Forms and predictors of older adults' maltreatment in Nnewi, South-East, Nigeria: Implications for social work practice

¹Samuel O. Ebimgbo, ^{2*}Chinyere E. Onalu, ³Chiemezie S. Atama, & ⁴Uzoma O. Okoye

Abstract

Maltreatment of older adults is one of the social and public health issues arising from some factors such as changes in the traditional values attached to old age, ageing stereotype and dependency of older adults on family members or care-givers for performing some of the activities of daily livings (ADLs). Hence, this study examined various forms and predictors of maltreatment experienced by older adults in Southeast, Nigeria. Quantitative data were collected from 516 respondents aged 60 years or older. Findings reveal that older adults chiefly experienced financial, material, emotional maltreatment and neglect; meanwhile factors such as living arrangement, social support, income, and marital status were statistically significant in predicting older adults' maltreatment. Also, sex, marital status, living arrangement, health status determines the form of maltreatment experienced by older adults. Therefore, social work professionals should influence policy that protects the rights of older adults in Nigeria.

Keywords: Maltreatment, older adults, policy, population, ageing, predictors, social work

Introduction

Population ageing currently affects both developed and developing countries across the globe (Bélanger, Ahmed, Vafaei, Curcio, Philips & Zunzunegui, 2016; United Nations, 2015). The report of United Nations, Department of Economic and Social Affairs, Population Division (2017) reveals that the world population of persons in the age range of 60 years and above in 2017 was 962 million; meanwhile this number is estimated to increase to 2.1 billion by 2050. In Nigeria therefore, the report of United Nations (2012) shows that the population of Nigerians who are 60 years or older were 8.8 million in 2012 and by 2050 this figure will projected to be 28 million. To a great extent, this ageing population has far-reaching implications for every segment of the population in the society (United Nations Population Fund and Help Age International, 2012). One important implication is dependence of some older adults on the family members and significant others such as neighbours, religious groups and community members for financial, material, health support as well as assistance in performing some activities of daily living. This is because the process of ageing is usually a risk factor in reducing physical and mental capacity required for performing activities of daily living (Friedman, Avila, Tanouye & Joseph, 2011). Thus, Rodrigues et al. (2017) averred that along with prejudice, disrespect and social inequality, occurrence of maltreatment against older adults is inevitable.

Older adults' maltreatment is becoming common and a very important public health issue as a result of challenges associated with ageing population (Bigala & Ayiga, 2014). Ageing is usually perceived as a scourge with severe negative outcomes on physical and mental health (Rodrigues et al., 2017). The assertion of Wu et al. (2013) reveals that maltreatment of older adults to a great extent is one of the risk factors for suicidal ideation, physical injury and pain, psychological impairments including depression, anxiety and post-traumatic stress, and death. Covinsky (2013) believes that maltreatment of older adults is the leading cause of their hospitalization. Older adults could easily experience trauma, reduced self-worth and dignity, lost sense of safety, capacity, independence and security, and greater risk of early death as a result of maltreatment (Joseph et al., 2015; Correia, Leal, Marques, Salgado & Melo, 2012).

From the foregoing, it is evident that maltreatment has the capacity to affect older adults in negative ways especially in their daily lives (Castle, Ferguson-Rome & Teresi, 2013). For this reason, the intervention of social workers is very crucial. The promotion of social change and development, social cohesion, the empowerment and liberation of people, the principles of social justice, human rights, collective responsibility, and respect for diversities are central to social work. They equally engage people and structures to address life challenges and enhance wellbeing (International Association of School of Social Work [IASSW] & International Federation of Social Work [IFSW], 2014). Studies have shown that lack of knowledge of what constitute older adults' maltreatment and how to care for older adults are chiefly risk factors for maltreatment. Thus, if people are educated and equipped with the right knowledge and skills, older adults' maltreatment will be reduced. Social workers usually take up public enlightenment in order to expose the dangers of maltreatment and get people to appreciate the elderly and the need to treat them as individuals.

In literature, there seems to be variations regarding the most common forms of maltreatment of older adults; although, older adults could experience more than one form of maltreatment simultaneously (Ekot, 2016). The study by Iborra (2009) reveals that emotional or psychological maltreatment is the most common maltreatment against older adults. On the contrary, other scholars like Hafemeister (2003); Repp and Hughess (2005) indicates that financial maltreatment is the most common form of maltreatment against older adults while (Dong, Simon and Gorbien (2007); O'keeffe, Hills, Doyle et al. (2007) reveals that neglect is the most common form of maltreatment experienced by older adults. In the views of (Acierno, Hernandez-Tejada, Wendy–Muzzy & Kenneth–Steve (2009); Mowlam, Tennant, Dixon and McCreadie (2007) the least common form of maltreatment experienced by older adults is sexual maltreatment.

Several factors such as gender, age, level of income, marital status, health status, and living arrangement, among others have been found to be associated with experience of maltreatment against older adults (Ananias & Strydom, 2014; Ekot, 2016). For instance, women are the most common victims of maltreatment (Acierno et al., 2009;

Biggs, Manthorpe, Tinker, Doyle & Erens, 2009). This may not be unconnected with the assumption that women tend to live longer than men; hence are more likely to be maltreatment by their family members as a result of the death of their spouses (Brozowski & Hall, 2004). On the other hand, Iborra (2009) averred that there exists a significant relationship between age of older adults and the maltreatment they experience. For instance, older adults who are within the age range of 65 years and above are most likely to be maltreated either psychologically or financially (Cohen, Levin, Gagin & Friedman, 2007). Also, widows/widowers suffer maltreatment more than older adults whom their spouses are still alive (Biggs et al., 2009; Madhurima, 2008). In the same vein, lower income is associated with maltreatment (Acierno et al., 2009; Dong et al., 2007). Regarding living arrangement, Peri, Fanslow, Hand and Parsons (2008) averred that a shared living situation is a major risk factor for elder mistreatment, with older adults living alone at the lowest risk.

Modernization theory developed by Cowgill and Holmes (1972) was adopted as the study's theoretical framework. The basic tenet of modernization theory states that when a society is modernized, it is transformed from a relatively rural or agrarian way of life based on practical and traditional outlook towards a predominantly urban way of life based on cosmopolitan outlook. Applying this theory in ageing process indicates that as societies evolve from rural to urbanize system, it causes changes in the position and esteem accorded older adults in the society as individuals and as members of a social category. This implies that the more a society is modernized the less the status of the older adults will be (Okoye, 2005). For instance, Cogwill (1979) asserts that modernization occasions numerous changes in every sector of the society such as health, technology, economy, living arrangement, value systems and education. For instance, improvement in health care facilitates the increase in life expectancy of aged persons, thereby culminates into ageing population. The ageing population culminates into intergenerational jobs conflicts and eventually results in establishment of retirement. With retirement, the prestige, and incomes of older adults are reduced; hence, maltreatment of older adults is inevitable consequent upon dependence on the family member and significant others for monetary assistance. In the same vein, the emergence of new occupation opportunities for the adult children of older adults increases the children's financial status but occupies the time and devotion their elderly parents require from them thereby providing opportunity for neglect of the older adults. Modern education on the other hand, exposes the adult children and separates them from the attachment of their parents. It also has eroded the gerontological procedures by which the society was previously governed; hence new process is put in place which lays emphasis on one's literacy level. This certainly affects the status, relevance and prestige of older adults. Cowgill and Holmes (1972) believe that modernization has increased the life expectancy of aged parents but is gradually eroding away the traditional values attached to old age.

Several studies abound on maltreatment of older adults in Nigeria (Akpan & Umobong, Ekot, 2016; Mudiare, 2013; Osunderu & Abimbola, 2018). However, we recorded limited studies in the analysis of forms of maltreatment of older adults and its implications for social work practice especially in the study area. This gap would be filled by addressing the following research questions: (1) What are the forms of

maltreatment meted against older adults? (2) What are the predictors of maltreatment against older adults? (3) What is the implication of the findings to social workers?

Methods

Cross-sectional survey design was adopted in this study in order to enable researchers examine the phenomenon by taking a cross section of it at one point in time (Rubin & Babbie, 2008). The study was conducted in Nnewi, South-Eastern Nigeria. Nnewi is made up of four areas: Otolo, Uruagu, Umudim, and Nnewichi; meanwhile each of these areas consists of several communities. The area has an estimated population of 9,186 older adults who are 60 years and older consisting of 4,805 males and 4,381 females (National Population Commission [NPC], 2010). The study area was selected because it is a hub for diverse socio-economic activities; hence individuals from different cultural backgrounds live in the town for various socio-economic activities. This gave the researchers the opportunity to elicit information from different older adults who are both indigenes and non-indigenes but are resident in Nnewi.

The sample size of 516 was adopted for this study. The researchers adopted probability and non-probability procedure to select the respondents for the study. Simple random sampling (balloting), purposive sampling and accidental sampling served as sampling techniques. All the four areas in Nnewi were purposively selected for fair representation. However, out of a total of 43 communities in Nnewi, six communities were selected from each of the areas through balloting; this gave the researchers a total of 24 communities. The researchers adopted accidental sampling technique to select 22 respondents who were 60 years or older from each of the three areas [Otolo, Uruagu and Umudim] because these communities are densely populated than Nnewichi where only 20 respondents were selected. Care was taken to ensure gender balance in selecting the respondents from the areas.

The major instrument for data collection was questionnaire. The questionnaire was divided into two parts; the first part covered the demographic characteristics of the respondents such as sex, age, marital status and educational status among others while the second part of the questionnaire focused on the specific objectives of the research. The respondents gave their consent before answering the questions and assurances of confidentiality were given to them. The data from the questionnaire were coded, computer processed and analyzed using Statistical Package for the Social Sciences (SPSS). Descriptive statistics such as percentages and frequency tables were used in presenting the results while Chi-square test was used to determine the influence of the key independent variables on the dependent variables.

Results

Demographic characteristics

The analysis shows that there was almost equal number of male 50.2% and female 49.8% respondents. The age of the respondents ranged from 60-112 years (M = 71, SD = 10.003). The analysis of data equally shows that majority of the respondents 63.8% were married. Also, 95.5% being the majority had children while 50.7% had more than six children. The finding also indicates that greater percentages of the respondents 36.8% were traders; also, greater percentage of the respondents had no formal

education while 54.3% of the respondents being the majority received stipend every month.

Forms of maltreatment experienced by older adults

Table 1: Forms of maltreatment experienced by older adults (N=331)

Forms of maltreatment		Total (%)			
	Had experienced maltreatment		Had not expe maltreatment		
	Frequency	(%)	Frequency	(%)	
Physical	127	38.4	204	61.6	331 (100)
Financial	283	85.5	48	14.5	331(100)
Material	209	63.1	122	36.9	331(100)
Sexual	72	21.8	259	78.2	331(100)
Psychological/emotional	201	60.7	130	39.3	331(100)
Neglect	180	54.4	151	45.6	331(100)

Source: Field survey 2016

The analysis of data indicated that majority of the respondents 64.1% stated that they had experienced maltreatment. Meanwhile, data in Table 1 show that out of the respondents that reported that they had experienced maltreatment, 38.4% said they had been maltreated physically while majority (85.5%) indicated that they had been maltreatment financially. Also, majority of the respondents (63.1%) said that they had experienced material maltreatment while 21.8% indicated that they had experienced sexual maltreatment and 78.2% been the majority indicated that they had not experienced such. Meanwhile, 60.7% had been maltreated psychologically while 54.4% had been neglected as at the time of this study.

Predictors of older adults' maltreatment

Bivariate analysis result shows statistically significant relationship between selected demographic variables and older adults' maltreatment. The demographic factors such as sex, marital status, level of education and income, number of children, living arrangement and health status are the independent variables while experience of maltreatment is the dependent variable. In determining the levels of significant relationship, some of the data were re-coded for quick comprehension of the variables. For instance, level of income was re-coded as high-income for older adults who earn N30,000 and above per month while older adults who earn between N1,000-N29,000 were re-coded as low-income earners. For educational status, no formal education, FSLC, SSCE/WASC and Diploma/NCE were re-coded as lower education while, HND/First degree and any other higher degree were re-coded as higher education. For marital status, single, widowed, separated, and divorced were re-coded as not married.

Table 2: Determinants of maltreatment in older adults

Variables	Experience of	of maltreatment	Total	χ²		
	Had	Never				
	experienced	experienced				
	maltreatment	maltreatment				
Sex						
Male	155 (46.8%)	104 (56.2%)	259 (50.2%)	$\chi^2=4.184;df=1;$		
Female	176 (53.2%)	81 (43.8%)	257 (49.8%)	p<.041*;=3.841		
Total	331 (100.0%)	185 (100.0%)	516 (100.0%)	_		
Marital status						
Married	177 (53.5%)	130 (70.3%)	307 (59.5%)	χ^2 =5.912; df=1;		
Not married	154 (46.5%)	55 (29.7%)	209 (40.5%)	p<.015*;=3.481		
Total	331 (100.0%)	185 (100.0%)	516 (100.0%)	• /		
Level of education						
Lower education	253 (76.4%)	134 (72.4%)	387 (59.5%)	$\chi^2=1.014$; df=1;		
Higher education	78 (23.6%)	51 (27.6%)	129 (40.5%)	p<.314;=3.481		
Total	331 (100.0%)	185 (100.0%)	516 (100.0%)	• ,		
Level of income						
Higher income	163 (49.2%)	117 (63.2%)	289 (54.3%)	$\chi^2=9.370$; df=1;		
Lower income	168 (50.8%)	68 (36.8%)	236 (45.7%)	p<.002*;=3.481		
Total	331 (100.0%)	185 (100.0%)	516 (100.0%)	•		
Number of children						
One to five children	106 (32.0%)	54 (29.2%)	160 (31.0%)	$\chi^2=2.340$; df=1;		
> Five children	225 (68.0%)	131(70.8%)	356 (69.0%)	p<.126;=3.481		
Total	331 (100.0%)	185 (100.0%)	516 (100.0%)	• /		
Living arrangement						
Living alone	151 (45.6%)	39 (21.1%)	190 (36.8%)	$\chi^2=30.716$;df=1;		
Not living alone	180 (54.4%)	146(78.9%)	326 (63.2%)	p<.000*;3.481		
Total	331 (100.0%)	185 (100.0%)	516 (100.0%)	- /		
Health status		,				
Healthy	203 (61.3%)	132 (71.4%)	335 (64.9%)	$\chi^2=5.234$; df=1;		
Unhealthy	128 (38.7%)	53(28.6%)	181 (35.1%)	p<.022*;3.481		
Total	331 (100.0%)	185 (100.0%)	516 (100.0%)	= '		

Source: Field survey, 2016

A cross tabulation of variables indicates that educational status (p<.314) and number of children (p<.126) had no significant relationship with maltreatment of older adults. However, the analysis revealed that respondents who reported that they had not been maltreated, 56.2% were male while 43.8% were female. The chi square test result shows that computed $\chi 2$ is 4.184 while the critical $\chi 2$ value is 3.841 and df=1. The test shows there was slight statistically significant relationship (P<.041) between sex and experience of maltreatment. Also, significant relationship was seen between sex (P<.041), marital status (P<.015), income (P<.002), living arrangement (P<.000), health status (P<.022) and experience of maltreatment.

Furthermore, the analysis of data in table 3 reveals that among the forms of maltreatment experienced by older adults, women experienced physical maltreatment (67.7%) and neglect (52.3%) respectively more than men did. The test shows there was statistically significant relationships (P<.032 and P<.010) between sex and the forms of maltreatment.

The analysis of data equally indicates that respondents who stated that they had not experienced any form of maltreatment, 70.3% were married while 29.7% were not

married. This finding may not be misleading because marriage to a great extent provides the spouses some form of security at the last phase of life. The chi square test result shows that computed $\chi 2$ is 5.912 while the critical $\chi 2$ value is 3.841 and df=1. The test shows there was statistically significant relationship (P<.015) between marital status and experience of maltreatment. However, the information on table 3 indicates that among the forms of maltreatment experienced by older adults, married older adults experienced psychological maltreatment (57.9%), financial maltreatment (61.9%), material maltreatment (46.3%) and neglect (54.5%) more than unmarried older adults. Although, the test shows there was no statistically significant relationships between marital status and the form of maltreatment against older adults.

The result of the study equally reveals that the respondents who said that they had not been maltreated, 63.2% revealed that they were of high-income status while 36.8% stated that they were of low-income status. This result may not be surprising because individuals' level of income especially when it is on higher level will always ensure the independence and protection of the older adults from potential perpetrators of maltreatment. Meanwhile, the chi square computed result of $\chi 2$ is 9.370 while the critical $\chi 2$ value is 3.841 and df=1 shows there was statistically significant relationship (P <.002) between level of income and experience of maltreatment.

Furthermore, the finding of the study shows that out of the respondents who indicated that they had not experienced any form of maltreatment, 78.9% were not living alone while 21.1% were living alone. The finding is expected because older adults who are living alone will always depend on non-relatives for activities of daily living thereby standing the chance of being maltreated. The chi square test computed result $\chi 2$ is 3of 0.716 while the critical $\chi 2$ value is 3.841 and df=1 shows there was statistically significant relationship (P <.000) between living of arrangement and experience of maltreatment. The analysis on table 3 equally reveals that among the forms of maltreatment experienced by older adults, those who lived alone experienced physical maltreatment (70.0%); sexual maltreatment (82.2%) and neglect (57.0%) more than older adults who were not living alone. The test shows there was statistically significant relationships (P<.001; P<.056 and P<.000) between living arrangement and the physical, sexual forms of maltreatment and neglect against older adults respectively.

Finally, the analysis of data shows that out of the respondents who revealed that they had not experienced any form of maltreatment, 71.4% were in perfect health condition while 28.6% were not healthy as at the time of this study. The chi square test computed result of $\chi 2$ is 5.234 while the critical $\chi 2$ value is 3.841 and df=1 shows there was statistically significant relationship (P<.022) between state of health of older adults and experience of maltreatment. Meanwhile, the data on table 3 shows that among the forms of maltreatment experienced by older adults, unhealthy older adults experienced psychological maltreatment (66.1%) and neglect (57.6%) respectively more than older adults who were healthy. The test shows there was statistically significant relationships (P<.030 and P<.014) between health condition and psychological maltreatment and neglect against older adults.

Table 3: *Analysis of form of maltreatment of older adults*

	Forms of Maltreatment											
	Physical (%)	χ2	Financial (%)	χ2	Material (%)	χ2	Sexual (%)	χ2	Emotional (%)	χ2	Neglect (%)	χ2
Sex	,		,		,		` /		,		` /	
Male	56.2%	.032*	59.4	.872	46.5	.697	75.0	.127	53.5	.938	38.1	.010*
Female	67.7		46.5		44.3		81.9		54.0		52.3	
Marital												
Married	59.9	.309	61.9	.342	46.3	.774	76.1	.439	57.9	.070	54.5	.977
Unmarried	64.9		56.7		44.7		79.7		47.8		54.3	
Income												
Higher	60.0	.153	58.9	.439	55.0	.786	82.4	.440	55.4	.177	53.9	.699
Lower	70.6		64.7		52.9		77.5		45.1		56.9	
Living												
condition												
Alone	70.0	.001*	64.9	.084	56.1	.569	82.2	.056*	57.0	.288	57.0	*000
Not alone	51.7		55.6		53.0		73.5		51.1		36.1	
Health status												
Healthy	61.3	.819	59.5	.793	50.0	.411	77.7	.612	50.9	.030*	40.3	.014*
Unhealthy	62.9		61.3		55.0		80.6		66.1		57.6	

Source: Field survey, 2016

Discussion

The aim of this study was to examine the forms and possible predictors of older adults' maltreatment in Nnewi, South-eastern Nigeria. The finding reveals that majority of the respondents had experienced financial, material, and psychological maltreatment; and had suffered neglect from their care-givers. However, physical maltreatment and sexual maltreatment were the least maltreatment experienced by the respondents. In agreement with the findings of other studies, Ekot (2016) found in Akwa Ibom State different forms of maltreatment against older adults with emotional maltreatment being closely followed by financial/material maltreatment, neglect/abandonment; while physical and sexual maltreatment were uncommon. The studies of Ferreira and Lindgren (2008) and Phakathi (2011) also reveals that the main forms of older adult's maltreatment in Sub-Sahara Africa are emotional, financial and material maltreatment. Cohen et al. (2007) discovers that older adults most often report psychological and financial maltreatment while physical form of maltreatment is rare and seldom reported among them. Also, Acierno et al. (2009); Mowlam et al. (2007)) reveals that sexual maltreatment is the least form of maltreatment against older adults. Very important finding of this study is that majority of the older adults had experienced one form of maltreatment which in most cases was occasioned by their pattern of living arrangement. The study reveals that older adults who live alone suffer more maltreatment than older adults who live with other people. Supporting this finding is modernization theory developed by Cowgill and Holmes (1972). Modernization theory reveals that the process that causes society to evolve from rural-agrarian society to urban and industrial society is associated with numerous changes in the society. In most cases, the changes bring rapid decline in traditional values and beliefs (Arumala, 2005). The decline in traditional values and beliefs reduce the social status and the influence of older adults in the community (Gureje & Oyewole, 2006); thereby influencing the occurrence of maltreatment of older adults. Also, modernization has brought about changes in the pattern of Nigerian family structures with increase in nuclear-family setup, urbanization, migration as well as the quest for educational pursuit etc. Hence, the living arrangements of older adults have been altered as older adults are now left isolated especially in their rural confinement and in most cases, this arrangement has occasioned their maltreatment.

From the finding of this study, socio-economic status of older adults has no statistically significant relationship with any form of maltreatment against older adults. This implies that financial adequacy or inadequacy of older adults does not determine the type of maltreatment to be experienced. This result however contradicts the findings of some scholars in their previous studies. For instance, Acierno et al. (2009) found that lower income was predictive of physical and sexual mistreatment and neglect. Ekot (2016) also reveals that older adults' income status had significant relationship emotional/psychological maltreatment, physical maltreatment. maltreatment, financial/material maltreatment and neglect. This means that in the study, lower income predicts other forms of abuse - emotional/ psychological abuse, physical abuse, sexual abuse, and neglect and abandonment, but not predictive of financial/material abuse. In Ribeirao Preto Brazil, Rodrigues et al. (2017) found that the second most frequent type of abuse was physical, and in other two cities of the Northeast region, it was financial; this condition was as a result of poor financial status of the older adults.

The finding of this study also reveals that there was statistically significant relationship between sex of the respondents and the type of maltreatment they experienced. The study found that female older adults were mostly victims of neglect. Other studies have equally revealed that there is substantial evidence that older women are more vulnerable to neglect (Lowenstein et al., 2009; Peri et al., 2009; Rahman & Gaafary, 2012). In Namibia, the needs assessment study by Ananias and Strydom (2012) revealed that older men rather than older women often tend to be victims of neglect. On the contrary, Ruelas-Gonzalez et al. (2016) found in Mexico that the predominant maltreatment against older adults especially women is psychological or verbal abuse. The result of the study also shows that health status of older adult is associated with the type of maltreatment against them. The finding reveals that older adults who were not healthy were maltreated psychologically and neglected as the test value shows statistically significant relationship. This finding agrees with the finding of Wu et al. (2012) that physical disability and chronic diseases were associated with psychological mistreatment. Also, Acierno et al. (2010) found that functional impairment is usually a risk factor for emotional and financial mistreatment of older adults. Caring for older parents with physical disabilities and chronic diseases requires substantial support and often personal sacrifice on the part of the caregivers and other family members (Garre-Olmo et al., 2009). This can put undue stress on the caregiver's physical, psychological, and economic status. It is possible that caregivers with excessive stress often fail to provide the necessary daily care to their older parents.

The study finding equally shows statistically significant relationship between living arrangement and the type of maltreatment against older adult. This implies that older adults who live alone suffer physical maltreatment, sexual maltreatment and neglect. In disagreement with other studies, Yan and Kwok (2011) found that older adults and caregivers who live in the same house have little privacy, and so older adults are vulnerable to physical abuse. Also, Wang, Lin and Lee (2006) found that conflict and tension are unavoidable between older people and caregivers who share the same household, which can thus lead to more frequent psychologically abusive behaviours. From the findings, it was revealed that majority of older adults had experienced one form of maltreatment. This finding is in line with the finding of Wu, et al. (2012) that older adults in China had experienced at least one type of mistreatment (physical mistreatment, emotional mistreatment, caregiver neglect, or financial mistreatment) in the past year. In Akwa Ibom State, Ekot (2012) revealed that older adults usually experienced maltreatment. Oluoha et al. (2017) also found that in Imo State many older adults had been abused, meanwhile the proportion of older adults who had been maltreated were significantly higher in rural than in urban areas. These situations call for the intervention of social work professionals. Social workers work directly with older adults, their families and their community to deal with the factors that create their plight or exacerbate their well-being. Social workers are also in a better position to speak for the voiceless populace especially the older adults in their families, institutions or communities. They can do this through advocacy, negotiation, mediation and also brokering. They influence the systems that threaten or impinge upon the older adults' survival, freedom, equal opportunity and dignity. For instance, they are to speak against all forms of maltreatment (neglect, emotional, financial, material etc.) against older adults either in their immediate environments or in the communities.

Furthermore, ageing is all about transition to the next phase of life; thus, adjusting to these and other changes is a major challenge because older people can no longer cope on their own and they have to rely on other people for care and support. Having to rely on caregivers for support in performing activities of daily living introduces a new dimension to the social problems of older adults. The dependency on caregivers in most cases culminates into maltreatment thereby leaving the basic needs of older adults unattended to (Akpan & Umobong, 2013). Therefore, social workers can link older adults or their family members to resource systems that can provide them with the needed resources to deter them from full dependency on their family members. From the foregoing, it can be seen that social work is highly relevant in ameliorating maltreatment against older adults in Nigeria.

Conclusion

This study analysed various forms and predictors of maltreatment experienced by older adults in south-east Nigeria as well as their implications for social workers. Maltreatment of older adults is becoming a public health issue consequent upon population ageing; and thus, a leading cause of suicidal ideation, physical injury and pain, psychological impairments including depression, anxiety and post-traumatic stress, and death. The finding of this study revealed that older adults in Nnewi have suffered various forms of maltreatment such as physical, financial, material, sexual, emotional maltreatment and neglect. Meanwhile, financial maltreatment (85.5%), material maltreatment (63.1%), emotional maltreatment (60.7%) and neglect (54.4%) were the leading forms of maltreatment against older adults. On the other hand, sexual maltreatment was found to be the least form of maltreatment against older adults.

The finding of the study also shows statistically significant relationship between gender and experience of maltreatment as women suffered maltreatment more than men. Also, there was significant relationship between marital status of older adults and experience of maltreatment. The study found that older adults who were married experienced less maltreatment than unmarried older adults. Other variables that show statistically significant relationship with the experience of maltreatment include living arrangement, health status, and level of income. Meanwhile, the study reveals that women experienced physical maltreatment and neglect more than men. Also, married older adults experienced psychological maltreatment more than unmarried older adults while older adults who lived alone experienced physical maltreatment, financial, sexual maltreatment and neglect more than older adults who were not living alone.

This study therefore recommends government policies that will address the protection of human rights and dignity of older adults in the society. This policy will help guard against all forms of maltreatment and neglect against older adults. There is need for policy makers especially in the educational sector to review and modify the educational system in order to include the study of older adults in the school curriculum at all levels. By this, the sector will ensure that the study of older adults will cut across every educational level (primary, secondary, tertiary) so as to help educate the young ones, family members and care givers on the process of ageing and also to acquire basic knowledge that entails care and support of older adults. The school curriculum should also include educational design on older adults' maltreatment for children and youths.

This will help them to acknowledge and foster much respect for older adults and prevent them, now and in the future, from maltreating older adults.

Finally, as with all research, the study recorded some limitations. Administering the questionnaires to the respondents was a difficult one since all the respondents were older adults and greater number of them had no formal education. A good number of the respondents would want the questions to be read and explained to them before they respond and this affected the time frame for the exercise. Also, some respondents gave the questionnaires to others like their children to fill for them for one reason or the other. This, no doubt affected the level of objectivity of the answers given to the questions.

References

- Acierno, R., Hernandez, M.A., Amstadter, A.B., Resnick, H.S., Steve, K., Muzzy, W., & Kilpatrick, D.G. (2010). Prevalence and correlates of emotional, physical, sexual and financial abuse and potential neglect in the United States: The national elder mistreatment study'. *American Journal of Public Health*, 100(2), 292–297.
- Acierno, R., Hernandez-Tejada, M.S., Wendy Muzzy, B.S., & Kenneth Steve, M. S. (2009). *National Elder Mistreatment Study*. Report submitted to the US Department of Justice, New York. Retrieved from https://www.ncjrs.gov/pdffiles1/nij/grants/226456.pdf.
- Akpan, I.D., & Umobong, M.E. (2013). An assessment of the prevalence of elder abuse and neglect in Akwa Ibom State, Nigeria. *Developing Country Studies*, *3*(5), 8-14. Retrieved from http://www.iiste.org.
- Ananias, J., & Strydom, H. (2014). Factors contributing to elder abuse and neglect in the informal caregiving setting. *Social Work*, 50(2), 268-284. Retrieved from https://www.researchgate.net/publication/280158207 Factors contributing to elder abuse and neglect in the informal caregiving setting.
- Ananias, J.A., & Strydom, H. (2012). Informal caregiving, elder abuse and neglect in urban and rural areas of the Khomas region in Namibia: A needs assessment. (Unpublished).
- Arumala, A.O. (2005). Value re-orientation, a need among adolescent secondary school students in Ughelli North Local Government Area of Delta State. *The Counsellor, Journal of the Counselling Association of Nigeria*, 21(2), 1-11.
- Bélanger, E., Ahmed, T., Vafaei, A., Curcio, C.L., Philips, S.P., & Zunzunegui, M. V. (2016). Sources of social support associated with health and quality of life: A cross-sectional study among Canadian and Latin American older adults. *BMJ Open*, 6, 1-10. Retrieved from http://bmjopen.bmj.com/content/bmjopen/6/6/e011503.full.pdf.
- Bigala, P., & Ayiga, N. (2014). Prevalence and predictors of elder abuse in Mafikeng Local Municipality in South Africa. *African Population Studies*, 28(1), 463-474. Retrieved from http://aps.journals.ac.za/
- Biggs, S., Manthorpe, J., Tinker, A., Doyle, M., & Erens, B. (2009). Mistreatment of older people in the United Kingdom: Findings from the first national prevalence study. *Journal of Elder Abuse and Neglect*, 21(1), 1-14. Doi.

- 10.1080/08946 56080 2571870. Retrieved from http://www.dx.doi.org/10.1080/08946560802571870.
- Brozowski, K., & Hall, D.R, (2004). Growing old in a risk society: Elder abuse in Canada. *Journal of Elder abuse and Neglect*, 16(3), 65-81.
- Castle, N., Ferguson-Rome, J.C., & Teresi, J.A. (2013). Elder abuse in residential long-term care: An update to the 2003 national research council report. *Journal of Applied Gerontology*, 20(10), 1–37. Retrieved from https://www.ncbi.nlm.nih.gov/pubmed/ 24652890.
- Cogwill, D. (1979). Aging and modernization: A revision of the theory. In J. Hendricks & C.D. Hendricks (Eds.), *Dimensions of aging* (pp. 54-68). Cambridge: Winthrop Publishers.
- Cowgill, D.O., & Holmes, L.D. (1972). *Aging and modernization*. New York: Appleton-Century-Crofts.
- Cohen, M., Levin, S., Gagin, R., & Friedman, G. (2007). Elder abuse: Disparities between older people's disclosure of abuse, evident signs of abuse, and high risk of abuse. *Journal of American Geriatric Society (JAGS)*, 55(8), 1224–1230.
- Correia, T.M.P., Leal, M.C.C., Marques, A.P.O., Salgado, R.A.G., & Melo, H.M.A. (2012). Profile of elderly in violence situation assisted at an emergency service in Recife-PE. *Revista Brasileira de Geriatria e Gerontologia*, *15*(3), 529-36. Retrieved from http://www.scielo.br/pdf/rbgg/v15n3/v15n3a13.pdf.
- Covinsky, K. (2013). Hospitalization in older persons: Not just a medical outcome, a social outcome as well. *Journal of the American Medical Association Internal Medicine*, 173(10), 919-925.
- Dong, X., Simon, M.A., & Gorbien, M. (2007). Elder abuse and neglect in an Urban Chinese Population. *Journal of Elder Abuse and Neglect*, 19(3/4), 79-96.
- Ekot, M.O. (2016). Selected demographic variables and elder abuse in Akwa Ibom State Nigeria. *International Journal of Academic Research in Business and Social Sciences*, 6(2), 1-15. Retrieved from http://dx.doi.org/10.6007/IJARBSS/v6-i2/2000.
- Ekot, M.O. (2012). Prevalence and determinants of elder abuse in the context of family care giving in Akwa Ibom State. (An unpublished Ph.D dissertation). Michael Okpara University of Agriculture, Umudike, Nigeria.
- Ferreira, M., & Lindgren, P. (2008). Elder abuse and neglect in South Africa: A case of marginalization, disrespect, exploitation and violence. *Journal of Elder Abuse and Neglect*, 20(2), 91–107.
- Friedman, L.S., Avila, S., Tanouye, K., & Joseph, K. (2011). A case-control study of severe physical abuse of older adults. *Journal of the American Geriatrics Society*, *59*(3), 417-22. Retrieved from: http://onlinelibrary.wiley.com/doi/10.1111/j.1532-5415.2010.03313.x/ abstract.
- Garre-Olmo, J., Planas-Pujol, X., Lopez-Pousa, S., Juvinya, D., Vila, A., & Vilalta-Franch, J. (2009). Prevalence and risk factors of suspected elder abuse subtypes in people aged 75 and older. *Journal of the American Geriatrics Society* 57(5),815–822. Retrieved from
 - $\underline{https://onlinelibrary.wiley.com/doi/pdf/10.1111/j.15325415.2009.02221.x\#acc} \\ \underline{essDenialLayout}.$
- Gureje, O., & Oyewole, O. (2006). Informal care and the elderly in a changing society: A qualitative study of care recipients and caregivers. *Quarterly Journal of Mental Health*, *I*(1), 56–61.

- Hafemeister, T. (2003). Financial abuse of the elderly in domestic settings. In R.L. Bonnie & R.B. Wallace (Eds.), *Elder maltreatment: Abuse, neglect, and exploitation in an aging America* (pp. 382-445). Washington, D.C.: The National Academies Press.
- Iborra, I. (2009). *Elder Abuse in the Family in Spain*, (Report), Valencia: Queen Sofia Centre. Retrieved from http://www.abuel.org/docs/1spainfamily.pdf
- International Association of School of Social Work [IASSW] & International Federation of Social Work [IFSW] (2014). *Global definition of social work*. Retrieved from http://ifsw.org/policies/definition-of-social-work/
- Joseph, B., Khalil, M., Zangbar, B., Kulvatunyou, N., Orouji, T., Pandit, V... Davis, J. W. (2015). Prevalence of domestic violence among trauma patients. *JAMA Surgery*, *150*(12), 1177-83. Retrieved from https://www.ncbi.nlm.nih.gov/pubmed/26352398.
- Lowenstein, A., Eisikovits, Z., Band-Winterstein, T., & Enosh, G. (2009). Is elder abuse and neglect a social phenomenon? Data from the first national prevalence survey in Israel. *Journal of Elder Abuse and Neglect*, 21(3), 253-277.
- Madhurima (2008). Elderly widows as victims of physical abuse: a qualitative study in the state of Punjab. *Indian Journal of Gerontology*, 22, 501-514.
- Mowlam, A., Tennant, R., Dixon, J., & McCreadie, C. (2007). *U. K. study of abuse and neglect of older people: Qualitative findings*, National Centre for Social Research. Retrieved from
 - http://www.assets.comicrelief.com/cr09/docs/older_People_abuse_reportpdf.
- Mudiare, P.E.U. (2013). Abuse of the aged in Nigeria: Elders also cry. *American International Journal of Contemporary Research*, 3(9), 79-87.
- National Population Commission [NPC] (2010). Federal Republic of Nigeria 2006 population and housing census: Priority table volume iv, population distribution by age & sex (state & local government area). National Population Commission Abuja, Nigeria.
- O'keeffe, M.O., Hills, A., Doyle, M., McCreadie, C., Scholes, R.C., Tinker A., & Erens, B. (2009). *U.K. Study of Abuse and neglect of older people*. National Centre for Social Research. Retrieved from http://pdfserveinformaworld.com/529068_907452326.pdf.
- Okoye, U. O. (2005). The erosion of traditional social services available to the elderly and its implication for the elderly in Nigeria. In C. Ikonne, I. O. Williams, & E. U. Nwagbara (Eds.), *Security, social services, and sustainable development in Nigeria* (pp. 220-232). Port Harcourt: University of Port Harcourt Press.
- Oluoha, R.U., Obionu, C.N., Uwakwe, K.A., Diwe, K.C., Duru, C.B., Merenu, I. A., & Ndukwu, E.U. (2017). Assessing the prevalence and patterns of elder's abuse in Imo State, Nigeria: A rural–urban comparative study. *Journal of Advances in Medical and Pharmaceutical Sciences*, 13(2),1-11. Retrieved from https://www.researchgate.net/publication/3168 41139.
- Osunderu, O., & Abimbola, E.A. (2018). Elderly abuse and care of the aged in Nigerian society: A case study of old people's home Yaba. *Gerontology & Geriatric Studies*, 2(1), 1-6. Retrieved from https://www.researchgate.net/publication/327960865_Elderly_Abuse_and_Care_of_the_Aged_in_Nigerian_Society_A_Case_Study_of_Old_People %27s_Home_Yaba.

- Peri, K., Fanslow, J., Hand, J., & Parson, J. (2009). Keeping older people safe by preventing elder abuse and neglect. *Social Policy Journal of New Zealand*, 35, 159-172.
- Phakathi, N. (2011). Exploring elder abuse among clinic attendees in selected Durban hospitals. (An unpublished master dissertation). Department of Nursing, University of Kwazulu Natal.
- Rahman, T.T.A., & Gaafary, M.M.E. (2012). Elder mistreatment in a rural area in Egypt. *Geriatric Gerontology International*, 12,532-537.
- Repp, M., & Huges, E. (2005). *The rise in reported Elder abuse: A review of state and national data*. Retrieved from http://www.icjia.state.il.us/public/pdf/buttetins/elderabuse 2.pdf
- Ruelas-Gonzalez, M.G., Duarte-Gomez, M.B., Flores-Hernandez, S., Ortega-Altamirano, D.V., Cortes-Gil, J.D., Taboada, A., & Ruano, A.L. (2016). Prevalence and factors associated with violence and abuse of older adults in Mexico's 2012 National Health and Nutrition Survey. *International Journal for Equity in Health*, *15*(1), Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4769586/pdf/12939 2016 Art icle 315.pdf.
- Rodrigues, R.A.P., Monteiro, E.A., Santos, A.M.R., Ponte, M.L.F., Fhon, J.R.S., Bolina, A.F., & Silva, L.M. (2017). Older adults abuse in three Brazilian cities. *Revista Brasileira De Enfermagem*, 70(4), 783-791. Retrieved from https://www.researchgate.net/.../3189
 99243OlderadultsabuseinthreeBrazilian_citi...
- Rubin, A., & Babbie, E.R. (2008). *Research methods for social work*. Belmont, CA: Thomson Brooks/Cole.
- United Nations, Department of Economic and Social Affairs, Population Division (2017). World Population Ageing 2017 Highlights (ST/ESA/SER.A/397). Retrieved from www.un.org/en/development/desa/population/.../pdf/ageing/WPA2017_Report.pdf.
- United Nations, Department of Economic and Social Affairs, Population Division. (2012). *World population prospects: The 2010 revision*. Retrieved from http://www.un.org /esa/population/publications/2012WorldPopAgeingDev_Chart/2012PopAgeing andDev_WallChart.pdf.
- United Nations (2015). World population ageing 2015. United Nations, New York, USA
- United Nations Population Fund (2012). HelpAge International (HAI) Ageing in the twenty-first century: A celebration and a challenge. UNFPA & London: HelpAge International, New York, USA.
- Wang, J.J., Lin, J.N., & Lee, F.P. (2006). Psychological abusive behavior by those caring for the elderly in a domestic context. *Geriatric Nursing*, 27(5), 284-291.
- Wu, L., Chen, H., Hu, Y., Xiang, H., Yu, X., Zhang, T., & Wang, Y. (2012) Prevalence and associated factors of elder mistreatment in a rural community in people's Republic of China: A cross-sectional study. *PLoS ONE*, 7(3),1-8. Retrieved from https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0033857.
- Wu, L., Shen, M., Chen, H., Zhang, T., Cao, Z., Xiang, H., & Wang, Y. (2013). The relationship between elder mistreatment and suicidal ideation in rural older

- adults in china. American Journal of Geriatrics and Psychiatry, 21(10), 1020-1028.
- Yan, E., & Kwok, T. (2011). Abuse of older Chinese with dementia by family caregivers: An inquiry into the role of caregiving burden. *International Journal of Geriatric Psychiatry*, 26, 527-535.