,8
Journal Rene	01	3,8
Baiana Journal of Public Health	01	3,8
Journal of Medicine of Minas Gerais	01	3,8
Physis Public Health Journal	01	3,8
Brazilian Nursing Magazine	01	3,8
Psychology: Theory and Research	01	3,8
Interface - Communication, Health, Education	01	3,8
Total	26	100

As regards the publication period, as shown in Table 2, 2010 and 2012 were the years when there were a greater number of publications on the subject, representing

38,4% of the studies in both years, followed consecutively to 2011 (11,5%), 2009 (7,9%) and 2013 (3,8%). This represented the period of lowest publication.

Table 2. Distribution of studies about violence against the elderly person, published between 2009 and 2013, according to the publication period of the study. Brazil, 2014.

YEAR	N	%
2009	02	7,9
2010	10	38,4
2011	03	11,5
2012	10	38,4
2013	01	3,8
Total	26	100

Regarding the approach of the studies used by researchers to addressing the issue, the highlights were the following approaches: Quantitative (38,4%); Qualitative (30,8%);

Quantitative and Qualitative (15,4%) and 15,4% of the studies did not specify the type of approach used (Table 3).

Table 3. Distribution of studies about violence against the elderly person, published between 2009 and 2013, according to the study's approach. Brazil, 2014.

Approach	n	%
Quantitative	10	38,4
Qualitative	08	30,8
Quantitative and qualitative	04	15,4
Non-specific	04	15,4
Total	26	100

As evidenced in Figure 1, the main themes addressed in the studies were: main types of violence; profile of the victim; profile of the aggressor; self-inflicted violence; factors associated with violence; suffering makes

acquiring chronic diseases; family context; preventive measures against violence; reasons that makes difficult the recognition of violence; health services; legal instruments; social and public health issue.

Themes	Main types of violence
	Profile of the victim
	Profile of the aggressor
	Self-inflicted violence
	Factors associated with violence
	Suffering makes acquiring chronic diseases
	Family context
	Preventive measures against violence
	Reasons that hinder the recognition of violence
	Health services
	Legal instruments
	Social and Public Health issue

Figure 1. Distribution of studies about violence against the elderly person, published between 2009 and 2013, according to themes. Brazil, 2014.

In relation to the main types of violence, there were highlighted: the most common form was the abandonment/neglect ^{.3} In addition to physical aggression and disrespect⁷, psychological abuse, self-neglect, sexual abuse and financial ⁸, economic abuse and emotional^{9, 10}, family violence¹¹⁻², sexual violence¹³, psychological violence, physical violence.^{14,15,16,17} In physical violence highlight abuse including beatings, slaps, kicks, shakes or other forms.^{1,18}

Regarding the profile of the victim, a research has shown that many cases of violence reached women.^{13,19} The female is assumed as the main victim of abuse^{9,16}, aged 60-69 years old, married¹⁵ and most are retired; brown, studied to complete basic education.²⁰ Research shows that physical violence was significantly more frequent in males and neglect were predominantly female.¹³ Another study demonstrated that older people who have never studied have suffered the most violence and who had no partner. The most victimized elderly were receiving up to a minimum wage and that contributed to the upkeep of the house, and the women would be more subject to the possibility of violence occur in the home environment in relation to men.¹⁹

Concerning the perpetrator's profile, the children represented the main perpetrators of violence.⁹ Most attackers were single men.²⁰ A study reveals that out of home, violence is committed by perpetrators who were childless

and with suspected intake alcoholic beverage. In addition, psychological violence was more common among elderly at home, caused by children with suspected alcohol use.¹³

A research showed that the old man is in a high risk group for self-inflicted violence.²¹ The cumulative weakening of personal and social resources in the life cycle reveals that the risk of suicide in the elderly requires permanent care of public health.²²

Regarding the family context of the elderly, these showed the expectation that the family act as support and protection and that family violence is what hurts this principle. Family violence highlights the idea that the elderly person is fragile and dependent, in which the family is characterized as responsible for not offering a decent area of care to that naturally weaker.¹²

The main preventive measures against violence to the elderly emphasized in the literature were: expanding the discussion on the topic through new investigations ^{.3} Some preventive measures were represented by complaint, punishment, public policies and care.⁷ It is necessary to developing professional competence focused on the elderly to work in humanization, welcoming, healthy habits, overall, family and social support, perception of domestic weakness and ill-treatment, among other.²³ should have a greater articulation of different social sectors, such as health, education, welfare and public

safety, aiming to develop better planning with emphasis on systematization and evaluation of prevention measures and combating violence.²⁴

There are reasons hindering the recognition of violence as: the fact that the elder did not speak about the subject, communication problems and diseases.³ Health services are not prepared to answer/receive the elder victim of violence as they present inadequacy in meeting with respect to the following: adequate structure of disability to the permanence of the elderly companion; absence of specific clinical protocols for care in these cases and reporting forms; inadequate support to older people, carers and victimizers; little involvement of specialized clinics; insufficient professional training and lack of a flow defined for this population.²⁵ The study highlights the need for professionals and managers aware of the proper approach to violence against the elderly person in the family should be the focus of attention to comprehensive health care, intersectoral and interdisciplinary.²⁶

Health services have a duty to establish itself as a place of welcome and development support projects against violence.¹⁴ study showed that health services are not in the proper and full profile needed to care for this population, demonstrating the need to adapt these services. There is a structural and organizational deficiency in health services in clinical hospital area in the care of patients with accidents and violence against the elderly.²⁶

Some studies have shown legal instruments seeking to combat violence against elderly, the example is cited the Elderly Statute.²⁷ It is also listed as instruments: Dial elderly, Police and Prosecutors Defense of the Elderly and others to encourage the official notifications of abuse and providing psychosocial support.⁷ Study reported missing protocols with preventive approach.²⁸

Violence against elderly person is a social and public health issue, so the importance of encouraging the notification and contribute to the wider dissemination of information which may support the development of integrated and intersectoral public policies that effectively promote health and quality of life of this group.¹³ It should be encouraged to formulating public policies to prevent cases of abuse.⁷ Improved care for the elderly victim of violence is an important step for the implementation of public health policies.²⁵⁻⁶ Policies and elder prevention and protection programs require better disclosure and operation in ensuring the comprehensive care

to this group.²⁰ Violence in national and international level is seen as a social issue and public health, because it is related with the violation of rights, decreased quality of life and existential limitations with varied expressions in different contexts.²⁴

Research showed the need for nursing care for the elderly based in the communication and emotional bonds, seeking an authentic care, along with family care. This implies that nursing professionals should be enabled for the technical competence, the ability to deal with their own feelings and to identify and understand the real needs of the elderly, both physical, psychological or social.²⁹

FINAL REMARKS

From the analysis of publications, the journal that published more on the subject was the journal Science and Public Health, representing most of the publications. Regarding the publication period, 2010 and 2012 were the years when there were a greater number of publications about the subject. Regarding the type of studies approach used by the researchers, the approach with greater representation was the quantitative, but also the qualitative approach had a significant percentage.

The studies showed that the main issues addressed by the authors were: main types of violence; victim's profile; profile of the aggressor; violence self-inflicted; factors associated with violence; suffering makes acquire chronic diseases; family context; preventive measures against violence; reasons hindering the recognition of violence; health services; legal instruments; social issues and public health.

It is necessary to conducting further research that can help revealing the problem in a more comprehensive manner. This study may serve to health professionals seeking to reflect and going deeper in relation to the theme violence against elderly, seeking to develop identification and prevention for this problem, in addition to having greater knowledge on the main journals that publish on the subject.

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