

Chapter 10

Are Elderly People Safe in Their Own Households? New Evidence from Seven States of India

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Background

With advances in the areas of health-care, nutrition and sanitation, the longevity of people has shown significant improvement around the world. From the mid-twentieth century, the proportion of the aged population (60 years and above) has shown steady and significant increases in developed countries, and began to increase in developing countries based on the phase of demographic transition. Population projections indicate that by 2050, around 21% of the world's population will be elderly, and the proportion varies from 32% in developed countries to 19% in developing countries (United Nations 2013).

The dramatic and widespread nature of ongoing demographic shifts indicates that the challenges of ageing population that India will face are sure to occur on an enormous scale. India is currently experiencing an unexpected wave of demographic changes. Increasing longevity and falling fertility have resulted in a demographic dividend, but also in a dramatic increase of the elderly population. Along with an increase in the proportion of older people, the old-age dependency ratio (population age 65+/population age 25–64) will also increase at rapid a scale and, according to United Nations estimates, the old-age dependency ratio will increase from the present 8.6 to 20.5% by 2050.

The elderly population in India has increased steadily from 12 million in 1901 to more than 100 million in 2011 (Fig. 10.1). Population projections indicate that India's elderly population will double in size between 2001 and 2026 (MoS&PI 2011). One of the significant characteristics of population ageing will be the wide

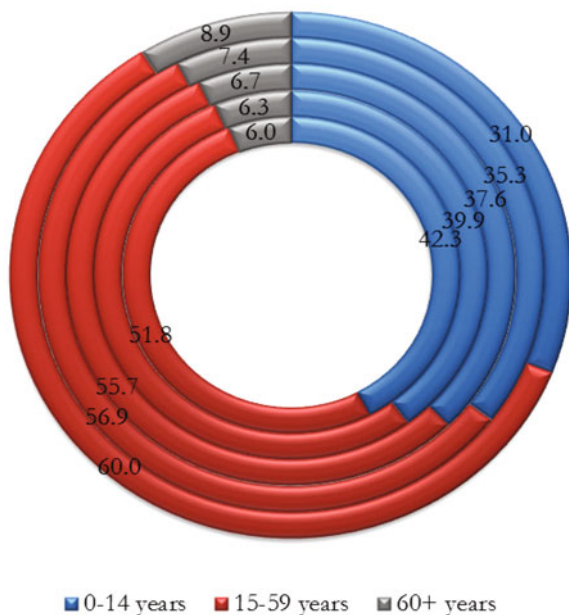
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Fig. 10.1 Age distribution of population by broad age groups in India, 1971–2011



inter-state variation based on the demographic scenario. As per the projections, by 2026, the North Indian population will be younger than that in the South. The median age of Kerala will be 35 while that in Uttar Pradesh will be less than 30 years (MoS&PI 2011).

While the numbers and proportion of elderly people have gone up, the vulnerability of the ageing population is also on the rise. Urbanization and migration have accelerated issues of living arrangements, economic situation, and abuse and neglect of elderly people in both developed and developing countries. The available literature from developed countries indicates that even with a strong social support mechanism for the elderly, a large number among them are victims of abuse and neglect from family members, informal care-givers, friends or formal care-givers. It also reveals that over the decades, the proportion of elderly people who are victims of abuse and neglect is also increasing (American Psychological Association 2004). The extent of elder abuse ranges considerably across the populations. According to a study conducted by King's College London, it is estimated that the prevalence of abuse among the elderly residing in private households was around 2.6% in 2008. Findings from Argentina reported a higher proportion of elder abuse, with nearly 45% of the elderly from urban areas reporting that they were abused in some way (United Nations 2002). A systematic review of existing studies of elder abuse and neglect across the world observed that the prevalence of elder abuse ranges from 3.2 to 27% in the general population. A study by the Korea Institute for Health and Social Affairs found that nearly 8% had experienced abuse from their children or other family members in Korea (Cooper et al. 2008).

While large variations are observed in the extent of elder abuse in different studies, the type of abuse reported also varies widely. However, the majority of the studies reported neglect or verbal abuse as the most commonly cited forms (Douglass et al. 1980; Comijs et al. 1998; National Elder Abuse Study 1998; UN 2002). However, there is also evidence that physical abuse is the most prevalent form (Pillemer and Finkelhor 1987; Arai 2006). The national elder mistreatment study conducted in 2009 reported 31% of physical abuse among elderly people in the USA compared to 8% experiencing emotional mistreatment (Acierno et al. 2009).

Regarding the risk factors of elder abuse and neglect, there is evidence that women are at higher risk of being abused or neglected than men (APS 2004; UK Study 2004; Eriksson 2001). On the other hand, there are studies which indicate that gender of the elderly is not a risk factor (NCEA 1998; Dimah and Dimah 2002). Most of the studies reported that elderly in advanced age especially those who are aged 80 and above, and elderly people who are economically dependent on care-givers for their basic needs are more vulnerable to abuse and neglect (Pillemer and Finkelhor 1987; NCEA 1998). A study which examined the explanations for the occurrence of elder abuse found that, among multiple explanations, the predominant factors are economic dependency, modernization, and social integration (Litwin and Zoabi 2004).

Abuse and neglect of the elderly were not considered problems in Indian society till recently, with the wide existence of the joint-family system, where elderly parents were treated with great respect and played a major role in family decisions. The elderly were largely taken care of by their immediate family, mostly by their sons in India. However, in recent times, with economic and social transition, we are experiencing a shift in the family structure as well and the joint-family system is crumbling not only in urban areas but also in rural India. The disintegration of joint-families coupled with fewer children to depend during old age and high migration of youngsters in search of better employment has left an increased number of their parents alone and vulnerable to abuse and neglect. Unlike developed countries, the social security system and government support for the elderly who are in need is not yet available in India. As per the Global Age Watch Index (2013), India ranked 73 out of 91 countries, based on four domains of income security, health status, employment and education and enabling environment (HelpAge International 2013).

The problems of the aged, especially abuse and neglect, received very little attention in India. The researches on ageing were mostly confined to seniors' health problems, economic conditions and living arrangements. Most of the available studies on elder abuse and neglect were largely limited to developed countries. However, during the last decade there has been an increased interest in studying elder abuse and neglect in developing countries. Still, little is known about its magnitude and nature in the family context, and the majority of the studies depend on qualitative information at micro level and anecdotal evidence (Jain 2008; Madhurima 2008). Given this context, there is an increasing need for nationally representative data and evidence on elder abuse.

The reported prevalence of elder abuse in India varies in different studies. According to a study conducted among 400 elderly people aged 65 years and above in Chennai, 14% were abused (Chokkanathan and Lee 2006) while the prevalence of abuse reported among the elderly from Delhi was much higher at 31% (Khan and Handa 2006). Another study reported nearly 49% of the elderly respondents from rural areas of Kerala experienced some form of abuse and neglect within households (Sebastian and Sekher 2011). Considering the social customs prevailing in the country, the reported cases will be showing only the tip of the iceberg. Based on the information provided by 100 elderly women from Pune, nearly a quarter faced abuse and neglect in their homes, and the majority reported more than one form of abuse (Bagga and Sakurkar 2011). A content analysis of newspaper stories concerning various facets of elder abuse found that 10 out of 16 newspapers reported evidence of elder abuse and neglect across Indian cities (Kumar and Bhargava 2014). While exploring the most common forms of abuse faced by the elderly in India, verbal abuse and neglect were the most cited forms in the majority of the studies (Srinivas and Vijayalakshmi 2001; Chokkanathan and Lee 2006; Bagga and Sakurkar 2011; Sebastian and Sekher 2011). A study conducted by HelpAge India in 2013 also reported that the most cited form of abuse experienced by elderly people was disrespect followed by verbal abuse and neglect.

There are various factors which determine the extent and nature of abuse towards elderly people, considering the socio-economic conditions prevailing in the society. In India, females were considered as more disadvantaged in all spheres of life and the extent of vulnerability increases when they become old. Elderly women are more susceptible to abuse and violence when they are widowed. Review of existing studies indicates that sex and marital status of elderly people plays a significant role among the set of factors which accelerate the elder abuse and neglect. The existing studies provided clear evidence that elderly females, especially widows, were more vulnerable to abuse and neglect (Dejong 2004; Chokkanathan and Lee 2006; Madhurima 2008; Sebastian and Sekher 2011). Economic dependency and living arrangements also emerged as key factors of elder abuse and neglect.

HelpAge India's report on Elder Abuse ('The Indian Youth Speaks Out'), based on a study among youths from 10 cities of India in 2015 reveals that 73% admit that the abuse and neglect of elderly people does exist in Indian society. It was also reported that although they were aware of the issues of elder abuse, the majority of them do not care or do not want to interfere/are not willing to take action against such incidences. Alarming, 35% of the youths reported that they had noticed elder abuse happening among their own relatives or in their own households (HelpAge India 2015).

HelpAge India carried out a survey in 8 cities, covering 833 respondents, from the oldest old (80+ years in age) in Delhi and the National Capital Region, Mumbai, Hyderabad, Chennai, Patna, Kolkata, Bhopal and Ahmedabad in 2014. According to this study, one-fifth of them reported having experienced some kind of abuse. The types of abuses reported were mostly verbal abuse, followed by neglect, disrespect, emotional and physical abuse (HelpAge India 2014).

The data from the Building Knowledge-Base on Population Ageing in India (BKPAI) Survey (2011) found that older females and the financially dependent older adults are more likely to face abuses of different kinds. The existing evidence also revealed that after inheriting property, the children behaved differently and started neglecting the needs of parents (Sebastian 2013). Skirbekk and James have explored the role of education and found that the level of schooling among elderly people is strongly negatively related to abuse against them. Even after controlling for wealth and other relevant variables, education is the factor that most consistently lowers elderly abuse (Skirbekk and James 2014).

In most of the cases, the main perpetrators are the immediate family members and that aggravates the helplessness of the elderly as they were reluctant to report the abuse and neglect. Sons and daughters-in-law are the main perpetrators of elder abuse in most of the cases, since they are the primary care-givers of elderly people (Sebastian and Sekher 2011).

Although various studies indicate that the abuse and neglect of elderly people do exist in our society, a need is felt to study their prevalence. The main objective of this chapter is to understand the magnitude of elder abuse in India and the factors influencing it, based on the data of seven Indian states.

Methodology

The present chapter uses the data from the Building a Knowledge-Base on Population Ageing in India (BKPAI) survey which was conducted in seven states of India—Himachal Pradesh, Maharashtra, Kerala, Punjab, Odisha, Tamil Nadu, and West Bengal—in 2011 by the United Nations Population Fund (UNFPA) in collaboration with the Institute of Social and Economic Change (ISEC), Bangalore, the Institute of Economic Growth, Delhi, and the Tata Institute of Social Sciences (TISS), Mumbai. The states were selected considering the share of the elderly population and regional representation. A total of 9852 elderly people were interviewed covering 8960 households (see Table 10.1).

The information was collected using a household schedule which covered the socio-economic and demographic information of the household and the type of amenities to measure the living standards of elderly people. In addition to the household schedule, the individual schedule for the elderly was canvassed to capture the demographic profile, work status, living arrangements, economic conditions, health and health-seeking behaviour, family situation including elderly abuse and neglect, and awareness about social security schemes etc.

By using the individual data of elderly people from the BKPAI survey, this chapter looks at the extent of abuse and neglect experienced by seniors within their families or outside. It also tries to examine the various contributing factors which led to the abuse and neglect of elderly in Indian settings. Univariate, bivariate and multivariate analyses were conducted to understand the magnitude and nature of abuse reported.

Table 10.1 Demographic profile of study states

Indicators	India	HP	Kerala	Maharashtra	Odisha	Punjab	TN	WB
Population in millions (2011)	1210.9	6.9	33.4	112.4	42.0	27.7	72.1	91.3
Exponential growth rate of population (%)	1.64	1.21	0.48	1.49	1.32	1.30	1.46	1.31
Percentage of elderly (60+)	8.9	10.2	12.6	9.9	9.5	10.3	10.4	8.5
Sex ratio (F/M * 1000)	943	972	1084	929	979	895	996	950
Sex ratio among elderly (F/M * 1000)	1033	1062	1226	1114	998	985	1051	1010
TFR, lifetime births per woman (2013)	2.3	1.7	1.8	1.8	2.1	1.7	1.7	1.6
Life expectancy at birth in years (2009–2013)	67.5	71.0	74.8	71.3	64.8	69.9	70.2	69.9

Sources Registrar General of India: Census, 2011, SRS reports 2013, SRS based abridged life table (2009–2013)

HP Himachal Pradesh, *TN* Tamil Nadu, *WB* West Bengal

Profile of the Respondents

Out of 9852 elderly people who participated in the study, 52.6% were females and 52.2% from rural areas (see Table 10.2). Looking at the age distribution, nearly 63% of respondents were in the age category of young old (60–69 years), 26% were old old (70–79 years) and 10% were oldest old (80 years and above). The majority of the respondents followed the Hindu religion and 24% belonged to the Scheduled Caste/Scheduled Tribe (SC/ST) category. A little more than half of the respondents reported they had ever attended school. Nearly 60% of the elderly respondents were currently married and 38% were widowed. Some 36% of the respondents reported they were engaged in income-generating activity during the last year prior to the survey. The major reason cited for working during old age was economic need (67%) and 30% reported that they worked out of choice. More than half of the elderly who were engaged in economic activity experienced physical or mental stress due to the work.

Table 10.2 Background characteristics of elderly respondents

Background variables	Percentage (numbers)
<i>Sex</i>	
Male	47.4 (4672)
Female	52.6 (5180)
<i>Age group</i>	
Young old (60–69 years)	63.3 (6239)
Old old (70–79 years)	26.4 (2601)
Oldest old (80 years and above)	10.3 (1012)
<i>Place of residence</i>	
Rural	52.2 (5138)
Urban	47.8 (4714)
<i>Religion</i>	
Hindu	79.0 (7781)
Others	21.0 (2071)
<i>Caste</i>	
SC/ST	24.8 (2383)
OBC	34.0 (3353)
Others	40.3 (3866)
<i>Ever attended school</i>	
Yes	54.0 (5324)
No	46.0 (4528)
<i>Marital status</i>	
Married	59.3 (5847)
Widowed	38.2 (3768)
Others	2.5 (237)
<i>Worked during last year</i>	
Yes	36.1 (2265)
No	63.9 (4001)
<i>Reason for working</i>	
By choice	29.1 (660)
Economic necessity	66.1 (1498)
Other compulsions	4.7 (107)

Living Arrangements of Elderly People

Elderly people's living arrangements largely depend upon the existing cultural norms and the support mechanism, especially the inter-generational support system available to them. In India, where seniors have limited or no resources to sustain themselves and lack a social support mechanism, they largely depend on their heirs for support during old age. Living independently, especially living alone, could be a disadvantage or even a result of neglect.

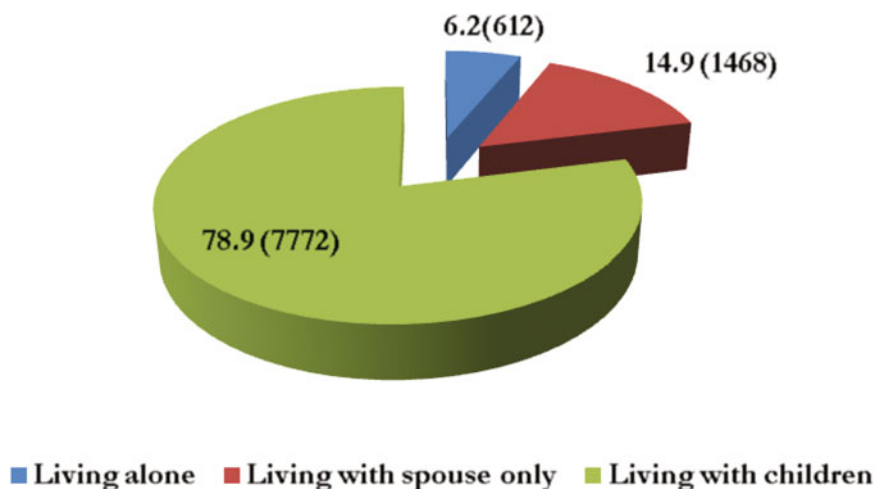


Fig. 10.2 Living arrangements of elderly people

Nearly 79% of respondents were living with their children and family, 15% were living only with a spouse and with or without a servant, and 6% were living alone (Fig. 10.2). Considerable inter-state variations were observed in the living arrangements of elderly people, with nearly 44% of those from Tamil Nadu reporting either that they were living alone or only with a spouse (15.8 and 27.7% respectively) compared to around 15% in Kerala and Punjab.

Of those who were living alone or only with a spouse, nearly half reported children living away as the reason for their current residence pattern, while 16% reported family conflict as the reason. Nearly 14% do not have any children and are residing alone or with spouse only. Overall, 40% of the respondents stated that they were comfortable with present living arrangements, and 48% found them satisfactory, while about 12% were uncomfortable. A higher proportion of elderly people living alone reported being uncomfortable (27%) than those who were living with their children and family (10%).

Elderly Involvement in Decision Making Within the Family

The ongoing transformation of Indian families from joint-families to nuclear ones has also greatly affected the role of elderly people's decision-making power within the family. With less or no involvement in the decision making of family-related matters, seniors felt neglected and deprived. The analysis indicates that even though nearly two-thirds of the elderly reported there is no change in their role as decisionmakers after they become 60 years old, around 26% felt that their role as a decisionmaker declined after they became aged. A higher proportion of elderly

people from Tamil Nadu (52%), West Bengal (44%) and Odisha (40%) reported decline in their decision-making capacity than those from other states (where the figure varied between 10 and 13%). As expected, a higher proportion of females from all states reported a decline in their decision-making capacity when they became aged.

Abuse and Neglect of Elderly People

The information about the abuse and neglect experienced by the elderly was collected from 9779 respondents (in 73 cases, the respondents were not able to respond to the questions due to health issues). The information on abuse and disrespect was collected from seniors ensuring privacy and non-presence of other family members to gather accurate information.

Conceptualization of Different Forms of Elder Abuse

Physical Abuse

This includes beating, kicking, slapping, stabbing, shooting, pushing, biting, pinching, strangling, and so on.

Verbal Abuse

This is a form of abusive behaviour involving the use of language. It is a form of vulgarity that can occur with or without the use of expletives. It can be either through oral communication, which is the most common form of verbal abuse, or abusive words in written form.

Economic Abuse

This involves the illegal or improper use of a senior's funds, property, or assets. Examples include, but are not limited to, cashing an elderly person's cheques without authorization or permission, forging an older person's signature in documents, and misusing or stealing an older person's money or possessions, coercing or deceiving an older person into signing any document (e.g., contracts or will), and so on.

Showing Disrespect

It is expected for people to show proper respect to elders, particularly in Indian culture. Any act or behaviour showing lack of respect to a senior will come under this category.

Neglect

The failure for a care-giver to meet the needs of a dependent elderly person (which may be intentional such as withholding of food, medications, failure to clean or bathe, and so on) comes under this category.

Nearly 10% of the elderly interviewed reported they had experienced abuse or disrespect. Considerable inter-state variations were observed among the elderly who reported abuse, ranging from with nearly 31% in Maharashtra and only 2% in Tamil Nadu (Fig. 10.3). Among the elderly who experienced abuse and disrespect, nearly 35% experienced multiple abuse. A higher proportion of elderly people from Odisha (60%) and Punjab (55.6%) reported multiple abuses.

When elderly people reported having experienced abuse or disrespect, further probing was done to understand the nature of that abuse or disrespect and where it had taken place (Fig. 10.4). Data were collected on incidents of physical abuse, verbal abuse, economic abuse, neglect and disrespect. Verbal abuse was the most cited form of abuse experienced by seniors (89.5%), followed by disrespect

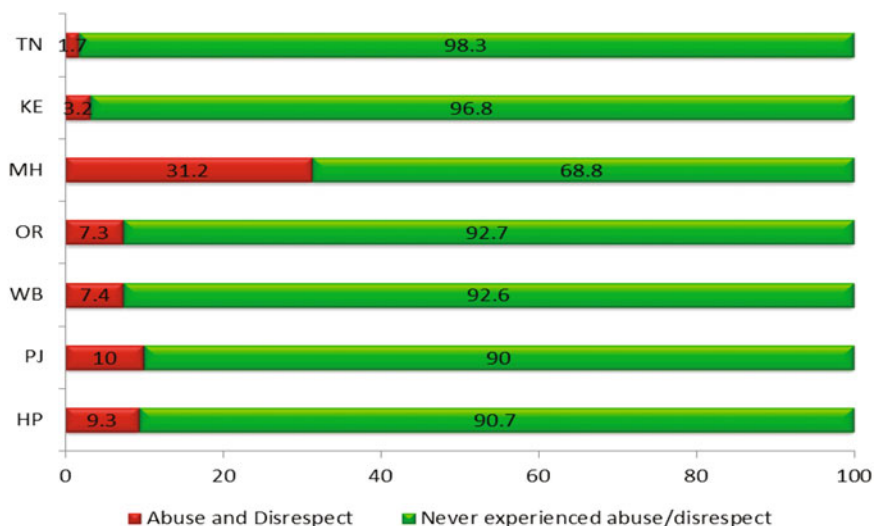


Fig. 10.3 Proportion of elderly people reporting abuse and neglect by states

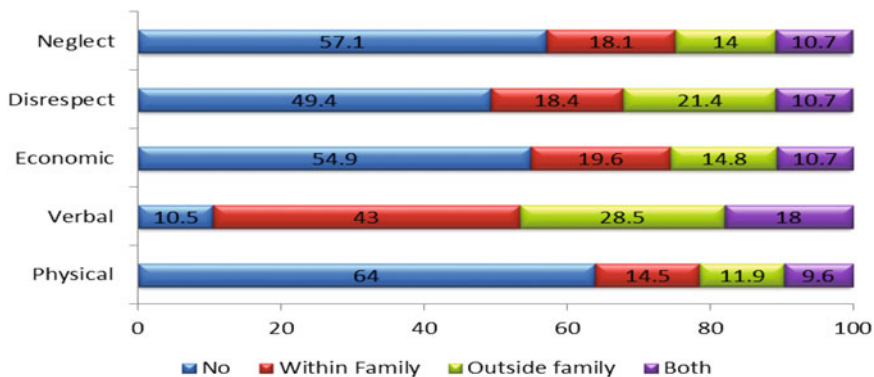


Fig. 10.4 Percentage of elderly people who reported abuse by type and place of abuse

(50.6%), economic abuse (45.1%), neglect (42.9%) and physical abuse (36%). It was also noted that the majority of them experienced the abuse and neglect within family rather than outside the family. Of those who reported that they had been abused or mistreated, nearly 50% said it had occurred during the month prior to the survey. Of those who reported abuse and disrespect during the one month prior to the survey, 87% reported that they had experienced verbal abuse, followed by disrespect (35%) and neglect and economic abuse (31%). Nearly 29% of the respondents reported that they were victims of physical abuse during the month prior to the survey. Some 22% of the seniors who had experienced abuse and neglect during the month prior to the survey reported incidences of multiple abuse.

Abuse and neglect of elderly people have consequences for victims’ physical and mental health and lives as a whole. Earlier studies have indicated that depression among elderly people who experienced abuse as much more severe than depression among those who had never experienced abuse. Among the respondents who had experienced abuse and disrespect during the month prior to the survey, nearly 22% reported that they were suffering from health problems.

Contributing Factors for Abuse and Neglect

An attempt was made to understand the contributing factors which led to abuse and neglect of elderly people within the family as well as outside homes (Table 10.3). With increase in age, the extent of abuse and neglect towards elderly people is also increasing. Around 9% of young old respondents (60–69 years) reported abuse and neglect, and the proportion increased to 14% among the oldest old (80 years and above). A slightly higher proportion of females (10.6%) reported abuse and disrespect than their male counterparts (9.5%). It was also noted that the lower proportion of elderly people who were currently married reported abuse and neglect than those who had lost their spouses. The living arrangement of elderly people also

Table 10.3 Percentage of elderly people reporting abuse and disrespect, by background characteristics

Background characteristics	Percentage (numbers)
Faced abuse/disrespect	10.1 (987)
<i>State</i>	
Himachal Pradesh	9.3 (136)
Punjab	10.0 (133)
West Bengal	7.4 (94)
Orissa	7.3 (108)
Maharashtra	31.2 (448)
Kerala	3.2 (43)
Tamil Nadu	1.7 (25)
<i>Sex</i>	
Male	9.5 (440)
Female	10.6 (547)
<i>Age group</i>	
Young old	9.4 (581)
Old old	10.1 (262)
Oldest old	14.4 (144)
<i>Marital status</i>	
Currently married	9.1 (529)
Widowed	11.3 (423)
Other	15.0 (35)
<i>Living arrangements</i>	
Alone	16.6 (101)
With spouse only	10.6 (155)
With children	9.5 (731)

showed a significant effect on the abuse and neglect, with those who were living alone reporting higher incidences of abuse and neglect.

The logistic regression analysis indicates that the elderly who are living alone and those who belong to rural areas were more likely to be victims of abuse and neglect during their advanced ages. The elderly having 8 or more years of schooling were 50% less likely to be abused compared to the non-literate seniors. Economic dependency of elderly people towards the care-givers and the number of living sons are the other significant factors contributing to the abuse and neglect of elderly people in the family and in the community (Table 10.4).

Perpetrators of Abuse

Earlier studies have indicated that children, especially sons and daughters-in-law, were the main perpetrators of abuse of seniors. Most of the time, there were multiple perpetrators involved in the abuse and neglect of elderly. This study also

Table 10.4 Results of logistic regression on abuse and disrespect of seniors

Characteristics	Category	Odds ratio (95% CI)	<i>p</i> value
Sex of the respondent	Males (ref)		
	Females	0.913 (0.711–1.172)	0.474
Age group of the respondent	60–69 years (ref)		
	70 years and above	0.901 (0.738–1.100)	0.306
Marital status	Married (ref)		
	Other	1.150 (0.903–1.465)	0.257
Current living arrangement	Living alone/with spouse only (ref)		
	Living with children	0.487* (0.394–0.600)	0.000
Place of residence	Rural (ref)		
	Urban	0.748** (0.616–0.910)	0.004
Number of years of schooling	Non-literate (ref)		
	1–4 years of schooling	1.061 (0.810–1.388)	0.669
	5–7 years of schooling	0.941 (0.714–1.241)	0.668
	8 and more years of schooling	0.483* (0.365–0.638)	0.000
Economic dependency on basic needs	Fully dependent (ref)		
	Partially dependent	0.613* (0.474–0.791)	0.000
	Not dependent	0.548* (0.417–0.720)	0.000
Number of living sons	No sons (ref)		
	One son	1.296 (0.932–1.803)	0.123
	More than one son	1.721** (1.258–2.355)	0.001
Current work status	Not working (ref)		
	Working	1.429** (1.151–1.774)	0.001

shows the same trend, with nearly 45% of seniors who experienced abuse and neglect during the month prior to the survey reporting that there were multiple perpetrators. The main perpetrators were neighbours (46%), sons (40.7) and relatives (32%). One in ten elderly people reported that they had faced abuse from grandchildren. The majority of them reported that they had faced abuse and disrespect within the household, especially verbal abuse and neglect.

Concluding Observations

Elder abuse and neglect are increasingly acknowledged as social problems internationally, and India is no exception. The responsibility for caring for the elderly in India is traditionally borne by the immediate family. The society's transition, with more and more people opting to go out of their local habitations to work and lead a nuclear family has led to more and more elderly people living alone. Inter-state and inter-country migrations are leading to both physiological and psychological vulnerability. Though a majority of elderly people interviewed have not experienced any form of abuse after they turned 60 years of age, one in ten reported facing abuse within the household or outside. The mistreatment of elderly people is multi-dimensional and multi-layered, emerging from the differences in gender, economic position, and physical condition (Berkman et al. 2012). Economic dependency and low education seem to be the important factors making the aged more susceptible to abuse. The elderly, who reside in urban areas, are less likely to be abused compared to those in rural areas. Those seniors living with children are less likely to be abused than those who are living alone or with a spouse. Higher levels of education and financial security during old age seem to be the factors that make the elderly less vulnerable to abuse. This study indicates that the main perpetrators of abuse were from outside the family for elderly men and within the family for elderly women. Maintaining the traditional family values of love, caring, and respect for seniors in recognition of their contribution and experience would be the most important areas upon to be focused in future, which could bring in the much needed cohesion in the family, making older people feel more valued and less susceptible to abuse and violence. Though the government has come out with the Maintenance and Welfare Parents and Senior Citizens Act in 2007, very few elderly people are aware of it and the Act is not yet fully operational in most states. Awareness campaigns are needed to educate older persons about their rights and entitlements.

The elderly are in need of a wide range of supportive, preventive and protective services. It is the primary responsibility of the family and children to provide love, support and care to its older members. However, in many instances, seniors are vulnerable to mistreatment by their family members and care-takers. To some extent, the evidence emerging out of this study has questioned the general perception in India that the families are the safest place for the aged to live. A combination of governmental, non-governmental and community efforts are required to ensure that seniors spend their remaining years in a peaceful and dignified manner.

Annex: Case Studies

Case Study 1

Mr. Y is an 83-year-old widower, living with his youngest son and family. He belongs to an aristocratic Christian family. He has 10 children—seven sons and

three daughters—and all of them are well settled in different parts of India and abroad. His wife passed away a few years back. He had around 50 acres of land and divided this between all his children and has kept only four acres of land and house in his own name. The youngest son is living with him and takes care of him properly. He used to enquire daily about his food requirements and instruct his wife to give milk to Daddy. The other sons were not so happy with Mr. Y because he had given a major share of the land to the youngest son. He justified his action by saying ‘I have given 15 acres of land to him with the expectation that he will take care of me’. Mr. Y is an asthma patient and suffers from diabetes and high blood pressure. Whenever he asked his son to take him to a hospital, he used to oblige. Recently, his son told him to write a will stating that, after his death, the property (4 acres of land and house) would be for him along. Mr. Y called the Registrar to his home and signed the required documents.

Though he is fond of his youngest son, sometimes he feels that he is not getting enough care and attention at home. ‘Whenever I ask for any specific need, he is very reluctant to help. Maybe he is too busy with so much of work’. But Mr. Y narrated some incidents when he had felt very upset. ‘One day, when my daughter-in-law asked me to have lunch, I was not feeling hungry, so I told her I will come after one hour’. After one hour, when I asked for lunch, she replied like this: ‘I am not running a restaurant here to supply food at any time’. When I told my son about this, he supported his wife by saying, ‘She has a lot of work, so you try to take food on time. Even if you do not take food for one day, nothing will happen to you’. When Mr. Y wanted his son to take him to a hospital, the reaction was, ‘Today I don’t have time. During our last visit, the doctor told me that you don’t have any health problem. It is only a psychological problem’. When my elder son came to see me after many years, I informed all these things. He just replied, ‘It is your mistake. Who told you to execute such a will and hide everything from all of us? Now we can’t do anything’. Last month, he was admitted to hospital due to high blood pressure and asthma. His youngest son told his brothers, “‘I cannot stay in hospital with him. So any one of you please stays with him or arranges some servant to take care of him at home’”. But my other sons are also not interested in taking care of him’. His second daughter told him that he can stay with her family. ‘It is a shame to go and stay with daughter after having seven sons.’ The old man concluded, ‘It was my mistake that I gave more love and property to my youngest son. Now I have to suffer silently and nobody else will take care of me’. He now realizes that his judgement was wrong and he blames himself for the situation. At least, he expected a sympathetic attitude and kind words from children. Mr. Y is not fortunate enough to have that in the last years of his life.

Case Study 2

Mrs. A is a widow from a very poor family, living with her son and daughter-in-law. She has one son and one daughter. She worked as a part-time

servant in a house and has stopped working for the last five years due to her health problems. Her son is a heart patient. He is not able to do any work. Her daughter-in-law is working as an agricultural labourer and her earning is the only source of income for the family. While describing the behaviour of her daughter-in-law, she said ‘My daughter-in-law is not talking with me for many years, even though we are living in the same house. She never called me “Amma” (mother) during last seven years and she uses some offensive slang word instead of “Amma” while mentioning about me to others. She leaves the food in my room and never tells me whether the food is ready or not. Even if I am sleeping she leaves the food in the room and goes away’. Since she is the only breadwinner of the house, my son never questions her on anything. Moreover, he is in a depressed condition due to his illness and economic problems. She is also tense about the attitude of her own daughter who is married to a family in the same village. In her words, ‘If my own daughter is not interested to see the old mother, what can we expect from daughter-in-law?’ Mrs. A spent all her little earnings on her daughter’s marriage. Nowadays, the daughter has stopped coming to meet her and will not help in any way even though she is in a better-off condition. After much probing, the old widow explained how she was treated and neglected in her family. ‘One day I fell down in the courtyard and fractured my leg. Somehow, I managed to come up to the house before fainting. When I got up, I saw no-one in the house. So I screamed and one of my neighbours informed my daughter about my injury. When she was informed about my fracture, her response was, ‘I have enough responsibilities in my home and I don’t have time to take care of her. Moreover, it is not my duty. It is the duty of my brother as he got the house from mother’. My neighbours took me to the hospital and provided me with food for one month. My son and daughter-in-law came to see me after a month. My daughter-in-law removed the cot and mattress from my room. Now two wooden planks are kept on the bricks as a bed. ‘Nowadays, my daughter-in-law does not give me enough food to eat. If I protest, she will shout at me.’ Mrs. A is totally depressed and worried: ‘I don’t have any economic assets; I spent all my earnings for on daughter’s marriage and gave the land and house to my son. So I have to depend on them for my daily requirements. I am afraid to commit suicide. I do not have courage. I am praying to God to take me away from this world at the earliest. Why should I suffer and live like a beggar?’

It was very difficult to interview Mrs. A on the first visit as her daughter-in-law was observing everything. During the next visit, fortunately her daughter-in-law was away and I could talk to the old lady in a relaxed manner. Though her son was at home, he never asked anything. When I was saying goodbye after a long chat, the old lady told me, ‘I hope you will take care of your mother. Please do not behave like my daughter-in-law’. She also reminded me, ‘What I discussed with you is between you and me. Never mention this to my daughter-in-law. If she happens to know, she will throw me out and next time you will see me lying on the street’.

Note: The above two case studies were part of a study on elder abuse conducted in rural Kerala (Sebastian 2013).

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