

**PREVALENCE OF OLDER ADULT ABUSE AND SOCIAL WORK
INTERVENTION IN ETINAN LOCAL GOVERNMENT AREA, AKWA-IBOM
STATE, NIGERIA**

BY

**Charles MFON
PG/SSC1715056**

**DEPARTMENT OF SOCIAL WORK
FACULTY OF SOCIAL SCIENCES
UNIVERSITY OF BENIN
BENIN CITY**

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**BEING A RESEARCH THESIS PRESENTED TO THE COLLEGE OF POST GRADUATE
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CERTIFICATION

This is to certify that this thesis title “Prevalence of older adult abuse and social work intervention in Etinan Local Government Area, Akwa-Ibom State, Nigeria” was carried out by **Charles MFON** with PG/SSC1715056 under our supervision and of the Department of Social Work, Faculty of Social Sciences, University of Benin, Benin City, Edo State, Nigeria in partial fulfillment of the requirements for the Award of Doctor of Philosophy (Ph.D.) Degree in Social Work.

Prof. O. Osunde
(Supervisor)

Date

Prof. S.O. Ibobor
(Co-Supervisor)

Date

Prof. Sims Odiagbe
(External Supervisor)

Date

Dr. (Mrs) H.E Eweka
(Head of Department)

Date

DEDICATION

This Work is dedicated to God the Father, God the Son and God the Holy Ghost, Jehovah
"Naka' who fights for me daily.

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ABSTRACT

Older adults are one of the populations at risk in most traditional African societies, with growing issues of various forms of abuse and neglect that exacerbate their already deteriorating conditions, being perpetrated by their family members and caregivers. Hence the study examined prevalence of older adult abuse and social work intervention in Etinan Local Government Area, Akwa-Ibom State, Nigeria. The study adopted the quantitative and qualitative research methods, where the cross-sectional research design was adopted in collecting quantitative data. The phenomenology research design was employed for the collection of qualitative data. The study area was in Etinan Local Government Area, Akwa-Ibom State, Nigeria, covering ten major streets in five communities in Etinan Local Government Area. The target participants were older adults within the age range of 65 years and above, who were victims and those who had knowledge and experience of older adult abuse. A sample size of 400 respondents and 10 informants were adopted for the quantitative and qualitative data respectively, while the simple random and purposive sampling techniques were adopted in selecting the respondents and informants. The research instrument for collecting the quantitative data was a structured questionnaire on a one-time survey and face to face basis, while the qualitative data was collected with the aid of an unstructured in-depth interview guide. Quantitative data collected was analyzed with the statistical packages of social sciences (SPSS) version 22, and the results were presented using percentages, tables, frequency distribution, cross tabulations, charts and descriptive statistics. Thematic and phenomenological methods of data analysis were used to analyze the qualitative data obtained from the field. The findings emphasized that various forms of elder abuse especially emotional, physical, and financial, were perceived as serious challenges affecting older adults' well-being, demanding increased awareness, prevention efforts, and policy interventions. The findings indicated that socio-cultural, economic, and institutional factors jointly contributed to the mistreatment of older adults. It also revealed a strong consensus that elder abuse lead to broad and lasting harm across emotional, social, and physical domains among older adults. It revealed gaps in institutional and communal support that require policy attention and education initiatives. The study recommended that government and relevant stakeholders should organize community workshops targeting families, caregivers, and older adults to raise awareness about elder abuse, its signs, and consequences.

CHAPTER ONE

INTRODUCTION

1.1 Background to the study

Globally, the older adults' population is rapidly growing, with individuals aged sixty-five, and above projected to surpass two billion by 2050 (World Health Organization, 2021). This demographic surge is primarily driven by advancements in healthcare, living standards, and access to essential services, particularly in developed regions like Europe and North America (WHO, 2021). However, the increased lifespan of older individuals also brings about negative repercussions, including instances of neglect, mistreatment, and abuse. The elderly are often vulnerable and powerless in the face of contemporary economic challenges. Statistics showed that approximately one in six individuals aged sixty or older has experienced some form of abuse in their lifetime (WHO, 2017), with this demographic increasingly at risk of various forms of mistreatment (WHO, 2018). Projections suggest that by 2050, around 320 million seniors could fall victim to older adults abuse, a threat that transcends time and circumstances. But the incident is more prevalent in poor and developing nations than what is obtains in developed nations of Europe and North America. According to United Nations an older adult is someone who is over the age of 65 and above (WHO, 2022). However, families and communities frequently utilize various socio-cultural indicators to determine age, such as familial roles (like grandparents), and physical characteristics, or age-related health issues.

In Sub-Saharan Africa, research on elder abuse has underscored the significance of shifts in values and ideological distinctions as crucial factors. Recent studies have pointed out how traditional values that emphasize the importance of having elderly members in the community, and the respect and care for older individuals within families and society, are diminishing rapidly in the region (Akanle & Adeogun, 2014; Sossou & Yogtiba, 2015; Wumbla, 2018).

For instance, Oppong (2006) has discussed how cultural values, societal issues, and economic hardships converge to heighten the susceptibility of older people in various African contexts. Oppong (2006) highlighted in his analysis of how older individuals have seen a decline in their social status and reverence due to the shift from communalism to individualism.

Moreover, religion and belief systems significantly impact the societal perception of older persons, sometimes categorizing them as witches or sorcerers and therefore sources of misfortune in diverse African communities (Asamoah-Gyadu, 2015; Brooke & Ojo; Crampton, 2013). With persistent economic challenges in the Global South, societal problems, health issues, and insecurity, spirituality has become a dominant force influencing the perspectives of both the young and old as they seek solutions to a range of personal and social dilemmas (Rotimi *et al.*, 2016). For example, Nigeria is experiencing a growing trend of elders' abuse (Van Den Bruele *et al.*, 2019), and this is partly as a result of the challenging and harsh political and economic realities of the modernization of values and practices that are shaping intergenerational relationships including the social values and support for older people (Aboderin, 2017).

In the last few decades, Nigeria has witnessed a high-income inequality with the rising high cost of living and poverty rates. Among other social indices and categories, the report showed that women and older people are among the most adversely affected groups (Oxfam International, 2017). In this context, Older people, including those that are still working and the retirees, earns insufficient incomes and have to be dependent on their adult working children and sometimes religious organizations (Ebimgbo *et al.*, 2018), and other significant others for survival (Josephson, 2017). Older people that have worked all their lives for the government also suffer in many ways because their pensions are paid irregularly, and the pensions are insufficient to meet their basic needs. As such, dependence on their adult

working children has increased, and the cost of living also has skyrocketed. The adult working children are also vulnerable financially as they earn less than what is enough to provide the needed support for their immediate family and their aged parents and relatives (Mayston *et al.*, 2017).

The absence of quality formal support of government for older people also increase their vulnerability, especially in situations of ill-health and financial dependence on others. Amid these developments, the psychosocial and health needs of older people are unattended to and this come with enormous grave consequences on their ageing experiences (Animasahun & Chapman, 2017). These challenges then provide opportunities for people to label and stigmatize older people with the tag of poor health and socioeconomic conditions as individuals who suffer because of their evil deeds. Against these backdrops, it becomes imperative to interrogate the contestations and prevalence of physical abuses and neglects from the viewpoints and narratives of older people and religious leaders in the study area.

In Nigeria, some Pentecostals Christian fold for instance have the doctrine that evil forces and evil machinations are critical barriers to success in life is widespread and appreciated among young people (Rotimi *et al.*, 2016). Some adults and working children that are Pentecostals, sometimes find such belief as excuse to stay away from the family members especially when their aged parents are of a different faith. Akanle and Adeogun (2014) in their qualitative study that consisted of 20 interviewees and four focus group discussions (Fgd) of community leaders, religious leaders and older people in Ibadan, Nigeria showed how Pentecostalism is interfering with the values for old age and support for older people. The findings from the study affirmed the dwindling support and hence neglect of older people by their significant others, including their adult working children. Though, it is difficult to attribute changing value systems to Pentecostalism alone; some other socio-cultural factors

like beliefs in witchcraft (Eboiyehi, 2017), and economic realities of liberalization of the Nigerian economy are part of the critical factors responsible for the emerging trend of elderly abuses and the neglect of older persons in Nigeria (Agunbiade & Akinyemi, 2017). The crux of this study is to ascertain the extant and magnitude of abuses of the older adults in Etinan Local Government Area Akwa-Ibom State, Nigeria.

1.2 Statement of the Research Problem

Elderly individuals often face challenges that can lead to self-harm as a consequence of aging and decreased abilities. Neglect of the elderly can sometimes result in self-harm, defined by the National Institute for Health and Clinical Guidelines (2011) as "any act of self-poisoning or self-injury carried out by a person, regardless of intent,"hence posing significant urgent public health concerns globally. Self-harm stands as a critical risk factor for suicide, a phenomenon with notably high rates among older adults (WHO, 2014). Nevertheless, self-harm can also occur without suicidal intentions, known as non-suicidal self-injury. In the elderly population, self-harm is more prevalent among women, individuals with physical and/or mental health conditions, and those with a history of previous self-harm incidents (Troya *et al.*, 2019). Comparatively, self-harm rates are less common among older adults when contrasted with younger age groups.

However, self-harm rates might be under-estimated because of the shame and the perceived or felt stigma (Simon & Schuster, 2009), lack of disclosure and difficulty working with older adult populations. Furthermore, these authors stated that amongst older adults, evidence suggests that there can be increased lethality associated with self-harm. This increased lethality often results in higher resource and treatment costs due to medical complications caused by failing health (Czernin *et al.*,2012). The reduction in the quality of life of the elders can make them become a problem to themselves and their families (Sun *et al.*, 2011). This

connotes that beyond meeting basic needs, most families are also concerned about their older loved one's quality of life in the context of social connectedness, purpose, autonomy, dignity, learning more about what matters most to the older person, and what kinds of things they consider less important or would be willing to trade-off. Jolanki (2021) noted that an older person's housing situation often affects the of life, safety concerns, and the ability of others to provide assistance and supportive environment like moving in with a family member and assisted living etc, and this then constituted major problems to development in the Third World nations.

A major challenge facing most governments in Africa is the development of policies and training of professionals capable of understanding and responding to the current social priorities and complex needs of the elderly (Tanyi *et al.*, 2018). The ageing of populations across the globe is a demographic reality of our times and by 2050, there will be older people worldwide (aged 60 years and over) than children under 15 years for the first time in history (Pelser, 2012). The government of Nigeria, therefore, has to reposition itself to face and address the economic, health, social, and psychological challenges that are already manifesting in caring for the elderly (Tanyi *et al.*, 2018).

There are less number of family caregivers available to care for older people (Lowenstein, 2010), hence older people are at risk of abuse such as being neglected by family caregivers who experience difficulties in finding a balance between caregiving and other life activities (Ananias & Strydom, 2014). Tomini *et al.*, (2016) stated that even though family members are the main providers of informal care to older persons, about ten per cent of older people who are cared for by their family caregivers are at risk of abuses or close to being neglected. There are many explanations for the weakening of the family as an important safety net for older people. Baldassar (2008) explains that some children have lost their sense of obligations

to care for older relatives. This author specified that family structures are also undergoing major changes since adult children no longer live in the same towns as their elderly parents, because of the global socio-economic climate realities, high costs of living and pressure to find employment outside the abode of their family. Abuses of older people can have serious physical, mental health, financial, and social consequences, including, for instance, physical injuries, premature mortality, depression, cognitive decline, financial devastation and placement in nursing homes etc. (Yon *et al.*, 2017).

Pilmer *et al.*, (2016) emphasized that individual characteristics which increase the risk of becoming a victim of elderly abuse include functional dependence/disability, poor physical health, cognitive impairment, poor mental health and low income, amongst others. The Social factors associated with elder abuse may include ageism against older people and some cultural norms (Phelan & Ayalon, 2020). This is because the detection and management of such mistreatment is emerging as a public health concern and a prime issue for health professionals despite its many challenges.

However, the actual consequences for individual caregivers varied depending on a host of individuals and contextual characteristics (Schulz & Eden, 2016). The National Center on Elder abuse (2005) stated that the aging population faces many unique challenges including Finances, health, mental health, and political considerations which must be considered when Social workers and other caregivers provide services to the aging population (Bassuk & Gerson, 2022). Growing older is inevitable; however, Social workers and caregivers can make the process smoother for those who have entered the later stages of life (Keaton, 2022).

A report from the Community of Practice of Eldercare in Nigeria dissemination workshop lamented that the elderly in Nigeria suffer a lot of discriminations and neglects, especially in this modern era (Ugoeze, 2022). This author stated that a lot of elderly people are abused at

home by their children and grandchildren. There was advocacy for a law that will ensure that the rights of elderly persons are protected but are yet to expressly focus on older persons who also fall within the category of vulnerable persons (Mike, 2020). In this context, older women may be the victims of section 55(1) (d) of the Penal Code that permits a man to physically chastise his wife as long as there is no 'grievous hurt', as no exception is provided for the wives that are advanced in age.

Although elderly abuse in Nigeria is a social problem that has been overlooked by the public, non-governmental organizations (NGO's), the government, organizations, and researchers. However, very little attention has been paid to how and why the older adults are abused by family members, caregivers, and institutions that care for them. Jeanna (2012) stressed that elderly abuse is a largely unrecognized and untreated social problem that threatens the right of elderly people to live a dignified life. In other words, how caregivers, families, NGO's and the government, etc. have neglected the elderly, which has led to abuse of this group. There is a growing concern which revealed that around the world, there are more than 445.2 million people aged 65 and above, representing about 7 percent of the world's population (He et al, 2016).

Cherlin, (2010) maintained that because the aging population has grown significantly, the need for the children of older adults to care for their parents has increased dramatically. The caregivers include the family, government, NGO's, etc., and they hold the responsibility of taking care of the elderly by providing shelter, clothing, food, good health care services, and other necessities (Leu & Becker, 2017). As a result of this, the elderly become as dependent on their caregivers as a child does, financially, emotionally, or physically, thus leaving a broad window for possible abuse (Jones *et al.*, 2010).

According to Ekot (2012), in general, elderly abuse in Nigeria may include all forms of shabby treatment of the elderly by young people and family members, such as verbal abuse, name-calling, being locked up in a room, treatment as a child, and not maintaining or supporting them with money to eat, which have led to some elderly begging in the street, at motor packs, at the entrance of some government hospitals and organizations, etc. This is because they are neglected by their caregivers, making them vulnerable to all forms of abuse in the street. The abuse of the elderly may even include outright beatings, indecent touching, extortion of money, non-visiting, denying access to grandchildren, and cases of children declaring their parents as witches (Ekot 2012).

In addition, the Nigerian government too cannot be excluded from the abuse of the elderly because they always fail in paying up their pension as and at when due and staving them of the pay or pension, denying them from time to time not minding their age to come for screening before they collect their money, which they work for thirty or more years instead of enjoying themselves, they are suffering, and some even in the process of collecting their stipend slums and die and denying them their rights (Diala, 2014). This author stated that some of these elderly have not been paid their pension for as long as 6 months, some for two years or more, and at the end of their suffering, after they have been paid their pension by the government, banks will sometimes short-pay them, and some family members also extort the money from them, leaving them with nothing, and in turn, they become psychologically distressed and frustrated.

Moreover, evidence from various studies support the notion that society has a well-developed mythology regarding aging as a biosocial phenomenon and that the elderly, as a distinct social group, have been marked out as subjects and victims of negative stereotypes (Tomczyk & Klimczuk, 2015). This is further supported or buttressed by Ajomale's (2007) observation

that immediate family members, trusted caregivers, and the society often subject the elderly in Nigeria to abuse, and consequently, these elders constitute the most vulnerable group after children.

A lot has been written and studies carried on this topical issue of elders' abuse but none of these studies has focus on the elderly in the study area. This create a gap in literature and empirical data and limit the discourse of this topical issue in academic and policy contexts. The rationale for this study is to fill this gap by generating empirical data that will make future discourse of this issue very robust and all embracing. This study therefore seeks to examine the prevalence of elderly abuse and neglect among older adults and the roles Social workers can play to reduce various forms and influence of neglect on the elderly in Etinan Local Government Area Akwa-Ibom State, Nigeria.

1.3 Aim and Objectives of the Study

The aim of the study was to examine Prevalence of older adult abuse and social work intervention in Etinan Local Government Area, Akwa-Ibom State, Nigeria

The objectives of the study were to:

1. ascertain the prevalence of different forms of abuse among older adults in Etinan Local Government Area;
2. assess the awareness and perceptions of abuse among older adults in Etinan Local Government Area;
3. identify the factors contributing to abuse among older adults in Etinan Local Government Area;
4. examine the awareness of abuse amongst older adults in Etinan Local Government Area

5. evaluate existing Social Work Interventions among older adults in Etinan Local Government Area.
6. Make policy recommendations based on the findings of the study in Etinan Local Government Area.

1.4 Research Questions

The following research questions will guide the study;

1. What is the prevalence of different forms of abuse among older adults in Etinan Local Government Area?
2. What are the levels of awareness and perceptions of abuse among older adults in Etinan Local Government Area?
3. What are the factors contributing to the vulnerability of older adults to abuse in the local community?
4. What is the awareness of abuse amongst older adults in Etinan Local Government Area?
5. What are the current social work interventions policies and services in addressing and prevention abuse among older adults in Etinan Local Government Area?
6. What are policy recommendations based on the findings of the study in Etinan Local Government Area?

1.5 Significance of the Study

Older adults abuse may not be a recent phenomenon but complex phenomenon in our contemporary times. To properly understand this theoretical reconstruction, it is germane that this theoretical discourse should be studied more extensively. This theoretical template or study is to improve our knowledge and understanding of the causes and nature of older adult abuse in Nigeria, with particular references to the people of Etinan local government area, a minority ethnic group in Nigeria who are also peculiar for their unique cultural heritage. The

study of older adult abuse and its nature among the people of Etinan local government area will help to discover the socio-cultural, socio-economic, and other social implications that older adult abuse has on the family and also on society at large. The study will also add to the already existing literature on the nature and causes of elderly abuse. Thus, it will form a good resource material on older adult abuse research and its nature study in Nigeria. Considering the fact that abuse in most forms is frowned upon in Nigerian societies. The study will also create awareness about the causes, nature, and implication of the study on the development of society.

Despite the growing awareness of elder abuse as a significant social issue, there is a notable lack of empirical data in Nigeria, particularly in regions like Akwa-Ibom State. This study aims to fill the gap in research by providing up-to-date statistics and insights on the prevalence of elder abuse in Etinan. Gathering data through surveys, interviews, and focus groups will help identify the extent of the problem, the demographics most affected, and the specific forms of abuse prevalent in the area.

The study area is characterized by a rich cultural heritage and traditional values that influence the treatment of older adults. However, these values are changing as younger generations adopt modern lifestyles. This study will explore how cultural perceptions of aging and elder care affect the prevalence of abuse. Understanding these cultural dynamics is essential for designing effective social work interventions that resonate with the community and promote respect for older adults.

The study will also examine the effectiveness of existing social work interventions aimed at preventing elder abuse and supporting older adults. In Etinan, social workers play a crucial role in advocating for the rights of older citizens and providing support services. By evaluating these interventions, the study can identify best practices and areas for

improvement, ultimately enhancing the capacity of social work professionals to address elder abuse effectively. This study has significant policy implications. By highlighting the prevalence of elder abuse and the effectiveness of social work interventions, the study can inform local and state policymakers about the need for comprehensive policies and programs to protect older adults. Recommendations derived from the study can guide the development of community-based initiatives, training programs for caregivers, and advocacy efforts aimed at raising awareness about elder abuse.

Nevertheless, the findings of this study and the recommendations this study will go a long way toward enhancing the development of the people of Ikot Akpan. It will also bring to light the implication of elderly abuse, especially for the people of Etinan local government area of Akwa Ibom state. More so, it will educate people on the benefits of respecting and caring for the elderly in all spheres of life. The government policymakers will not be left out, as the research will give them the needed information or resource material that will assist them in making laws and policies that will control these anomalies bedeviling contemporary Nigerian society.

1.6 Scope of the Study

The study was on the Prevalence of adult abuse and social work intervention in Etinan Local Government Area of Akwa-Ibom State Nigeria. The study involved the older adults 65 years and above in Etinan Local Government Area of Akwa-Ibom State, Nigeria. All older males and females, irrespective of their education, marital status, religious affiliation, occupation, or class were involved in the study.

1.7 Definition of concepts

Elderly Abuse: In this context, elderly abuse encompasses intentional actions that cause harm or create a risk of harm to an older adult, including physical, emotional, sexual, financial exploitation, neglect, or abandonment.

Elderly Neglect: Elderly neglect refers to the failure to fulfil caregiving obligations towards older adults, leading to deprivation of basic needs, such as food, shelter, medical care, and emotional support.

Prevalence: Prevalence in this context refers to the proportion or number of cases of elderly abuse and neglect within the older adult population in Etinan Local Government Area, Akwa Ibom State, Nigeria, during a specific period.

Social Work Intervention: Social work intervention involves the application of social work knowledge, principles, and skills to address social issues, enhance well-being, and empower individuals or communities facing challenges, such as elderly abuse and neglect.

Elderly Population: The elderly population comprises individuals who are typically aged 65 years and above, focusing on this age group for the purposes of studying the prevalence of abuse and neglect in Etinan Local Government Area.

Risk Factors: Risk factors are characteristics or conditions that increase the likelihood of elderly individuals experiencing abuse or neglect, such as social isolation, cognitive impairment, or caregiver stress.

Protective Factors: Protective factors are elements that buffer against or reduce the risk of elderly abuse and neglect, including social support, access to healthcare, financial security, and community involvement.

Community Resources: Community resources refer to services, facilities, and support systems available in Etinan Local Government Area that can be utilized to prevent, identify, and address cases of elderly abuse and neglect, including social services, healthcare facilities, and advocacy organizations.

Older Adults: In this context, older adults are typically defined as individuals aged 65 and above in Etinan Local Government Area. This demographic may face various challenges, including vulnerability to abuse and neglect, which can be exacerbated by factors such as isolation, health issues, and socioeconomic status. Understanding this definition is crucial for developing effective social work interventions aimed at protecting and supporting older adults in these situations.

CHAPTER TWO

LITERATURE REVIEW

Preamble

The literature review of this study was discussed under the following headings: review of relevant concepts, review of empirical studies, and theoretical framework. The review of relevant concepts was presented as follows: the concept of older persons, the prevalence of different forms of elderly abuse and neglect, factors contributing to elderly abuse and neglect, the impact of elderly abuse and neglect, and awareness and perception of elderly abuse and neglect.

2.1 Conceptual Clarification

2.1.1 Concept of older persons

Globally, there exists a particular group of individuals (referred to as elders) who come into the world as babies, spend their entire lifetime in service to humanity, retire from active service, and are only waiting to take a final exit from the world into eternity (Akpan & Umobong, 2013). These authors stated that this group of individuals is in a stage of life known as late adulthood, and it is a stage in life in which people are known as the elderly or referred to as the aged. This period in the life span of human beings is characterized by declines that occur in association with advanced aging in almost all aspects of development (Franceschi *et al.*, 2018). Franceschi *et al.* (2018) opined that late adulthood or old age commences from the age of 65 and stretches to the period of death or process of dying, as it is a period in life with unique challenges/problems. This perhaps explains why many societies all over the world maintain a stereotypic and often negative perception of older adults.

Segal and Showalter (2014) stated that youthfulness is being promoted to the extent that many people do not look forward to old age or want to grow old, as many people view old

age as an unfortunate phase of human life and often spend a lot of money in a bid to reverse the aging process. Old people are often seen trying to behave as youth and do sometimes get offended whenever they are referred to as being old, as many young people sometimes make jest of the old, often referring to them looking as witches/wizards (Black 2020). And this is especially true of ethnic groups in south-south Nigeria. Elder abuse is associated with distress and increases their mortality and sometimes the caregiver's psychological morbidity (Yunus *et al.*, 2019). These authors emphasized that discovering the prevalence of abuses perpetrated against vulnerable old people by those they rely on is inherently difficult. There are a wide range of prevalence figures, perhaps because studies employ different populations, measures, and definitions of abuse (Stoltenborgh *et al.*, 2015). Shamar and Kumar (2022) noted abuse is 'a violation of an individual's human and civil rights by another person or persons'. These authors sub-categorize abuse into physical, psychological, sexual, financial, discriminatory abuse, and neglect and specify that abuse is either an isolated or repeated act(s) or omission (Abbasi-Ghahramanloo *et al.*, 2020). Numerous instruments are used to measure abuse, and they vary in items included and the level and frequency of abusive acts considered to constitute an abuse case (Matthews *et al.*, 2020). Hence accurate estimates of elder abuse are vital for service planning in our aging society.

Prior to the advertisement of colonialism in developing countries, the cultural/heritages defined the extended family form, with two or more generations living together in a household (Furstenberg, 2020). The author noted that under this type of arrangement, the elderly were well taken care of till date in Nigerian society; the majority of the elderly are solely cared for by the family because part of the traditional roles of the family involves taking care of old parents as well as other older members (Aboderin, 2017). Humphries (2016) posited that in pre-industrial societies, the family was the main provider of care to the elderly relatives. Rittirong *et al.* (2014) also maintain that in both developed and developing

countries, the elderly as well as those who take care of them prefer that they should be taken care of within the family. However, in today's world, including the Nigerian society, with the fast technological advancement and awareness in the world, many people have become too busy to set out time towards the care of the elderly (Berkup, 2014). In advanced countries, institutions like the old people's homes are set up to take care of the elderly, but Nigerian society lacks the awareness and the wherewithal of setting up institutions with social benefits capable of taking care of the elderly (Arai *et al.*, 2015). The elderly therefore remain the sole responsibility of his/her family and may be faced with unique challenges and problems, individually incidences of abuses and neglects. These challenges call for re-evaluation and policy thrust to deal with the changes in the social world of the elderly, as they may discover they can no longer cope on their own and have to rely on other people for care and support (Lloyd *et al.*, 2016). This is because having to rely on caregivers for care and support introduces a new dimension to the social problems of the elderly.

Nigeria has the largest population in Africa with over 200 million people and an elderly projected population growth rate of 3.2%, a rate that has been estimated to double by the year 2050 (Tanyi *et al.*, 2018). This trend calls for concern as it poses major economic, psychological, health, and social challenges to Nigerians. What really heightens the challenge is the absence of a clear policy thrust or any functional social security service for the elderly people in Nigeria (Innocent, 2017). Consequently, social policy for the elderly people remains turbulent, especially with the rejection of the welfare system in favour of the adoption of neoliberal policies in Nigeria (Akinola, 2017). Two major distinguishing attributes of the neoliberal system are privatization, which trades on the profit motive, and the removal of state subsidies, as the latter in particular marginalized both the elderly and the poor (Raco, 2016). Studies of the elderly have always emphasized the need for Nigeria to

make serious efforts to cater for the needs of this vulnerable group and highlighted the fact that the elderly needs special policy intervention for care and protection (Tanyi *et al.*, 2018).

2.1.2 Political Economy and History of Elder Abuse in Nigeria

The political economy of elder abuse in Nigeria reveals the structural and systemic factors that contribute to its prevalence and manifestations. Elder abuse is not merely an individual issue but is deeply rooted in broader socioeconomic and political contexts. The origin of elder abuse, while historically present in various forms, has been exacerbated by modernization, urbanization, and the erosion of traditional social support systems (Aboderin, 2017).

Nigeria has witnessed increasing income inequalities and high poverty rates, disproportionately affecting older adults (Oxfam International, 2017). The lack of adequate social security systems and pension schemes for many older persons increases their economic vulnerability and dependence on family members, creating opportunities for financial exploitation and neglect (Onigbogi, 2015; Anifalaje, 2017).

Traditionally, the extended family system in Nigeria provided a strong safety net for older adults, with children and relatives obligated to care for them (Ekot, 2016; Atchley & Barusch, 2004). However, urbanization and migration have weakened these traditional structures, leaving many older adults without adequate support. The modernization of values and practices has altered intergenerational relationships, diminishing the social value and support for older people (Aboderin, 2017). Younger generations may prioritize their own economic advancement, leading to neglect or abuse of their elderly relatives.

The absence of comprehensive national policies and programs specifically designed to protect and support older adults further compounds the problem (Ajomale, 2007; Adelokun & Obue, 2020). The lack of legal frameworks to address elder abuse and ensure access to healthcare, social services, and justice leaves older adults vulnerable. Older adult abuse in

Nigeria manifests in various forms, including physical abuse, neglect (withholding necessities like food and medication), financial exploitation, emotional or psychological abuse, and abandonment (Akpan & Umobong, 2013; Zikoko!, 2023). Neglect is often reported as the most common form of abuse (Ojule Inumanye N., 2025).

2.1.3 History of Elder Abuse in Human Society and Nigeria

The recognition of elder abuse as a distinct social problem is relatively recent. While mistreatment of older adults has likely existed throughout history, it was often hidden or considered a private family matter. Discussions around elder abuse began in the mid-1970s, with British journals describing it as "granny battering" (Zikoko!, 2023; Ojule Inumanye N., 2025). The First World Assembly on Ageing in Vienna in 1982 brought medical attention to elder abuse as a crime (Ojule Inumanye N., 2025).

The World Health Organization (WHO) has played a crucial role in raising international awareness of elder abuse, defining it as "a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person" (WHO, 2018; Ojule Inumanye N., 2025).

Elder Abuse in Nigeria: In Nigeria, elder abuse has historically been underreported and often attributed to cultural norms or family issues (The Face of Elder Abuse in Africa: The Nigerian Perspective, 2022). However, studies have revealed that elder abuse is a significant problem, with prevalence rates varying across different regions (Akpan & Umobong, 2013; Older Persons' Views and Experience of Elder Abuse in South Western Nigeria, 2025).

Nigeria is experiencing a growing trend of elder abuse, exacerbated by challenging economic conditions, modernization, and changing intergenerational relationships (Van Den Bruele, Dimachk and Crandall, 2019). There's increasing recognition of the need for advocacy, policy

development, and social work interventions to address this issue (Social Work Intervention Strategies for Victims of Abused Elderly in Ukhun Communities, Edo State, Nigeria, 2023).

Given the political economy and history of elder abuse in Nigeria, social work interventions in Etinan Local Government Area must address both the immediate needs of older adults experiencing abuse and the underlying structural factors that contribute to it. These interventions should include:

- 1. Awareness Campaigns:** Public awareness campaigns to educate communities about elder abuse, challenge harmful cultural norms, and promote respect for older adults (Exploring Information Sources and Awareness Levels: Empowering Education on Elder Abuse in Lagos State, Nigeria, 2023).
- 2. Support Services:** Provision of support services for older adults, including access to healthcare, counseling, legal aid, and safe shelters (Elder Justice, 2024).
- 3. Economic Empowerment:** Programs to enhance the economic security of older adults, such as skills training, microfinance initiatives, and advocacy for social security benefits (Social Work Intervention Strategies for Victims of Abused Elderly in Ukhun Communities, Edo State, Nigeria, 2023).
- 4. Caregiver Support:** Support and training for caregivers to reduce stress and prevent abuse, including respite care services and counseling (Social Work Intervention Strategies for Victims of Abused Elderly in Ukhun Communities, Edo State, Nigeria, 2023).
- 5. Policy Advocacy:** Advocacy for the development and implementation of comprehensive national policies and legislation to protect the rights and well-being of older adults By addressing the political economy of elder abuse and understanding its historical context, social work interventions can be more effective in preventing and

responding to this critical issue in Etinan Local Government Area and throughout Nigeria.

2.1.4 Forms of Abuses of the Older Adults

Mistreatment, neglect and abandonment of the older adults constitute a serious public health problem that scourge that is becoming increasingly visible among us and that is seriously a source to of worry the community in general and the families in particular (Martin *et al.*, 2014). In their opinion, it seems crucial to study this issue for different reasons, given the crucial increase in the elderly population.

Older adults abuse is a continuous, complex and universal process, common to developing nations, but that may have a more common manifestation in the last stage of human life making the elderly more vulnerable (Joy, 2020). This vulnerability is associated with the increasing loss of social status and the consequent devaluation makes the elderly constitute a part of the population exposed to the risk of maltreatment (Storey, 2020). The mistreatment of the elderly, widely reported in recent times, both at the European and global levels, have also increased substantially in Portugal and according to Gonçalves, the figures recently known in that country show that this type of conduits (abuse) tripled (Yon *et al.*, 2017). The Public Security Police, refers to the existence of an increase in crime in this elder abuse, but adds that it does not necessarily correspond to an increase in crime, but to a greater sensitivity, to the problems and practices of denunciations (Martins *et al.*, 2014). In addition, the author stated that older people themselves have increasingly more sense of their rights hence advancing same to the allegations of mistreatment they suffer.

Actually, the mistreatment of the older adults represents a serious social problem, which tends to increase, especially if we take into account the dependence of these people as a result of known longevity (Harbinson, 2016). The author emphasized that such abuse is not a new

development, however they have progressively increased. This is an issue that began to generate interest to the academic community, but, there is a lack of data on the subject, making it imperative to know who are the main victims, what create traits of the aggressors, are and what kind of aggression they perpetrate (Hart, 2018).

Brownell (2014) stated that the United Nations (UN) defined mistreatment of the older adults, as "any single or repeated act or lack of appropriate action, occurring in any relationship where there is an expectation of trust, which causes harm or discomfort to an older person. The author stated that the concept in question, integrates various types of abuse, including physical, psychological, material and financial abuse, as well as active and passive negligence. The physical abuse is defined as the practice of injury or physical coercion that causes the elder physical injury or psychological damage (Yunus *et al.*, 2019). Psychological abuse is the practice of mental anguish and suffering e.g. through verbal abuse, insults, threats, various processes of infantilization and humiliation (Joshi, 2020). This author stated that psychologically battered elderly manifest fear, apathy and has difficulty making decisions.

The material abuse has to do with the economic or improper exploitation of the elderly and illegal use of their funds and resources, for example, through the financial exploitation of the elderly, the misappropriation of his/her assets and properties, forced alteration of their will or other legal documents and denial of access and control over their own funds and personal property (Storey, 2020). Rosen *et al.*, (2018) emphasized that the features of the self-neglect include improper use of savings and assets, physical and psychological violence, sexual and verbal violence. The authors also emphasized that psychological abuse and physical abuse are extreme and unacceptable types of maltreatment, but it is the most common at the household level, and may lead to unimaginable consequences.

Neglect is also a form of abuse, and studies have shown it to be more constant and this corresponds to forgetting the elderly and not to meet their basic needs (Martins *et al.*, 2014). According to the authors, instances of neglect are: lack of hygiene care, the lack of attention paid to feeding schedules and / or medication, etc. Still there is mistreatment at the structural level, which is those that result from a variety of aspects related to social inequality, since there is a culture of violence against people who disagree with the current standards of beauty, monetary and/or consumption (Kivel, 2017).

Kivel (2017) posited that mistreatment at the institutional level is related to a distancing of the affective level, a regime that is austere and rigid and impersonality of care that is provided to the older adults. Piezunka and Dahlander (2015) opined that the institutional dimension has received greater attention because access to these institutions has increased significantly. The authors stated that it can happen in homes, centers of support, and care for the elderly and is usually practiced by people who are paid to provide care and services to the elderly, such as nursing, vigilantes, and aids geared to senior center staff. Here, the maltreatment most often inflicted on the elderly is: the existence of excessive restrictions; sub- or overmedication; verbal aggression; financial exploitation; infantilization; depersonalization, dehumanization, and victimization (Mulan, 2023). The author emphasized that as to the origin of abuse, it may occur from family, society/culture, or the personality of the caregiver. The issue of abuse may be related to stressful situations with abuse of alcohol and drugs, conflicts, psychological disorders, and/or experiences of the assailant (Baby, 2014). It can further expand the possibility of mistreatment of the elderly due to factors such as new family formation, cohabitation, disability both physical and mental, low cognitive and functional ability, low economic power of the population, the stress and problems of the caregiver in a situation of dependency, personal problems, and the prior existence of patterns of violence (Kalayci & Ozkul, 2020).

Studies have shown that the main perpetrator is a family member of the elderly, making it difficult to identify since they are afraid to report it, not only for themselves but also to protect family and friends, fearing that things may become even more unfavorable (Fraga Dominguez *et al.*, 2021). However, whether the abuse is practiced in a family or institutional context, the effects are similar. The elderly tend to develop attitudes of guilt, low self-esteem, and social isolation, are more easily depressed, suffer from sleep disorders, reinforce their dependencies, and increase social stigma.

Aslan and Erci (2020) posited that older adult abuse can take many forms, including physical, financial, psychological, sexual abuse, and neglect. Other forms of abuse are violation of basic human rights and medication abuse; and in Nigeria, abuse may include witchcraft accusation and lack of respect, among others (Ekundayo, 2022). For emphasis, such abuse may be: Physical abuse is the use of physical force to cause discomfort, which may or may not result in body injury, physical pain, or impairment. It is evidenced by inflicting or threatening to inflict physical pain or injury on a vulnerable elder, even if the person was intending to help the older person or depriving them of a basic need (Scaer, 2014).

Emotional or psychological abuse involves inflicting mental pain, anguish, or distress on an elder person through verbal acts or nonverbal acts. Verbal acts may include name-calling and intimidation (threats of isolation or placement in a nursing home) and nonverbal acts such as humiliation, i.e., being treated as a child (Neuhart & Carney, 2020). Sexual abuse, which involves non-consensual sexual contact of any kind, has been expounded to include inappropriate touching, photographing the person in suggestive poses, forcing the person to look at pornography, forcing sexual contact with a third party, or any unwanted sexual behavior such as rape, sodomy, or coerced nudity (Ringrose *et al.*, 2021).

Financial abuse or exploitation involves the misuse of an older or vulnerable person's funds or property through fraud, trickery, theft, or force, including frauds, swindles, misuse of money or property, convincing an older person to buy a product at give away money, stealing money or possession, misusing bank or credit cards, misusing joint bank accounts, forcing a signature on pension checks or legal documents, and misusing a power of attorney, amongst others, and abandonment, which is the desertion of a vulnerable elder by anyone who has assumed the responsibility for care or custody of that person (Hansen *et al.*, 2016).

According to James (2019), older adult neglect can be either physical or emotional and may consist of confinement, isolation, or denial of essential services. In this context, a case of neglect is established when a caregiver refuses or fails to provide or pay for the necessities of life, such as food, water, shelter, clothing, healthcare, medicine, comfort, and safety. Abandonment also comes under neglect, and the authors also observed that elders can also neglect themselves by not caring about their own health and safety. Elders self-neglect can lead to illness or injury, and it may take the form of denying themselves or ignoring the need for food or water, bathing or personal hygiene, proper clothing for the weather, shelter, adequate safety, and clean surroundings (Dyer *et al.*, 2021). And this is the same even in North America.

It has been observed that the number and percentage of individuals who are sixty-five years old and older have increased in the American society with a corresponding incidence of elder abuse (Losina *et al.*, 2012). This author stated that the prevalence and nature of this growing problem have generally remained hidden from public view. Yon et al. (2017) observe that elder maltreatment is a recognized social problem of uncertain, though probably increasing magnitude.

However, it is disheartening to note that research reports on the incidence and prevalence of elder abuse in Nigeria as a whole are scanty, if not entirely nonexistent (Agunbaide & Akinyemi, 2017). These authors noted that this dearth of statistics on elder abuse is worrisome because it is observed that the prevalence of this phenomenon is real and is becoming more of a scourged and pervasive than ever. Moreover, this scarcity of research reports on elder abuse may be attributable to the fact that most cases are not reported and most researchers are not interested in studying this stratum of society, i.e., the elderly (Luoma *et al.*, 2011). On how pervasive this problem has been observed to be, it could be asserted that even the government has ignorantly contributed to the neglect of the elderly, considering the ordeal of aged pensioners in Nigeria: some of them sometimes die in the process of collecting their pensions and gratuity, benefits they had toiled for many years in government service to earn (Omotayo, 2015). It is therefore imperative that awareness be created on this sensitive topic to provide information that is lacking to researchers, as well as a framework for the formulation of policies by the government geared towards making life worthwhile in old age (Coghlan, 2019).

2.1.5 Factors Contributing to Older Adults Abuse

Numerous factors has been identified as contributing factors to the abuse of the older adults including economic impediments to the care of the elderly, socio-cultural impediments to care of the elderly to mention but a few. Studying each abuse type separately does have limitations, however, as evidence suggests that older adults often experience poly-victimization, that is, more than one type of abuse simultaneously (Williams *et al.*, 2020). Thus, victims of financial abuse are also frequently victimized in other ways, and research by Teaster and Roberto (2021) found unique risk factors (i.e., co-dependency) associated with financial abuse co-occurring with other types. The research studied financial abuse co-occurring with physical abuse and/or neglect but did not examine it in relation to other types

of abuse (e.g. psychological, the most prevalent elderly abuse type). Research has rarely addressed poly victimization, so there is limited updated knowledge about these potential differences.

Older adult abuse is also diverse in terms of relationship patterns, although most perpetrators are related to their victims as their adult children or partners (Henrekohl *et al.*, 2022). There are studies supporting differences in terms of the types of elder abuse perpetrated, based on the type of relationship between victim and perpetrator. Jackson and Hafemeister (2015) compared perpetrators that related to the victim (child, grandchild, spouse, and other relatives) to those not related perpetrators (professional caretakers, friends, neighbors, and strangers) and found that, while financial abuse was more likely to be perpetrated by non-relatives, financial abuse co-occurring with neglect or physical abuse was more likely to be perpetrated by relatives. More recently, Fraga Dominguez *et al.* (2022) similarly found that family members were more likely to engage in poly victimization as compared to nonrelative perpetrators.

Fraga Dominguez *et al.* (2022) noted that within a discussion of elder abuse prevention and intervention are victim vulnerability and perpetrator risk factors, particularly those that are dynamic (i.e., those that can be changed through intervention). Victim vulnerability factors are those that place an older adult at greater risk of abuse, and perpetrator risk factors are those that increase the risk of an individual perpetrating abuse (Storey, 2020).

Notwithstanding the diversity of forms of abuse, abusive behaviours, and the suggestion that financial abuse may be a distinct type, elder abuse has been traditionally studied in a wholistic form (Dong, 2015). This one-size-fits-all approach was criticized by Collins (2015), who attributes some of the inconsistency of findings in the field of elder abuse to the lack of acknowledgment of different dynamics and risk factors depending on the forms of abuse. T.

Collins (2015) opined that although there have been some efforts to study each form of abuse separately and, within that, evidence that financial abuse may diverge from other types, empirical evidence for risk factors of specific subtypes of elderly abuse has been limited.

Harries et al. (2014) postulated that to develop effective ways of identifying and managing cases of financial elder abuse, it must be understood whether certain risk factors (e.g. financial dependency) are more likely to be present in financial elder abuse only cases as opposed to other elder abuse types or cases where financial abuse is perpetrated along with other abuse types (i.e., poly-victimization). Postmus et al. (2020) in the Analysis of Australian and International Literature identified the following as key findings on economic or financial abuse of the elderly:

DaLiema and Conrad (2017) stated that economic or financial abuse of the elderly was often defined as the exploitation of the older person's resources, usually by someone in a position of trust, and the most common tactics of economic and financial abuse include misusing, exploiting, or stealing the older person's money, property, or assets, and/or coercing and pressuring the older person to sign legal documents regarding financial or property arrangements. There is empirical evidence for traditionally gendered financial management to facilitate economic and financial abuse against older persons (Schatz & Seeley, 2015).

Kanougiya et al. (2021) postulated that economic and financial abuse co-occurred with other forms of abuse, including physical, psychological, emotional, and verbal abuse, neglects, threats, and controlling behaviour. The author emphasized that there is evidence that postulates that economic and financial abuse can cause financial hardship and have futuristic consequences for victim survivors' economic security, including their employment securities. Kanougiya et al. (2021) further opined that there are a range of factors that can contribute to economic and financial abuse, and they include socio-demographic factors, e.g., language

barriers, being female, indigenous status, or living in a rural or remote area. Carne (2018) stated that relationship factors e.g. being divorced or separated, having spent less than thirty years with partner, dynamics of trust and dependence, and having a business or business relationship with the perpetrator.

Social factors, e.g., pressure to provide financial assistance to family members and being cared for by the family that lacks support networks or access to services (Fegert *et al.*, 2020).; Health factors like needing assistance with activities of daily living, having a disability, having diminished capacity, and having significant others with mental health or substance abuse issues (Knapen *et al.*, 2015); Attitudinal factors like having family members who express sense of entitlements to the older person's assets (Gorman 2017); History of abuse factors, e.g., having a family member with a history of perpetuating abuses, being frightened of a family member, being a victim of abuse by a family member, and having a history of always perpetrating abuse against one's children (Barnett *et al.*, 2010). cultural factors like cultural expectations like donating money, cultural norms that emphasize family harmony and collectivism, cultural beliefs and customs associated with the assets of older persons, cultural attitude towards older people, and aging (Chen & Lou, 2024).

Structural factors include, but are not limited to, awareness of financial abuse among service provision for older people, poor communication and collaboration between services, and inadequate legislation on financial abuse of older people (Pillemer *et al.*, 2016); Other factors include lack of access to transport services, inadequate financial support and awareness of rights and services, lack of access to one's own resources, having a family member who is poor or unemployed, and having a family member with a particular religious or spiritual belief (Schwarz *et al.*, 2022).

2.1.6 Impacts of abuse on the older Adults wellbeing

Abuse can lead to severe physical, emotional, and psychological consequences for older adults. According to Alraddadi (2022), individuals experiencing abuse often suffer from increased rates of mental health issues, such as depression and anxiety. Similarly, such individuals may experience physical health challenges such as injuries, chronic pain, and a decline in overall health (Bhagat & Htwe, 2018). It often leads to severe physical injuries, such as bruises, fractures, and, in extreme cases, death (Dong *et al.*, 2013; Lin & Giles, 2013; Sathya *et al.*, 2022). Victims may also experience increased vulnerability to chronic illnesses and exacerbation of existing health conditions due to neglect of medical care (WHO, 2018). Moreover, elder abuse can lead to social isolation as victims may withdraw from social interactions due to shame or fear of further abuse (Evandrou *et al.*, 2017; Paquet *et al.*, 2023). This isolation can exacerbate mental health issues and lead to a decrease in the quality of life (Kohn *et al.*, 2015; Lazenbatt & Devaney 2014). Barnes *et al.* (2022) found that elders who suffer from abuse and neglect often become socially isolated, losing connections with family and community. This isolation exacerbates feelings of loneliness and contributes to deteriorating mental health (Beller & Wagner, 2018; Lazenbatt & Devaney 2014). The psychological impact of abuse and neglect can be profound (Dong *et al.*, 2013; Evandrou *et al.*, 2017). Victims often experience depression, anxiety, and feelings of hopelessness (Lereya *et al.*, 2015; Lin & Giles, 2013). Alraddadi (2022) posited that social isolation, a common factor in cases of elder abuse, significantly correlates with increased rates of depression among seniors. Eventually, these consequences can result in a cycle of dependency and increased vulnerability among elderly individuals (Cooper *et al.*, 2008; Dyer *et al.*, 2021).

Similarly, the effect of abuse and neglect on the well-being of elderly individuals in Nigeria is a significant concern, affecting their physical, mental, and emotional health (Dyer *et al.*, 2021; Mohammed, 2018). Studies have shown that elder abuse can lead to various detrimental

outcomes, including increased morbidity, psychological distress, and a decline in the overall quality of life (Alraddadi, 2022; Orfila, *et al.*, 2018). Abuse and neglect diminish the overall quality of life for older adults (Yunus *et al.*, 2019). Those who experience abuse may withdraw from social interactions, leading to feelings of loneliness and diminishing self-worth (Barnes *et al.*, 2022; Biordi & Nicholson, 2013).

In a similar vein, Bhagat and Htwe, (2018) noted that elder abuse often results in physical injuries, neglect of medical care, and a decline in health status. Many elderly individuals experience untreated illnesses due to neglect, leading to worsened health conditions (Yon *et al.*, 2017). It often results in physical injuries, a decline in health, and increased mortality rates (Podnieks & Thomas 2017). Yeung *et al.* (2015) indicate that physical abuse can lead to long-lasting health complications, increasing the susceptibility of elderly individuals. Equally, experiencing abuse or neglect can lead to anxiety, depression, and a decline in cognitive functioning (Kohn *et al.*, 2015). Elderly victims may feel hopeless and isolated, impacting their mental well-being (Lazenbatt & Devaney 2014). The authors further noted that both can result in social withdrawal and isolation. Elders may become frightened of seeking help, leading to further loneliness and depression (Cacioppo & Cacioppo, 2014). Both abuse and neglect significantly diminish the quality of life for elderly individuals (Yunus *et al.*, 2019).

More so, they may experience decreased independence, self-esteem, and overall life satisfaction (Yeung *et al.*, 2015). Neglect and abuse cause considerable mental distress, leading to depression, anxiety, and in extreme cases, suicidal ideation (Kołodziej-Sarzyńska *et al.*, 2019). Kohn *et al.* (2015) highlighted that elderly individuals experiencing abuse display higher rates of depressive symptoms and cognitive decline. Economic abuse is a common form of mistreatment in which elders face financial exploitation (Dias *et al.*, 2022; Yeung *et al.*, 2015). This leads to decreased access to healthcare and basic needs, further

entrenching them in poverty (Postmus, *et al.*, 2020). Financial abuse can lead to a significant loss of resources, which directly impacts the well-being of older individuals by limiting access to necessary healthcare, housing, and nutrition (Omotayo, 2015). Cultural attitudes towards aging and elders in some Sub-Saharan African societies may contribute to the prevalence of neglect and abuse, impacting the recognition and reporting of such incidents (Luoma, *et al.*, 2011). Traditional beliefs can sometimes devalue the importance of elderly individuals, leading to neglect (Evandrou *et al.*, 2017). Victims of elder abuse are more likely to be hospitalised, which increases healthcare costs and can strain healthcare systems (Barnes *et al.*, 2022; Lereya *et al.*, 2015).

2.1.7 Awareness and Perception of Older Adults Abuse

There has been an increase in awareness campaigns in most ideal societies of the world, aimed at educating the public about elder abuse and neglect (Corbi *et al.*, 2019; Kalayci *et al.*, 2016). Kahraman *et al.*, (2021) pointed out that while awareness has risen, many individuals still hold misconceptions about what constitutes elder abuse. Education initiatives targeting both the general public and professionals who work with older adults have been shown to improve recognition and reporting of abuse (Cadmus, 2020; Taylor *et al.*, 2014). Perception of elder abuse varies significantly across different cultures and communities within nations of the world (Rinker 2019). Aday *et al.* (2017) emphasized that societal attitudes toward aging and elder care influence how abuse is perceived and addressed. Negative stereotypes regarding aging can contribute to underreporting and stigma surrounding elder abuse (Ahmed *et al.*, 2016; Bayrak Kahraman *et al.*, 2021). Ojifinni *et al.* (2023) found that despite increased awareness, reporting rates of elder abuse remain low. The author noted that fear of retaliation, lack of knowledge regarding how to report, and a belief that nothing will be done are significant barriers. Many older adults may feel shame or embarrassment about their

situations, impacting their willingness to seek help (Naughton, *et al.*, 2014; Mydin *et al.*, 2021).

Similarly, Myhre, *et al.* (2020) indicate that healthcare providers play a crucial role in recognizing and reporting elder abuse. However, many healthcare professionals feel inadequately trained to identify signs of abuse, which hampers their ability to intervene effectively (Cadmus *et al.*, 2015). Kahraman *et al.* (2021) advocated for training programmes focused on elder abuse recognition to enhance awareness and improve responses. The implementation of laws and policies aimed at protecting older adults has raised awareness of elder abuse (Taylor *et al.*, 2014). However, gaps persist in policy enforcement and resource allocation, impacting the perception of the seriousness of the issue (Oluoha *et al.*, 2017). Thus, in many traditional African societies, elders are typically revered and respected due to their roles in preserving cultural heritage (Yunus *et al.*, 2019).

However, the growing influence of modernization, economic challenges, and familial shifts can lead to a deterioration of respect, resulting in neglect and abuse (Dias *et al.*, 2022; Rinker 2019). Awareness of what constitutes elder abuse varies significantly across communities. Many societies may not recognise neglect or financial exploitation as forms of abuse, as these issues can be deeply embedded in cultural practices and familial obligations (Agunbiade 2019; Bayrak Kahraman *et al.*, 2021). For instance, reliance on extended families can sometimes mask abusive behaviours as families may prioritise caregiving over individual rights. Furthermore, Ebimgbo (2017) maintains that poverty significantly affects the perception and occurrence of elder neglect and exploitation. Economic hardships can strain familial relationships and make it difficult for caregivers to provide adequate care, leading to situations where neglect is normalized rather than recognised as abuse (Yeung *et al.*, 2015).

There is often a stigma associated with reporting elder abuse in traditional communities (Akpan & Umobong, 2013; Kahraman *et al.*, 2021).

Fear of familial repercussions or social ostracization may prevent individuals from speaking out (Aday *et al.*, 2017). Many communities prioritise family honour and social cohesion, which can discourage acknowledgment of negative behaviours (Ekoh *et al.*, 2022). Kalayci *et al.* (2016) reported that increasing awareness through community education programmes can help reshape perceptions of elder abuse and neglect. The authors maintain that such initiatives may promote a deeper understanding of the rights of elderly individuals and encourage more respectful caregiving practices. In many Sub-Saharan African communities, traditional beliefs often shape perceptions of aging and the treatment of older adults (Ramsey-Soroghaye *et al.*, 2023). There is a stigma associated with discussing elder abuse, which can lead to underreporting and a lack of awareness about what constitutes abuse (Akpan & Umobong, 2013; Kahraman *et al.*, 2021).

Public understanding of elder abuse and neglect is generally low, as many elders and their families may not recognise certain forms of mistreatment as abuse (Naughton, *et al.*, 2014; Mydin *et al.*, 2021). Many perceive neglect as an inevitable aspect of aging rather than a significant social issue (Dong *et al.*, 2013). Economic challenges faced by families often exacerbate neglect and abuse of elderly individuals. High levels of poverty can lead to increased stress for caregivers, contributing to abusive situations or neglect (Kohn *et al.*, 2015). Gender roles within families can affect perceptions of elder abuse. Women, who often take on caregiving roles, may experience additional pressures that lead to neglect or abuse of the elderly, whether intentionally or inadvertently (Taylor *et al.*, 2014). Many countries in Sub-Saharan Africa lack comprehensive legal protections for the elderly (Fakir, 2021). The author

noted that such absence can contribute to a perception that elder abuse is not taken seriously by authorities, discouraging victims and their families from seeking help.

Many Nigerians hold traditional beliefs about the roles of the elderly, which can sometimes lead to underreporting of abuse (Ojifinni, *et al.*, 2023). The cultural stigma associated with discussing elder abuse often prevents victims from seeking help (Ahmed *et al.*, 2016). There is a growing recognition of elder abuse in Nigeria, particularly through community awareness campaigns (Ramsey-Soroghaye *et al.*, 2023). Kahraman *et al.* (2021) posited that increased education about elder rights and signs of abuse can enhance public awareness and encourage reporting. Similarly, healthcare professionals and social workers play a crucial role in identifying and addressing elder abuse (Yeung *et al.*, 2015). However, Cadmus *et al.*, (2015) pointed out that many professionals lack adequate training to recognise and respond to cases of elder abuse effectively. The perception of elder abuse is often clouded by denial and the stigma surrounding the issue (Corbi *et al.*, 2019; Oluoha *et al.*, 2017). Many individuals may perceive elder abuse as a private family matter rather than a public concern, which complicates interventions (Ebimngbo *et al.*, 2018).

In many parts of Eastern Nigeria, there is a strong cultural emphasis on familial piety, which generally protects older adults (Akpan & Umobong, 2013). However, incidences of abuse still occur, often hidden due to the stigma and shame associated with reporting such behaviors (Oluoha, *et al.*, 2017). Ojifinni *et al.*, (2023) found that awareness of elder abuse among community members, healthcare providers, and social workers remains low. The authors maintain that many individuals do not recognize certain behaviours as abuse due to cultural perceptions that prioritise family honour and caregiving responsibilities. Ekoh *et al.* (2022) identified factors contributing to underreporting including fear of retaliation, lack of trust in authorities, and a belief that such issues should be handled privately within the family. These

barriers are compounded by a lack of formal channels for reporting abuse (Agunbiade 2019). Myhre, et al. (2020) opined that increased education and advocacy efforts are critical in raising awareness about elder abuse and neglect. More so, community-based programmes that engage local leaders and elders have shown promise in changing perceptions and encouraging reporting (Ahmed *et al.*, 2016; Rinker 2019).

2.1.8 Roles of Social Workers in Ameliorating Abuse among Older Adults

According to Drolet and Choudhury (2024), social workers play a crucial role in supporting the elderly population by addressing various challenges the elderly may face in accessing care and services, and one of the ways they accomplish this is through advocacy. Advocacy is one of those practice roles that distinguishes social workers from other helping professions (Stefani 2023). The author opined that most social workers do some sort of advocacy in their work, whether at the individual or institutional level. Ashforth and Reingen (2014) lamented that "the role of the advocate seems to be practically synonymous with almost all social work roles, and one area of confusion regarding advocacy in social work practice is that it is frequently thought of on two levels: namely, case advocacy and cause advocacy. Case advocacy, on the one hand, operates at the micro-level and involves helping clients who are unable to make successful connections to necessary resources (Lee *et al.*, 2013). The author stated that advocacy means that social workers collaborate with clients to influence the way other systems respond to a client's attempts to gather resources." Cause advocacy, on the other hand, operates at the macro-level, involving the partnership of the vulnerable or disenfranchised groups of clients with social workers, who recognize the public issues inherent in personal problems (Renau 2021). Hurley and Taiwo (2019) attempted to bridge these dichotomous meanings of advocacy in order to provide a framework that might be more useful to the social work practitioners.

Advocacy also connotes attempts, having greater than zero probability of success, by an individual or group to influence another individual or group to make a decision that would not have been made otherwise and that concerns the welfare or interests of a third party who is in a less powerful status than the decision maker (Senreich 2013). According to this author, advocacy can take place at the individual, administrative, or policy level, and chosen strategies will depend on one's relationship to the decision-maker and decision-making structure. Nearly 20 years later, Keller & DeVecchio (2019) revisit this problem of describing what has been referred to by some students of the issue as a "conceptual disaster." The author stated that they have also attempted to distil a definition of advocacy that is both clear and comprehensive. They suggest that "social work advocacy is the exclusive and mutual representation of a client(s) or a cause in a forum/forum attempting to systematically influence decision-making in an unjust or unresponsive system (Stefani 2023). This assertion emphasizes the need for the definition of advocacy to focus on activities rather than roles. He defines advocacy as "those purposeful efforts to change specific existing or proposed policies or practices on behalf of or with a specific client or group of clients, and the emphasis of this definition is on the purposeful change of policies and practices as they relate to clients.

Beckett & Horner (2015) stated that in order to better understand what advocacy is, it is pertinent to look at how it differs from other social work activities with which it is closely associated and sometimes confused. The authors stated that while brokering may help an elder get needed services, it is advocacy that comes into play when the brokering is ineffective. The difference between advocacy and social reform lies mostly in scale: "while the reformer's vision is primarily a large vision about correcting a societal ill, the advocate's perspective will be highly focused on clients' identifiable needs" (Alen *et al.*, 2017).

One might ask if advocating for older clients takes a different form for social workers practicing in rural areas. Interestingly, a study comparing urban and rural social work practice found few differences between the two groups of respondents with regards to emphasis on the various practice roles, including advocacy (Chapin & Lewis, 2023). Nonetheless, it is likely that the issues for which rural geriatric social workers must advocate are affected by the special conditions found in non-metropolitan areas (Kaye & Butler, 2012).

Research on aging in rural areas over the past decades revealed that services are neither sufficiently available nor accessible to meet the needs of rural elders. For example, rural elders generally have access to a smaller number of community-based services than do urban elders; gaps exist in the continuum of care in rural communities; and service delivery models are rarely designed specifically for rural areas (Anderson *et al.*, 2018). Moreover, there is a higher rate of poverty among rural elders than among most of their urban counterparts, and some researchers have found rural elders to have more functional health limitations and a greater number of medical conditions than do non-rural elders (Cohen & Greaney, 2023). Lack of transportation is one key issue faced by rural practitioners working with older adults. According to the 1990 census, 45% of the rural elderly and 57% of the rural poor had no car (Burkhardt, 2001). Many rural areas have no public transportation whatsoever; hence, making trips to the grocery store and medical appointments is difficult, not to mention outings for social interaction. Some of the key roles of social workers in this context include, but are not limited to;

- Advocacy: Social workers advocate for the rights and needs of the elderly, ensuring they receive appropriate care and support (Cox & Pardasani, 2017).
- Assessment: Social workers conduct comprehensive assessments to identify the specific needs and challenges of elderly individuals, thereby allowing for tailored care plans to be developed (Hohenberg *et al.*, 2021).

- Care coordination: Social workers help coordinate care services for the elderly by ensuring that they receive the necessary support from healthcare providers, community resources, and family members (World Health Organization, 2018).
- Counseling: Social workers provide emotional support and counseling to elderly individuals and their families, helping them cope with the challenges of aging and caregiving (Greene 2017).
- Resource navigation: Social workers help elderly individuals navigate complex healthcare and social service systems, connecting them with resources and support services that meet their needs (Miller *et al.*, 2021).

Similarly, He *et al.* (2022) opined that social workers play numerous roles in curbing elder abuse through various interventions and support services. Some of these key roles include:

- Prevention: Social workers work to prevent elder abuse by raising awareness about the signs and risk factors of abuse, educating older adults and their families about their rights, and providing healthy relationships within families and communities (Storey 2020).
- Intervention: Social workers intervene in cases of suspected or reported elder abuse by conducting assessments, providing crisis intervention, and developing safety plans to protect older adults from further harm (Bennett & Kingston, 2013). The authors pointed out that social workers also collaborate with law enforcement, healthcare professionals, and other agencies to ensure the safety and well-being of older adults.
- Advocacy: Social workers advocate for the rights of older adults who have experienced abuse and help them access legal assistance, healthcare services, and other resources to address their needs. They also advocate for policy changes and systemic reforms to improve the response to elder abuse at the community and societal levels (Williams & Field, 2021).

- Support: Social workers provide emotional support, counseling, and case management services to older adults who have experienced abuse, helping them cope with the trauma and navigate the challenges of seeking help and justice (Goldblatt *et al.*, 2018).

He *et al.* (2022) concluded that social workers play a vital role in identifying, preventing, and addressing elder abuse, working collaboratively with older adults, families, communities, and other professionals to promote the safety, dignity, and well-being of older individuals. In creating awareness against elder abuse, social workers carry out numerous roles through various strategies and interventions. Pillemer *et al.* (2016) stated some ways in which social workers can raise awareness about elder abuse; they include but are not limited to;

- Education and Training: Social workers conduct training sessions and workshops for older adults, caregivers, healthcare professionals, and community members to educate them about the signs of elder abuse, its impact, and how to prevent it (Wolff *et al.*, 2020).
- Advocacy: Social workers advocate for policies and programs that protect the rights of older adults and prevent elder abuse. They work with government agencies, non-profit organizations, and community groups to raise awareness and promote change (Cox & Pardasani, 2017).
- Outreach and Community Engagement: Social workers engage with local communities through outreach programs, public awareness campaigns, and community events to spread information about elder abuse and available resources for support (Kimbrugh-Melton & Melon, 2015).
- Support Services: Social workers provide counseling, support groups, and case management services to older adults who have experienced abuse or are at risk of abuse. By offering emotional support and practical assistance, social workers

empower older adults to seek help and protect themselves from further harm (Goldblatt *et al.*, 2018).

Pillemer *et al.* (2016), social workers play a vital role in creating awareness against elder abuse by educating the public, advocating for policy changes, engaging with communities, and providing support services to older adults in need. Their efforts contribute to a safer and more supportive environment for older individuals. In creating social support for the elderly, social workers provide a range of services and interventions tailored to meet the unique needs of older individuals. According to Paquet *et al.* (2023), some ways in which social workers create social support for the elderly include:

- **Assessment and Care Planning:** Social workers conduct comprehensive assessments to identify the social, emotional, and physical needs of elderly clients. Based on these assessments, social workers develop individualized care plans that outline specific goals and interventions to address the identified needs (O'Hare 2020).
- **Linking to Resources:** Social workers connect elderly clients to community resources, such as senior centers, support groups, healthcare services, and financial assistance programs. By linking clients to these resources, social workers help older individuals access the support and services they need to enhance their well-being (Anderson *et al.*, 2018).
- **Counseling and Emotional Support:** Social workers provide counseling and emotional support to elderly clients to help them cope with challenges such as loneliness, grief, or health issues. By offering a listening ear and guidance, social workers help older individuals navigate difficult emotions and situations (Rowlings 2024).
- **Advocacy:** Social workers advocate on behalf of elderly clients to ensure that their rights are protected and their needs are met. This may involve advocating for

improved access to healthcare, social services, or housing options for older individuals (Williams & Field, 2021).

- **Education and Empowerment:** Social workers educate elderly clients about their rights, available resources, and self-care strategies. By empowering older individuals with knowledge and skills, social workers help them make informed decisions and take control of their own well-being (Lommi *et al.*, 2015).

Pacquet *et al.* (2023) opined that social workers play vital roles in creating social support for the elderly by providing personalized care, linking clients to resources, offering emotional support, advocating for their rights, and empowering them to lead fulfilling lives in their later years.

2.1.9 Coping mechanisms of the older adults in response to abuse

Globally, social support for the elderly varies according to cultural norms, societal structures, and government policies. Agunbiade (2019) noted that elderly individuals who experience abuse or neglect often employ various coping strategies to deal with the emotional and physical consequences of such mistreatment. The author opined that some common coping mechanisms identified in the literature include, but are not limited to, seeking social support, engaging in problem-solving strategies, practicing relaxation techniques, and utilizing cognitive reframing to reinterpret the situation in a more positive light. Additionally, Ebimngbo *et al.* (2022) highlighted the importance of access to professional services and interventions tailored to the specific needs of elderly individuals facing abuse or neglect. It is essential to consider the unique challenges faced by elderly individuals in these situations and to provide them with appropriate support and resources to help them cope effectively. Some common sources of social support for the elderly across different countries include:

- **Family:** Family members often play a crucial role in providing social support to the elderly by offering emotional, financial, and physical assistance (Akinrolie *et al.*,2020). In many cultures, it is expected that children will care for their aging parents or grandparents.
- **Community networks:** Community organizations, neighbourhood groups, and religious institutions can provide social support to the elderly through social activities, companionship, and practical help (Ekoh *et al.*, 2020).
- **Social programs and services:** Many countries have implemented social welfare programs, healthcare services, and pension benefits to support the elderly population, with such programs aiming to ensure that older individuals have access to essential resources and services to maintain their well-being (Tanyi *et al.*, 2018).
- **Non-profit organizations:** Non-profit organizations (NGOs) and charities dedicated to the elderly often offer support services such as meal delivery, transportation assistance, and social activities to combat social isolation (Prosper 2022).
- **Technology:** In recent years, technology has played an increasing role in providing social support to the elderly through virtual communication platforms, health services and assistive devices that help older individuals stay connected and independent (Wang *et al.*, 2024). Social support for the elderly globally is a combination of informal networks, community resources, government interventions and technological advancements, all working together to address the unique needs and challenges faced by older individuals in different parts of the world (Gorman *et al.*, 2017).

In Sub-Saharan Africa, social support for the elderly is often provided through a combination of traditional family structures, community networks, religious organizations, and government programs (Aboderin 2017). Aboderin (2017) postulates that family plays a central role in providing social support to the elderly in many Sub-Saharan African countries,

with older individuals typically relying on their children, extended family members, and kinship networks for emotional, financial, and physical assistance. In some cultures, there are strong traditions of intergenerational care and support, where older family members are respected and cared for by younger generations. Bennett et al. (2015) stated that community networks, such as neighbourhood associations, village councils, and informal support groups, also play a crucial role in providing social support to the elderly in Sub-Saharan Africa. These networks offer companionship, practical help, and a sense of belonging to older individuals, which help to reduce social isolation and loneliness.

Nzima and Maharaj (2020) postulated that religious organizations are another important source of social support for the elderly in Sub-Saharan Africa because they provide spiritual guidance, community activities, and charitable initiatives that benefit older individuals. Additionally, some governments in the region have implemented social welfare programs, healthcare services, and pension schemes to support the elderly population. Social support for the elderly in Sub-Saharan Africa is a complex and multifaceted system that draws on traditional, community-based, religious, and governmental resources to ensure the well-being of and dignity of older individuals in the region (Fakir 2021).

In Nigeria, social support for the elderly often comes from various sources, including but not limited to family members, community networks, religious organizations, and government programs (Ebimgbo *et al.*, 2018). The family plays a significant role in providing social support to the elderly in Nigeria, with many older individuals relying on their children or extended family members for emotional, financial, and physical assistance. Community networks, such as neighbourhood associations or traditional support systems, also play a crucial role in providing social support to the elderly by offering companionship, practical help, and a sense of belonging (Wellman & Gulia, 2018). These authors emphasized that

some religious organizations in Nigeria often provide social support to the elderly through spiritual guidance, community activities, and charitable initiatives. The government of Nigeria has yet to implement programs and policies aimed at supporting the older adult population, such as social security schemes, healthcare services, and pension benefits (Odeyemi, 2014). Generally, social support for the elderly is a combination of informal networks, community resources, religious institutions, and government interventions, all working together to ensure the well-being and quality of life of older individuals in the country (Chan *et al.*, 2017).

In Edo State, Nigeria, social support for the older adults is similar to the broader Nigerian context but may also have some unique characteristics specific to the region (Prosper 2022). Prosper (2022) emphasized that social support for the elderly in Edo State often comes from family members, community networks, religious organizations, and government programs. Family plays a crucial role in providing social support to the elderly, with many older individuals relying on their children, extended family members, or caregivers for emotional, financial, and physical assistance (Qualls 2016). Community networks, such as local associations or traditional support systems, also play a significant role in providing social support to the elderly by offering companionship, practical help, and a sense of community (Okah *et al.*, 2024). The author opined that religious organizations provide social support to the elderly through spiritual guidance, community activities, and charitable initiatives. Additionally, the author opined that the government may have to implement specific programs and policies aimed at supporting the elderly population, such as social security schemes, healthcare services, and pension benefits tailored to the needs of older individuals in society.

Social support for the older adults is a combination of informal networks, community resources, religious institutions, and government interventions, all working together to ensure the well-being and quality of life of older individuals (Gallardo-Peralta *et al.*, 2018). The advantages of social support for the elderly are numerous and significant. Some key benefits include:

- Emotional well-being: Social support provides companionship, reduces feelings of loneliness and isolation, and promotes a sense of belonging and connectedness, which can contribute to improved emotional well-being and mental health (Brunsting *et al.*, 2021).
- Physical health: Studies have shown that social support can have a positive impact on physical health outcomes for the elderly, such as lower rates of chronic diseases, better immune function, and faster recovery from illnesses (Yang & D'Arcy, 2022).
- Cognitive function: Social engagement and support have been linked to better cognitive function and a reduced risk of cognitive decline in older adults (Ishola 2021).
- Increased resilience: Having a strong social support network can help the elderly cope with stress, adversity, and life challenges, leading to increased resilience and better overall coping mechanisms (Shaw *et al.*, 2014).
- Improved quality of life: Social support can enhance the quality of life for the elderly by providing opportunities for social interaction, participation in meaningful activities, and access to resources and services that promote well-being (Omosefe & Mukhtar, 2023).

Generally, social support plays a crucial role in promoting the health, well-being, and overall quality of life of the elderly population (Shin & Park, 2022). In the author's opinion, it is essential for older individuals to have access to social connections and support systems to

help them navigate the challenges of aging and maintain a fulfilling and meaningful life. While family social support for the elderly can be beneficial in many ways, there are also potential disadvantages associated with relying solely on family members for support (Taylor 2011). Some of the disadvantages include:

- **Dependency:** Elderly individuals who rely heavily on family members for social support may become overly dependent on them, leading to a loss of respect, independence, and autonomy (Silverstein & Giarrusso, 2010).
- **Conflict:** Family dynamics can sometimes lead to conflicts or disagreements, which may negatively impact the quality of social support provided to the elderly (Kossek *et al.*, 2011).
- **Caregiver Burnout:** Family members who serve as primary caregivers for the elderly may experience caregiver burnout, resulting in physical, emotional, and financial strain (Schulz *et al.*, 2020).
- **Limited Resources:** Family members may have limited resources or time to provide adequate social support to the elderly, especially if they are burdened with multiple responsibilities such as work and childcare (Ebimgbo *et al.*, 2022).
- **Isolation:** In some cases, elderly individuals may feel isolated or neglected if their family members are unable to provide consistent or meaningful social support (Imudia & Ukponahiusi, 2023).

It is essential to recognize these potential disadvantages and consider alternative sources of social support, such as community networks, support groups, and professional services, to ensure the well-being and quality of life of the elderly population.



Source: Institute of Medicine, (2014)

Abuse Intervention Model (AIM)

Vulnerability, defined as financial, physical or emotional dependence on others or impaired capacity for self-care or self-protection, places older adults at risk of mistreatment. The personal characteristics that increase older adults' vulnerability to mistreatment include dependence on others for care and being perceived as difficult to care for or to be around. Impaired physical function: Impairments in physical function (e.g., osteoarthritis with mobility limitation, stroke with paralysis) can reduce one's ability to perform basic and instrumental Activities of Daily Living (ADL) Impaired cognition:

Impairments in cognition (e.g., dementia, mild cognitive impairment, intellectual disability) can limit performance of ADLs, and cause impairment in executive function. Such impairments may predispose the elder to behaviors that make caregiving difficult and result in poor judgment and lack of insight that enables financial exploitation to occur. Emotional distress and/or mental illness: Emotional distress and/or mental illness (e.g., depression or personality traits such as narcissism) may make caregiving difficult. Such impairments can also lead to emotional dependence that others may resent or exploit. Institute of Medicine, (2014)

2.2 Empirical Review

Egharevba (2023), study assess the social well-being of the elderly in Ovia North-East Local Government Area, Edo State. The study addresses an important and timely issue, considering the growing elderly population globally. The study covers various aspects of social support for the elderly, including family support, informal caregivers, neglect, and causes of neglect. The study provides valuable insights into the social support mechanisms in place for the elderly and their impact on well-being. The recommendations provided are practical and actionable, emphasizing the need for a proactive approach to elderly welfare. It would be beneficial to know more about the sample size and demographics of the participants for a better understanding of the generalizability of the findings (Egharevba, 2023). Details about the research methodology, such as data collection methods and analysis techniques, would enhance the study's credibility. It would be helpful to acknowledge any limitations of the study, such as potential biases or constraints faced during the research process. Suggesting avenues for future research could add depth to the study, such as exploring the impact of specific interventions on elderly well-being (Egharevba, 2023). The study contributes significantly to the understanding of social well-being among the elderly population in the specified region. By highlighting the importance of both formal and informal social support systems, it offers practical implications for policymakers and stakeholders involved in elderly

welfare. Strengthening the study with more methodological details and acknowledging limitations would further enhance its credibility and value to the field.

Osunde and Egharevba (2022), study's focus on family members providing social support for the elderly in Ovia North-East Local Government Area is valuable and relevant. The choice of research design and methodological triangulation demonstrates a thoughtful approach to exploring the complexities of social support and its impact on elderly well-being. Strengthening the study with clearer objectives, detailed methodologies, and ethical considerations would further enhance its academic rigor and practical relevance (Osunde, 2022).

Ivana and oldrich (2024), the study focuses on Family as a Source of Social Support for Older Adults. The study addresses a specific research question regarding the role of family as a source of social support for older adults facing limitations in self-sufficiency, providing a focused approach to the investigation. The use of social support theory as the theoretical framework enhances the study's conceptual foundation and helps interpret the findings effectively. Employing qualitative content analysis on semi-structured interviews allows for in-depth exploration of older adults' perspectives, providing rich insights into their experiences and preferences (Ivana et al. 2024). The study offers valuable insights for social workers by enhancing their understanding of the challenges faced by older adults and the types of social support they prefer, thus highlighting the importance of gerontological social work. Providing information on the demographic characteristics of the participants and details on how they were selected would enhance the study's transparency and allow for better understanding of the findings' generalizability (Ivana et al. 2024). Describing the data collection process, including interviewer training, data analysis procedures, and measures taken to ensure data validity and reliability, would strengthen the study's methodological

rigor. Acknowledging any limitations of the study, such as potential biases or constraints, and suggesting directions for future research based on the study's findings would add depth to the discussion (Ivana et al. 2024).

The population aged 65 and over in some parts of Europe in 2011 accounted for 19.4% of the total population, an increase on previous years since in 1960 it corresponded to 8% and in 2001 to 16% (Sidlo *et al.*, 2020). The author opined that aging population is undoubtedly a very disturbing demographic phenomenon in modern societies of the 21st century, caused by the imbalances between the different age groups of the population pyramid. Based on the data of the Portuguese Association for Victim Support, the victim sociography most commonly found corresponds to a woman between 65 and 75 years old, retired, residing in urban areas, and with some social isolation (Martins *et al.*, 2014). The authors emphasized that as to the aggressor; it corresponds to the spouse or children, male between 35 and 45 years old, living in situations of stress along the typology of violence towards the elderly.

Abused once was 14.3%, twice was 5.7% seven times, and only 10 elderly were said to have never been abused (Elbially *et al.*, 2023). In the authors' findings regarding neglect, 65.7% were neglected once, 2.9% twice, 5.7% four times, and 25.7% claimed never to have been overlooked. Regarding financial abuse, 80.0% claimed to have suffered, 17.1% was abused once, and 2.9% was abused twice. With regard to qualifications, we found that 54.3% had primary education, 43.3% are illiterate or can barely read and write, and 11.4% have secondary education. Martins et al. (2014) found that the illiterates and those who only know how to read and write suffer more abuse and that the low educational attainment provides essentially physical, emotional, and total abuse (aggregate score). Results are similar to those of Shankardass and Rajan (2018), where 47.7% of the elderly had primary education and 10.9% were illiterate, with these also being the ones abused the most.

Another aspect of the study is that older people who feel lonely are those who perceive more abuse of the emotional and physical type, as well as total abuse with statistical significance (Salminen-Tuomaala *et al.*, 2024). The authors cited that there are studies that corroborate these findings, in particular the one by Chaves *et al.*, which showed that elderly people who received no visits were more likely to be abused, making this an indicator of the risk of abuse. Most of our participants were considered fairly healthy, 14.3% said to be very unhealthy, and only a small group (8.6%) considers themselves very healthy (Martins *et al.*, 2014). The authors found that the least healthy elderly suffer more abuse at the physical level, unlike the healthier, which have higher values on the emotional, financial, and neglect aspects of abuse. Shin *et al.* (2018) found that, relative to family functioning, 14.3% of the elderly respondents show a marked dysfunction, 5.7% have a moderate dysfunction, and 80.0% are highly functional.

2.3 Theoretical Framework

Theories are organized frameworks that assist in explaining, understanding, and predicting phenomena across different disciplines. They offer a systematic approach to organizing and interpreting observations, data, and evidence. Theories fulfil several key functions, including clarifying concepts, allowing for predictions about future occurrences, and guiding research by establishing a basis for developing research questions, and study designs. They are valuable in various sectors, as they can inform the development of interventions, strategies, and policies aimed at addressing specific issues or improving outcomes.

Theories that will inform this study will be the social disengagement theory and the aging and attitude theory.

2.3.1 The Social Disengagement Theory

Social disengagement theory, developed by Cumming and Henry in 1961, posits that as people age, they naturally withdraw from social roles and responsibilities, and society simultaneously disengages from them (Ugiagbe, 2025). This process is seen as mutually beneficial, allowing older adults to relinquish demanding roles and prepare for eventual death, while also creating opportunities for younger generations to assume positions of power and responsibility (Ugiagbe, 2025). In the context of elder abuse in Etinan Local Government Area, Akwa-Ibom State, Nigeria, this theory provides a lens through which to understand how the social isolation and reduced social engagement of older adults can increase their vulnerability to abuse and neglect. The traditional family support systems in Nigeria are eroding due to modernization and urbanization, leaving older adults more susceptible to social isolation and economic dependence, factors that can contribute to elder abuse (Fratiglioni, 2000; Victor *et al*, 2000; Pennington, 1997).

The disengagement process can manifest in various ways that heighten the risk of elder abuse. As older individuals retire or become widowed, they may experience a loss of social connections and a decrease in their social support networks (Fratiglioni, 2000; Victor *et al*, 2000; Pennington, 1997). This isolation can make them more dependent on family members or caregivers, who may then exploit their vulnerability. For example, family members struggling with economic hardship may resort to financial exploitation of elderly relatives, or caregivers burdened by stress and lack of support may engage in neglect or emotional abuse. Furthermore, the societal devaluation of older adults, as suggested by disengagement theory, can lead to a lack of concern for their well-being and a failure to address instances of abuse (Ugiagbe, 2025).

In Etinan LGA, where traditional values are still prevalent but increasingly challenged by socioeconomic changes, the disengagement of older adults can be particularly problematic. The expectation that older adults will relinquish their roles and become dependent on their families can create power imbalances that facilitate abuse. For instance, an older person who has transferred their land or assets to a family member in exchange for care may find themselves vulnerable to neglect or mistreatment if the family member fails to uphold their end of the agreement. The lack of formal social security systems and inadequate government support for the elderly in Nigeria further exacerbate this vulnerability, leaving many older adults with limited options and few avenues for recourse if they experience abuse.

Social work interventions in Etinan LGA must therefore address the social disengagement of older adults and work to reintegrate them into community life. This can involve initiatives such as establishing senior citizen centers where older adults can socialize and participate in recreational activities, providing transportation services to enable them to attend community events, and creating intergenerational programs that foster connections between older and younger generations. Social workers can also play a crucial role in educating families and communities about the rights of older adults and the importance of providing them with respectful and supportive care.

Furthermore, interventions should focus on empowering older adults to maintain their independence and autonomy for as long as possible (Fratiglioni, 2000; Victor et al, 2000; Pennington, 1997). This can include providing access to healthcare services, promoting financial literacy, and offering legal assistance to protect their assets and property rights. Social workers can also advocate for policies that provide social security benefits and other forms of financial assistance to older adults, reducing their dependence on family members and decreasing their vulnerability to abuse. By addressing the social disengagement of older adults and promoting their active participation in community life, social work interventions

can help to prevent elder abuse and ensure that older adults in Etinan LGA live with dignity and respect.

Social disengagement theory provides a framework for understanding the increased vulnerability of older adults to abuse. As individuals age, they often experience a natural withdrawal from social roles and responsibilities, which can lead to isolation. In Etinan, where traditional family structures are changing due to urbanization, older adults may find themselves disconnected from their communities and support networks. This isolation can heighten their susceptibility to various forms of abuse, including physical, emotional, and financial exploitation. By applying this theory, social workers can better comprehend the dynamics of disengagement and identify at-risk populations.

Utilizing the social disengagement theory promotes advocacy and awareness within the community. By raising awareness about the risks of elder abuse and the role of social disengagement, social workers can engage community members in discussions about respect and care for older adults. This advocacy can lead to cultural shifts that value the contributions of older individuals and encourage protective behaviours. By addressing the societal attitudes that contribute to disengagement and abuse, social work interventions can foster a community environment that supports and uplifts its elderly members. The social disengagement theory provides a vital lens through which to understand the complexities of elder abuse in Etinan Local Government Area. By focusing on the social dynamics of aging, social workers can develop effective interventions that promote engagement, reduce vulnerability, and advocate for the rights and dignity of older adults.

2.3.2 Ageing and Attitudes Theory

Age-related information, experiences (expectations, fears, emotions), and behaviours (actions, decisions) are all referred to as attitudes toward aging. Attitudes are influenced by both

personal and societal factors. They vary based on cultural values and are affected by the advancement of modern medicine as well as changes in the health of an aging population. Health, social, and informal family care during old age contribute to feelings of dignity, security, and satisfaction (Ayanilo, 2018). All of these elements, along with the highly valued values of activity, achievement, employment, consumerism, and competition in contemporary societies, are the origins of the myths that affect how seniors and society see aging.

Age-related preconceptions and prejudices are examples of myths. They touch on many facets of the lives of the senior, including job, health, sexuality, mobility, decision-making, leisure pursuits, and psychological traits including concerns and fears. The most prevalent fallacies surrounding seniors' deteriorating physical and mental capacities are their inescapable rise in need of others' assistance. Ageing is portrayed as a time of losses, and old age is seen as being feeble and decrepit rather than wise and mature (Phelan, 2013). Ageistic ideology, which Robert Butler first defined as the systematic discrimination of people based on their age, is a manifestation of negative views toward aging. While losses are primarily the hallmarks of aging, seniors' experiences are quite varied (Achenbaum, 2021).

Surprisingly, the study's findings, which involved asking older people directly about aging, revealed that they frequently saw aging as an opportunity for growth, development, and positive transformation. The "ageing paradox" refers to this lack of a negative age effect (Animasahun & Chapman, 2017). Old age is merely one part of the human life from a lifelong perspective, a multidimensional experience where both losses and gains are present, similar to other periods where both losses and winnings are present, like in other phases of life. According to certain beliefs, the aging process is a stage of the life cycle with particular developmental tasks. Erikson talked about the integrity and wisdom stage, when a person is able to accept the course of their life as they have lived it and get ready for death.

The developmental job of later life is similarly related to Butler's concept of "life review" (Pillemer & Finkelhor, 1989). Assessing one's life trajectory can greatly aid in resolving old disputes and injustices as well as fostering harmony, integration, and peace. According to Cohen, old age is a significant and beneficial stage of life associated with the brain's final stages of growth, when it is prepared to integrate and reassess past experiences, leading to psychological maturity (Cohen, 2005). In the past, healthy physical and mental functioning, including autonomy and social support, were associated with effective aging. Life satisfaction, engagement, and psychological resources were later emphasized within the context of socio-psychological theories, culminating in the positive psychology movement (Seligman, 2004). Also taken into consideration were the popular definitions of successful aging.

These often comprise aspects of psychological, physical, and social well-being, as well as functional abilities and resources, life satisfaction, a sense of purpose, financial stability, knowledge of new things, success, physical appearance, productivity, sense of humor, and spirituality (Phelan, 2013). According to Tsai and Pao-Caregiver Feng's Stress Theory, elder abuse happens when an adult family member looking after a disabled older adult is unable to fulfill his or her caregiving tasks (Wolf, 2000). The elderly victim is seen as dependent on the caregiver, who becomes overburdened, angry, and aggressive as a result of the care recipient's on-going medical demands. The features of the care recipient and the objective and subjective burden of care are linked to subsequent abuse in models built on this paradigm. Interventions based on this approach offer assistance to the caregiver, such as by offering services (Lee & Splawa-Neyman, 2021). Although this point of view is frequently alluded to informally in literature, caregiver stress theory is rarely directly referred to. For instance, "the tremendous strain of providing care for a dependent adult along with societal demands has caused the problem of elder mistreatment to flourish" (Lay, 1994); "abuse of the elder is precipitated by

stress" (McLaughlin *et al.*, 1980); "these families were under stress 80% of the time, with the elderly person being the scapegoat for the caregivers' frustrations"(Chen *et al.*, 1981).

According to an empirical study that examined the link between stress and elder abuse, while stress is associated with abuse in some way and may even intensify it, it is not a reliable predictor. Case-comparison studies have not revealed greater reliance rates in the elderly population (Lachs & Pillemer, 2004). The caregiver stress theory has its detractors, who worry that it legitimizes abusers and places the blame on victims. Older adults abused women's advocated for the rejection that caregivers are stressed, arguing that it places the burden on the victims and does not lead to the victim's protection (Chokkanathan & Lee, 2005). While stress should not be ignored as a risk factor that contributes to this issue, it is crucial to keep it in mind as well. Without justifying the abuser's actions, stress and perceived burden can be recognized, assessed, and incorporated into models.

Supporters of aging and attitude theories emphasize the importance of understanding how individuals' attitudes towards aging can impact their overall well-being and quality of life as they grow older. These theories suggest that attitudes towards aging can influence various aspects of an individual's life, including their physical health, mental well-being, social interactions, and overall satisfaction with life.

Supporters of aging and attitude theories argue that promoting positive attitudes towards aging can lead to better health outcomes, increased longevity, and a higher quality of life for older individuals. By challenging negative stereotypes and promoting a more positive view of aging, supporters of these theories believe that society can help older individuals maintain a sense of purpose, autonomy, and dignity as they age. Supporters of aging and attitude theories advocate for a more inclusive and positive approach to aging, one that recognizes the

diversity and potential of older individuals and promotes a culture of respect, support, and empowerment for people of all ages.

Aging and attitude theory have faced several criticisms over the years. One common criticism is that attitude theory tends to oversimplify the complex and multifaceted nature of attitudes towards aging. It may not fully capture the nuances and variations in attitudes held by individuals towards older adults. Additionally, some critics argue that attitude theory may not adequately address the impact of societal stereotypes, discrimination, and ageism on attitudes towards aging. Another criticism is that aging and attitude theory may not sufficiently consider the inter-sectionality of factors such as race, gender, socioeconomic status, and culture in shaping attitudes towards older adults. This limitation can result in a narrow understanding of the diverse experiences and perspectives of older individuals.

Furthermore, some critics argue that aging and attitude theory focuses too heavily on individual-level factors and may not adequately address the broader social, economic, and political contexts that influence attitudes towards aging. This criticism highlights the need for a more comprehensive and holistic approach to understanding and addressing age-related attitudes.

Overall, while aging and attitude theory have provided valuable insights into the study of attitudes towards older adults, they are not without their limitations and criticisms. It is essential to consider these criticisms and continue to refine and expand our understanding of attitudes towards aging in a more nuanced and inclusive manner. The theory is relevant to this study in the sense that it promotes positive attitudes towards aging by not portraying it as something to be feared and avoided. The theory is also meant to make people work hand in hand to ensure elders are treated with the dignity and respect that they truly deserve.

CHAPTER THREE

METHODOLOGY

3.0 Preambles

This chapter outlines the method to be employed in the research, by focusing on the area of study, research design, population of Study, sample size and sampling techniques, instrument of data collection, validity and reliability of the instruments, verification of data, method of data collection, method of data analysis and ethical considerations.

3.1 Research Design

To accomplish the objectives of this research, the study utilized a mixed-methods approach to thoroughly investigate prevalence of older adult abuse and social work intervention in Etinan Local Government Area, Akwa-Ibom State. The quantitative aspect of the study adopted the cross-sectional research design to gather information from the respondents, while the qualitative component of the study employed phenomenological research design to gather insights from the older adults, exploring their views on the research topic, capturing the meanings they attributed to the experiences (Creswell and Planoclark, 2018; Omorogiuwa, 2019).

A research design pertains to the framework through which essential and pertinent data required to address research inquiries are gathered from a specified study population. It serves as the systematic strategy for accessing the information necessary to resolve a research issue (Ibabor, 2006). In this instance, this study employed a cross-sectional study design, also known as a one-shot or status design. This design was utilized to determine the prevalence of elderly abuse and neglect among older adults and the effectiveness of social interventions in Etinan Local Government Area, Akwa Ibom State.

The quantitative research involved the collection and analysis of numerical data to understand the phenomenon. It focused on quantifying relationships, patterns, and trends, often using statistical methods to draw conclusions. This approach provided objective and measurable results, allowing researchers to generalize findings to larger populations. It typically involves structured data collection methods such as surveys, experiments, and statistical analyses. While the qualitative research, on the other hand, emphasized exploring and understanding complex phenomena in-depth. It involved collecting non-numerical data, such as interviews, observations, and textual analysis, to uncover underlying meanings, motivations, and perspectives. Qualitative aspect of the research aimed at capturing the richness and depth of human experiences, often resulting in detailed narrative descriptions rather than numerical measurements. Researchers using this approach focus on interpreting data subjectively to generate insights and theories.

3.2 Area of the Study

Etinan, situated in the southern region of Nigeria, is a Local Government Area within the resource-rich Akwa Ibom State. Renowned for its agricultural produce and artistic handicrafts, this locale stands out as one of the most tranquil regions in Nigeria's West African landscape. Dominated by the Iman Ibom people, known for their dynamism, creativity, hard work, and intellect, Etinan is primarily a hub of the Ibibio-speaking community with a vibrant cultural tapestry. Various cultural associations such as Ekpo, Ekong, Ebre, and Idiong enrich the societal fabric. While Christianity prevails among the majority, a minority still practice elements of traditional African religions. The community's traditions find expression through vibrant dances, arts, and crafts.

The populace predominantly engages in agriculture and small-scale commerce, focusing on crops like yams, cassava, cocoyam, and maize. Additionally, locals partake in activities like

wine tapping, handicrafts, woodwork, sculpture, and baking. Positioned at approximately 05°01'N latitude and 07°54'E longitude, Etinan lies 26 kilometers to the south of Uyo, the state capital, and 24 kilometers north of Eket. It shares borders with Onna, Nsit Ibom, Mkpata Enin, Abak, and Uyo Local Government Areas. Nestled in the tropical rainforest belt, the region experiences distinct wet and dry seasons, with lush evergreen vegetation.

Functioning as a pivotal administrative unit, the Etinan Local Government is overseen by a Chairman who presides over the Executive branch, supported by 11 councilors representing the area's 11 wards. With its roots in Ekom Iman as the ancestral homeland of the Iman clan, Etinan boasts a rich history spanning over 700 years. The name "Etinan" originates from the fusion of "Eti" and "Inan," symbolizing a bond between father and son. Notably, the town serves as a historical nexus for the Iman villages from Nsit Ibom, Nsit Ubium, Nsit Atai, and both Northern and Southern Iman settlements. Comprising the central towns of Etinan, Ikot Ebo, and Ikot Ebiyak (also known as Ekpuk Ita Etinan), these villages united to establish the Etinan Federated Town Council at the heart of their community. One of the primary reasons for conducting this study in Etinan is the high vulnerability of older adults to abuse. As urbanization and modernization continue to reshape family structures in Nigeria, many older adults find themselves isolated and dependent on younger family members for care. This dependency can lead to various forms of abuse, including neglect and financial exploitation. Understanding the specific prevalence and types of abuse in this context is crucial for developing targeted interventions.

3.3 Population of Study

The population of this study consisted of all the older adults in Etinan Local Government Area, Akwa-Ibom State. The total population of older adults in Etinan Local Government Area, according to the National Population Commission (2006), was 10,056; however, the

NPC projection for the year 2024 was 16,361 at a 3.3 population growth rate. The population for this study consisted of older adults between the ages of 65 years and above, with a total projected population of 16,361 (NPC, 2025) in the Etinan Local Government Area, Akwa-Ibom State.

3.4 Sample Size and Sampling Techniques

The sample size of the study was 389. This was drawn from the Etinan Local Government Area, Akwa-Ibom State. In this study, a mixed-method approach was utilized, and the Taro Yamane formula was employed to determine the sample size for the quantitative data that was collected from respondents. The formula was expressed as follows:

$$n = \frac{N}{1 + N(e)^2}$$

Where:

n= desired sample size, when N is less than 10,000

N=Population size

e= precision level (0.05)

$$n = \frac{16361}{1 + 16361(0.05)^2}$$

$$n = \frac{16361}{37.4525}$$

n≠ 399.99 approximately = 400

For the quantitative segment, 400 respondents were chosen using a simple random sampling method from older adults in Etinan Local Government Area and it has eleven (11) political wards from which five communities were selected for the study because it was observed that a lot of older adults reside in these communities who may have suffered or are experiencing

one form of abuse and another. For the qualitative data, a purposive sampling technique was used, allowing the study to select 10 participants, ensuring a mix of genders and two (2) participants from each ward within the selected communities. This method aimed at gathering insights from the older adults, exploring their views on the research topic. The inclusion criteria required participants to be male or female older adults living in the specified communities in Etinan Local Government Area. These sampling techniques was chosen because the researcher lacks a comprehensive understanding of all potential participants and was aimed at effectively addressing the study's objectives. The inclusion criteria ensure that the data collected was relevant to the study's focus. Participants resided in Etinan Local Government Area and were aged 65 years and above, as this defines the population of older adults who may be at risk of abuse or neglect.

3.5 Instrument of Data Collection

This study was guided with two major research instruments. The first one was the questionnaire guide, and the second was the in-depth interview guide. The questionnaire aided in the collection of quantitative data while the in-depth interview guide aided in the collection of the qualitative data. The questionnaire consisted of (2) sections. Section (A) consisted of questions of the demographic characteristics of the respondents such as age, gender, occupation; level of education etc. section (B) consisted of questions pertaining to the prevalence of elderly abuse and neglect of older adults in Etinan Local Government Area.

The in-depth interview guide;

This instrument of data collection was used to collect the qualitative data relating to the objectives of the study. Regarding the qualitative data collection process, face-to-face interviews was conducted with the target participants. This involved selecting 2 participants each from the five communities, including 5 male and 5 female older adults, resulting in a total of 10 participants. The interviews were guided by an interview guide containing a set of

predetermined questions and prompts to explore the prevalence of abuse among older adults in Etinan Local Government Area. During the interviews, the purpose of the study was explained, and consent from the participants was sought before proceeding and those that could not read the questions were read to them in order to elicit responses from them. The response items on the interview guide was explained to the participants to ensure their understanding and to guide them in providing accurate and meaningful responses. The interviews was recorded using an audio recording device to capture the participants' responses accurately. Field notes were taken to document important details, non-verbal cues, and contextual observations during the interviews. Each interview was allocated a duration of 50 minutes, providing sufficient time to delve into the research topic and gather in-depth qualitative data. The interview guide and questionnaire were administered in English as much as possible.

3.6 Validity and Reliability of the Instruments

This was used to measure or determine the quality of the text in relation to measuring what was intended in the study areas to see the validity of the data. A pilot study was also carried out in the study areas prior to the main field work in order to ensure reliability of this study's instruments the semi-structured questionnaire was administered to 12 respondents was tested using the Taro Yamane (1967) sample size formulae. Alpha and reliability co-efficient of 0.82 was yielded. This indicated that the items in the questionnaire are internally consistent. Together with the pilot test, the various research instruments were further viewed by the researcher's supervisor and the departmental post graduate committee. Their comments and suggestions were also reflected in the final questionnaire and in-depth interview guide for the data collection.

3.7 Verification of Data

The strength of the qualitative data was acquired and indicated by the term "data substantiation." As a result, member verification was used to establish credibility for the qualitative data that was gathered, utilizing the interview guide in this study. The interview guide was used to obtain qualitative data for the study and was subjected to scrutiny by the supervisor, with corrections made to enable effective data collection.

Given that the member checking method of data verification involved returning preliminary results to selected participants to assess the consistency of the findings in order to establish the credibility of the instrument, the member checking method in this study involved sending the findings to some participants to gauge their opinions on the consistency of the results. This allowed the researcher to assess and comment on whether the findings accurately reflect their reactions. The researcher offered a preliminary interpretation of the data.

3.8 Method of Data Collection

This study adopted a mixed-method approach, incorporating both quantitative and qualitative methods for data collection. Basically, two research instruments were utilized: a questionnaire and in-depth interviews guide.

A structured questionnaire was employed to gather qualitative data, offering the flexibility to include quantitative questions relevant to the study on the prevalence of older adult abuse. This questionnaire consisted of open-ended questions and was organized into three sections. Section A focused on the experiences of older adults who have faced abuse or neglect, while Section B examined the positive and negative effects of these experiences on their well-being. Section C addressed community responses and the support systems available for older adults who have experienced abuse. Collectively, these sections assisted the researcher gain insights

into on-going issues related to elder abuse and identify potential solutions to prevent future occurrences in these communities and the state as a whole.

In-depth interviews were conducted as part of this study, characterized by their unstructured nature, which allowed for a natural flow of conversation without a fixed pattern of questions. The interviewer had the freedom to ask various questions aligned with the research objectives, facilitating a discussion that is responsive to the participants' experiences. Open-ended questions were designed to capture the nuances of respondents' experiences with elder abuse and neglect. The questions in the in-depth interviews stemmed from the core research issues, and careful attention was given to uncover hidden meanings in the participants' responses. This approach enriched the qualitative data collected and provide deeper insights into the prevalence and impact of elder abuse and neglect among older adults.

3.9 The Method of Data Analysis

The questionnaire was retrieved from the field at the end of the exercise and checked for accuracy. They were coded and the data derived were inputted into the Statistical Package for Social Sciences (SPSS 21.0) programme. Frequencies and percentages were used to present the social-demographic variables like sex, educational qualifications, ethnicity, marital status, etc. Percentages were used to calculate the numerical variables like age, and income with normal distributions. The in-depth interview was analysed thematically whereby major themes were isolated from the interview and discussed in tandem with the quantitative components of the analysis. After recording the conversation and transcribing them, the results was analysed.

3.10 Ethical Considerations

The ethical conduct of this research was informed by the actors and agencies involved in supporting older adults, particularly in the context of issues such as elder abuse, neglect, and

exploitation. This included engaging with families and the older adults themselves within the study area. Before any research activities commenced, participants were asked to read and understand the information provided before signing their consent forms, ensuring that all participants are aged 65 and above. Also, the researcher assured participants of full confidentiality and privacy regarding their information during and after the interview sessions.

The researcher and his team members received training on the ethical considerations and sensitivities involved in this research, thereby ensuring they were prepared for the unique challenges of interviewing older adults. Since the research involved both male and female participants, it was crucial to accommodate preferences regarding the interviewer's gender. This approach helped in preventing discomfort and it promoted openness, as some older adults felt more at ease discussing their experiences with someone of the same sex. The researcher made sure that his team members were aware of behaviours that indicated distress or discomfort, aimed at foster maximum cooperation from the respondents. It was beneficial because team members have prior experience working with older adults facing similar issues, as this background enhanced the sensitivity and understanding required during interviews.

Additionally, collaboration with relevant NGOs was essential e.g., to facilitate access to older adults and their families. These organizations often served as the first point of contact for individuals in need and were equipped to connect researchers with potential participants. NGOs also had insights in the reactions of older adults during interviews, considering their age and specific circumstances, all aimed at achieving meaningful outcomes from this research.

CHAPTER FOUR

PRESENTATION AND DATA ANALYSIS

4.0 Preamble

This chapter focuses on the analysis, presentation, and interpretation of the collected data, which were gathered through the administration of questionnaires and interviews with the research participants. Pie charts, bar charts, and simple percentages were used to present the socio-demographic characteristics of the respondents. Five research questions were formulated and tested using descriptive statistics to determine the level of significance between the variables under study. This chapter is subdivided into four sub-sections. The first section focused on the demographic characteristics of the respondents, examining variables such as age, gender, religion, and educational level.

The second section addressed the analysis and interpretation of the five research objectives. In contrast, the third section focused on the transcription of qualitative data (in-depth interviews) through thematic content analysis. The fourth section presented the discussion of findings. However, as stated in the previous chapter, ten older adults were purposively selected for in-depth interviews (IDIs), and four hundred respondents were randomly selected for questionnaires. It should be noted that some research participants did not complete the questionnaire, while others refused to answer the questions. A total of three hundred and ninety-five (395) questionnaires were completely recovered from the field out of the four hundred (400) questionnaires distributed.

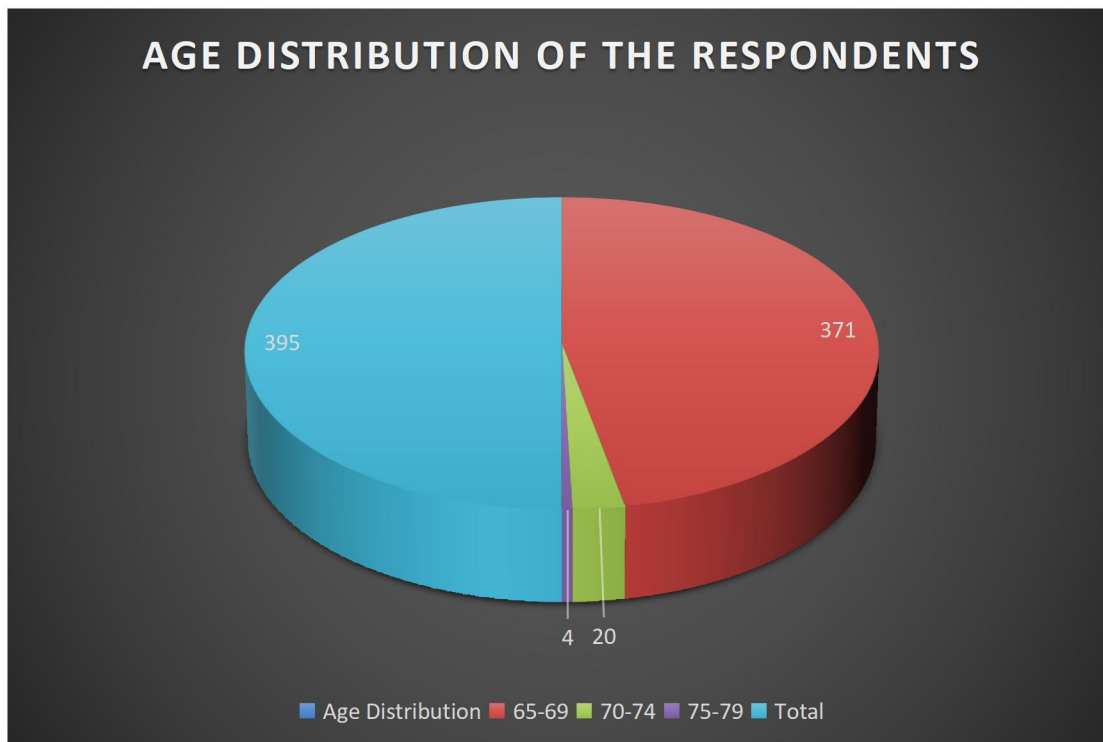
4.1 Socio-Demographic Characteristics of Respondents

Table 1 Socio-Demographic Characteristics of Respondents

S/No	Variable	Categories	Frequency	Percentage (%)
1	Age			
		65-69	371	93.9
		70-74	20	5.1
		75-79	4	.8
		Total	395	100
S/No	Variable	Categories	Frequency	Percentage (%)
2	Gender	Male	180	45.6
		Female	215	54.4
		Total	395	100
S/No	Variable	Categories	Frequency	Percentage (%)
3	Religion	Christianity	315	79.7
		Islam	68	17.2
		African Traditional Religion	12	3.0
		Total	395	100
S/No	Variable	Categories	Frequency	Percentage (%)
4	Education	Primary	62	.15.7
		Secondary	125	31.6
		Tertiary	208	52.7
		Total	395	100.0

Source: Fieldwork (2025)

Table 2: Age Distribution of the Respondents

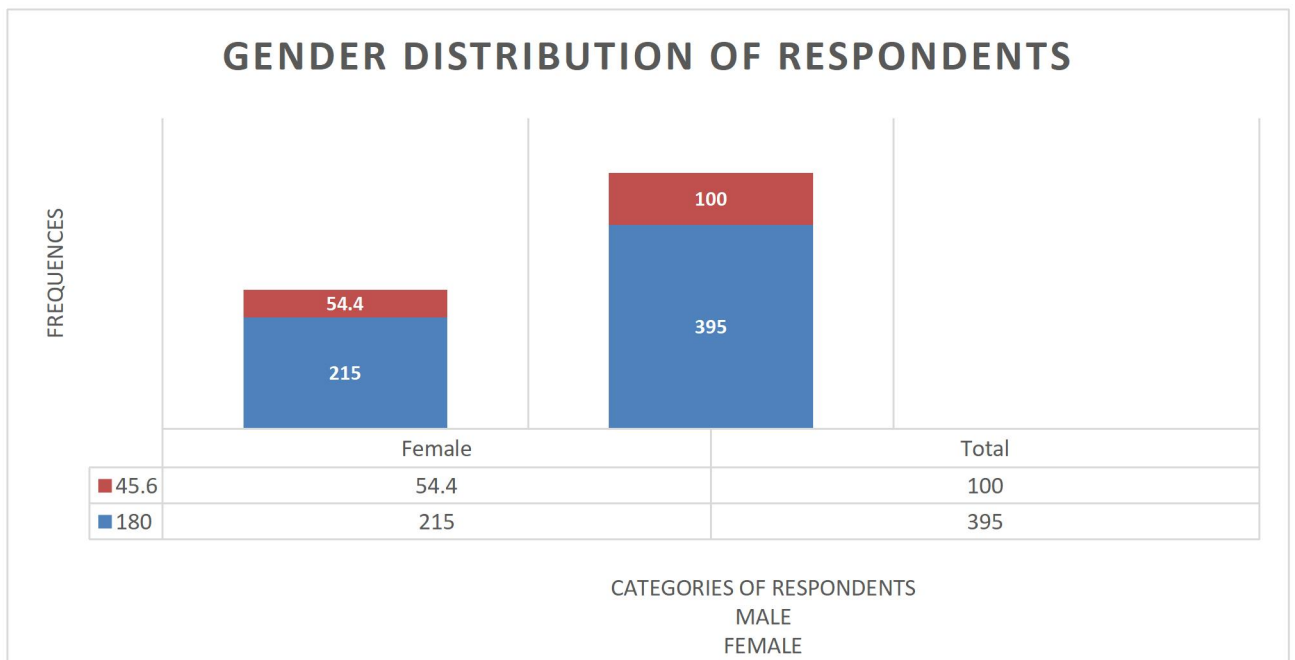


Source:

Fieldwork (2025)

Table 2 presents the analysis of the age distribution, indicating a pronounced concentration of participants within the 65–69 age category, which comprises **94% (n = 371)** of the total sample population (N = 395). In contrast, individuals aged 70–74 account for only **5% (n = 20)**, while those in the 75–79 age group represent a minimal proportion of **1% (n = 4)**. This distribution shows a highly skewed sample, favoring the younger segment of the elderly population, with limited representation among individuals aged 70 years and above. Consequently, any inferences drawn from the data may primarily reflect the characteristics of participants aged 65–69, underscoring the need for caution in generalizing findings to older cohorts within the older adult demographic.

Table 3: Gender Distribution of the Respondents



Source: Fieldwork (2025)

Table 3 presents the gender distribution of a sample population totalling 395 respondents. Among them, 180 are male, representing 45.6% of the sample, while 215 are female, accounting for 54.4%. This indicates that females constitute a slightly larger proportion of the population compared to males. Overall, the gender representation is relatively balanced, with a difference of approximately 8.8% between the two groups.

Table 4: Religion Distribution of the Respondents

Religion	Frequency	Percent (%)
Christianity	315	79.7
Islam	68	17.2
African Traditional Religion	12	3
Total	395	100

Source: Fieldwork (2025)

Table 4 shows the distribution of respondents by religion. Christianity is the most dominant religion, with 315 respondents representing **79.7%** of the total sample. Islam follows as the second most practiced religion, accounting for **17.2%** (68 respondents). African Traditional Religion is the least represented, with **12 respondents (3.0%)**. Generally, the majority of the population surveyed identifies as Christian, indicating a strong Christian presence in the sample compared to other religions.

Table 5: Education Distribution of the Respondents

Education	Frequency	Percent
Primary	62	.15.7
Secondary	125	31.6
Tertiary	208	52.7
Total	395	100

Source: Fieldwork (2025)

Table 5 summarizes the educational attainment of a sample of 395 respondents. The majority of respondents hold a tertiary education, comprising 52.7% (208 individuals), indicating a significant level of higher education within this group. Secondary education follows, represented by 31.6% (125 individuals), while 15.7% (62 individuals) have only completed primary education. This distribution suggests that a relatively high proportion of the sample is educated beyond secondary school, which may impact their awareness and understanding of issues such as elder abuse, as well as their engagement with social work interventions. Consequently, the data reflects a strong educational background among the participants, which could correlate with their perspectives on social issues.

4.2 Analysis of Research Objectives: What is the prevalence of different forms of abuse among older adults in Etinan Local Government Area?

Research Objective One: Ascertain the prevalence of different forms of abuse among older adults in Etinan Local Government Area

S/ N	Research Question	Responses					N	Mean	Std. Dev.	Remark
		SA (%)	A (%)	UN (%)	D (%)	SD (%)				
1	Emotional or psychological abuse of older adults is a common occurrence in my area	40 (10.1%)	138 (34.9%)	71 (18.0%)	101 (25.6%)	45 (11.4%)	395	2.93	0.060	Agree
2	Physical abuse of older adults is prevalent among families in my community	32 (8.1%)	124 (31.4%)	66 (16.7%)	108 (27.3%)	65 (16.5%)	395	3.13	0.062	Agree
3	Neglect of older adults, such as failure to provide basic needs, is frequently observed in my locality	102 (25.8%)	154 (39.0%)	60 (15.2%)	46 (11.6%)	32 (8.1%)	395	2.37	0.061	Agree
4	Sexual abuse of older adults is a hidden issue in my community	60 (15.2%)	65 (16.5%)	77 (19.5%)	103 (26.1%)	86 (21.8%)	395	3.23	0.069	Agree
5	I have witnessed financial exploitation of older adults in my community	82 (20.8%)	134 (33.9%)	53 (13.4%)	94 (23.8%)	28 (7.1%)	395	2.62	0.063	Agree
6	Older adults often experience isolation or abandonment by their families	81 (20.5%)	227 (57.5%)	41 (10.4%)	30 (7.6%)	15 (3.8%)	395	2.17	0.048	Agree
Cluster Mean								2.74	0.874	Agree

Source: Fieldwork (2025)

The table established a moderate level of perceived older adults' abuse in the community with physical and sexual abuse being the most visible, while neglect and isolation-though less recognized-remain widespread and damaging. The results indicate that physical abuse (Mean = 3.13, SD = 1.25)

and sexual abuse (Mean = 3.23, SD = 1.37) recorded higher mean scores, showing that respondents generally perceived these forms of abuse as more prevalent among older adults. A substantial proportion (39.5%) either agreed or strongly agreed that physical abuse is common, while 32.0% expressed similar views on sexual abuse.

In contrast, neglect (Mean = 2.37, SD = 1.21) and isolation or abandonment (Mean = 2.17, SD = 0.97) had lower mean values, indicating that while these problems exist, they may be less recognized compared to physical or sexual abuse. However, the high proportion of agreement (64.8% and 78.1% respectively) suggests these issues are still of significant concern. Financial exploitation (Mean = 2.62, SD = 1.25) and emotional or psychological abuse (Mean = 2.93, SD = 1.21) were also identified as common experiences among older adults. Overall, the findings emphasize that various forms of elder abuse—especially emotional, physical, and financial, are perceived as serious challenges affecting older adults' well-being, warranting increased awareness, prevention efforts, and policy interventions.

In addition to the above data, some were gathered from in-depth interviews with the participants to establish a significant relationship between gender and perceived prevalence of older adult abuse. Thus, pseudonyms were used for interviewees to guarantee their utmost confidentiality. However, some of the factors that may contribute to the prevalence of older adults' abuse from the study may include migration as a result for the search of greener pasture, transfer from one job location to another geographical location that maybe far from the residence of their older adults in some cases some may be transferred outside the state of country. For some it could be lack of security and lack of social amenities.

In the interview, some purposively selected participants emphasized the prevalence of different forms of abuse among older adults. In tandem with the above result, one of the interviewees reported:

“Traditional beliefs can lead to neglect, as older adults are sometimes viewed as burdens. Changes in family dynamics, urbanization, and economic pressures exacerbate this situation”. Most abuse perpetuated against me was not reported due to societal stigma, fear of retaliation, and my lack of awareness about my rights. I may feel ashamed or believe that my experiences are a normal part of aging (IDI Mr D Male/63yrs 9/7/2025)

Another interviewee stated:

As an older adult, I have experienced some forms of abuse or neglect. This includes, but is not limited to, hitting, slapping, or inflicting any other form of physical harm. “She noted that such is prevalent among families who are less concerned about the overall well-being of their older parents”. At times, they often subjected me to verbal insult or isolation, leading to severe emotional distress and exacerbating my already deteriorating condition (IDI Mrs J Female 69yrs/11/7/2025)

Another interviewee averred:

“Most prevalent forms of older adults’ abuse include verbal degradation, threats, or isolation from family and community”. I faced neglect in terms of basic needs like food, medical care, and companionship. “This is likely the most common form of abuse in the region, often stemming from financial difficulties faced by caregivers” (IDI Mr M Male 72 yrs/ 10/7/2025)

Another interviewee comments:

One of the most common forms of elder abuse in my community is the misappropriation of funds or assets by our children and caregivers. Older adults may be manipulated or coerced into giving away their savings or properties. Equally, instances of sexual exploitation or abuse do occur. In most cases, vulnerable older adult women may be targeted. However, one anecdote from community workers is that I have been left alone for extended periods without my care or basic needs being met. Stories of elderly individuals roaming the streets without proper clothing or food often emerge (IDI Mr U Male 61 yrs/ 11/7/2025)

Another interviewee affirmed:

NGOs working here have encountered specific cases where caregivers, including family members, have exploited older adults’ relatives financially or have physically abused them after property disputes. Some local customs do not favour giving proper authority to older adults, leading to their marginalization. In some instances, when a family is facing financial challenges, older adults might be abandoned or forgotten, leading to neglect (Mrs E, Female, 68yrs/ 9/7/2025)

Another interviewee admitted:

My cultural beliefs prioritize family honour and respect for older adults, often leading to a reluctance to report abuse or family issues. Speaking out may be viewed as bringing shame to the family. I often lack awareness regarding what constitutes older adult abuse. Many older adults, as well as family members, might not recognize abusive behaviours, which can include emotional and psychological abuse in addition to physical harm. I fear further abuse or abandonment if I report incidents. This fear can be particularly acute if the abuser is a family member or caregiver, creating a cycle of silence (Mrs R, Female, 77yrs/ 10/7/2025)

Another interviewee confessed:

I am financially and physically dependent on my family members, which discourages me from seeking help for fear of losing their primary source of support. Moreover, my limited access to healthcare, social services, and legal support makes it challenging for me to seek help. Transportation issues and internet access may also hinder my ability to reach out for assistance. I am always sceptical towards law enforcement and government institutions, and this prevented me from reporting abuse. I sometimes doubt that authorities will take my claims seriously or that any protective action was taken (IDI Mr D Male/63yrs/ Tertiary/9/7/2025)

Another interviewee admitted:

I am living in isolation, which reduces opportunities for me to discuss my experiences or seek help. Isolation can also limit my access to information and support networks. Thus, inadequate laws and protections for older adults can contribute to underreporting, and a lack of legal frameworks specifically addressing older adult abuse can lead to ineffective enforcement and protection. People around me do not view older adults' abuse as serious or reportable, especially since they often normalize certain behaviours towards older adults in my community. This can lead to dismissive attitudes towards the older persons' rights (IDI Mr U Male 61 yrs/ 9/7/2025)

Research Objective Two: Assess the awareness and perceptions of older adults' abuse in Etinan Local Government Area

S/ N	Research Question	Responses					N	Mean	Std. Dev.	Remark
		SA (%)	A (%)	UN (%)	D (%)	SD (%)				
1	Cultural beliefs and attitudes toward aging influence the treatment of elderly individuals	63 (15.9%)	261 (66.1%)	38 (9.6%)	16 (4.1%)	16 (4.1%)	395	2.1396	0.8756	Agree
2	Isolation and loneliness among older adults increase their vulnerability to abuse	92 (23.3%)	221 (55.9%)	40 (10.1%)	20 (5.1%)	18 (4.6%)	395	2.1074	0.9733	Agree
3	Poor training and knowledge of caregivers can lead to unintentional neglect or abuse	103 (26.1%)	233 (59.0%)	27 (6.8%)	25 (6.3%)	7 (1.8%)	395	1.9873	0.8622	Agree
4	Lack of social support networks increases the risk of abuse among older adults	105 (26.6%)	231 (58.5%)	37 (9.4%)	17 (4.3%)	4 (1.0%)	395	1.9442	0.7891	Agree
5	Limited access to healthcare services contributes to the neglect of older adults	113 (28.6%)	224 (56.7%)	31 (7.8%)	23 (5.8%)	4 (1.0%)	395	1.9392	0.8286	Agree
6	Financial difficulties in the household contribute to the neglect of elderly individuals	122 (30.9%)	225 (57.0%)	24 (6.1%)	18 (4.6%)	6 (1.5%)	395	1.8886	0.8233	Agree
Cluster Mean							2.74	0.43	Agree	

Source: Fieldwork, 2025

The above table reveal financial hardship, lack of training, limited health care, and weak social networks as major structural causes of older adult abuse. It highlight a multi-dimensional nature of older adult abuse, rooted in economic, social, and cultural constraints. It indicate that the mean values across all six items range from 1.89 to 2.14, implying that respondents generally agreed with the listed factors as contributing to elder abuse or neglect. The lowest mean (1.8886) was recorded for 'Financial difficulties in the household contribute to the neglect of elderly individuals,' reflecting the strongest agreement. Conversely, the highest mean (2.1396) for 'Cultural beliefs and attitudes toward aging influence the treatment

of elderly individuals' still falls within the agreement range, showing the relevance of cultural perceptions.

Across all items, most respondents either agreed or strongly agreed, with combined agreement levels between 81% and 88%, suggesting that socio-cultural, economic, and institutional factors jointly contribute to the mistreatment of older adults. The standard deviations (0.79–0.97) show moderate response consistency, indicating that participants had similar opinions about the role of these factors in influencing elder abuse and neglect.

In the interview, some participants reiterated the circumstances that contributed to the abuse and neglect of older adults, along with their effects on the treatment of this demographic

A participant reported:

My family views me as a burden rather than a valuable member of the family/society. This shift can lead to disrespect, neglect, and devaluing of my contributions and needs. However, my family faces economic challenges that make it difficult for me to receive adequate care. Their limited financial resources led to my poorer living conditions, inadequate healthcare, and neglect of my emotional and physical needs. My younger generation often migrates to urban areas for better job opportunities, leaving me behind in rural areas. This abandonment also led to my increased isolation and neglect (IDI Mr. A, Male, 66 yrs/10/7/2025)

Another interviewee comments:

There are limited structured social support systems, such as eldercare programmes or community services, in my community. This lack of institutional support means families may struggle alone, leading to inadequate care for older adults. Similarly, access to healthcare can be limited, particularly in rural areas. We (Older adults) may not receive necessary medical attention or proper treatment for chronic conditions, impacting our quality of life and leading to neglect. Sometimes, conflicts may arise within families over inheritance, family resources, or differing cultural values. These conflicts can create a hostile environment for older adults, leading to emotional abuse and neglect (Mrs R, Female, 77yrs/ 10/7/2025)

Another interviewee remarks:

In some families in my community, substance abuse among younger family members can lead to neglect and abusive behaviour towards older relatives. Dependence on drugs or alcohol may exacerbate stress and violent tendencies. A lack of awareness about the rights of older adults and the signs of abuse can contribute to their occurrence. Without education about elder care, families may not recognize their responsibilities or the importance of treating older adults with dignity and respect. Older women, in particular, may face neglect and abuse due to entrenched gender biases. Societal norms may prioritize men's needs over women's, leading to disparities in care, attention, and respect for older women. (Mr. I Male 72yrs/ 11/7/2025)

Another interviewee reiterated:

I see some traditional beliefs perpetuate harmful practices towards older adults, such as the stigmatization of mental health issues or the belief that older adults should be self-sufficient without assistance. The combination of these factors leaves older adults vulnerable to neglect and abuse, impacting their physical and mental well-being. Neglect can lead to untreated health conditions, exacerbating chronic illnesses and leading to premature death (IDI Mr D Male/63yrs/ 9/7/2025)

Another interviewee asserted:

Here, older adults are highly revered and command considerable respect. This cultural norm emphasizes filial piety, where younger generations are expected to care for and honour their elders, often seeing them as keepers of wisdom and tradition. This respect generally leads to positive treatment, such as community support and care. However, it can also create unrealistic expectations for older adults, pressuring them to conform to traditional expectations despite their limitations (IDI Mr. N, Male, 75 years, 10/7/2025)

Another interviewee proclaimed:

Our culture emphasizes communal living. Therefore, older adults often live with their children or extended family, who are responsible for their care and well-being. This fosters a support network that can protect older adults. However, communal living can also lead to dependency on family members, inadvertently fostering neglect if family members are unable or unwilling to provide adequate care. Older adults traditionally hold significant sway in family and community decision-making processes. Their opinions are often sought in matters affecting the family or community. While this involvement signifies respect and value, it can also lead to situations where older adults may not have the same level of autonomy, which can lead to feelings of disempowerment or frustration if their wishes are overlooked. (IDI Mrs. C Female 70yrs/ 9/7/2025)

Another interviewee posited:

My family and community viewed older adults as custodians of spiritual knowledge, and their contributions to rituals and traditions are vital. While this can enhance respect and care, there are instances where spiritual beliefs might lead to the neglect of conventional medical treatment, especially if the elder prefers traditional healing practices that may not always be effective. Traditional gender roles remain prevalent, influencing how older men and women are treated differently. Men are often viewed as heads of households and decision-makers, while women's roles are frequently tied to caregiving and domestic responsibilities. This disparity can lead to variations in the care received by older adults, where older men might receive better treatment or more resources than older women, potentially resulting in neglect for the latter (IDI Mr. A, Male/66 yrs/ 10/7/2025)

Another interviewee comments:

In some communities in my region, inheritance practices might favour male children over female children or extended family members, leading to conflict and neglect of older women who may find themselves without resources if their sons fail to support them. Certain customs surrounding widowhood can lead to abuse, including isolation or mistreatment of widows. In some cases, as widow I faced stigma and I have not received adequate care from my family. Some older adults may be viewed as sorcerers or bearers of bad luck, especially if they fall ill or face personal crises. This can lead to ostracism or neglect by community members. (IDI Mr U Male 61 yrs/ 11/7/2025)

Research Objective Three: Identify the factors contributing to the vulnerability of abuse in

Etinan Local Government Area

S/ N	Research Question	Responses					N	Mean	Std. Dev.	Remark
		SA (%)	A (%)	UN (%)	D (%)	SD (%)				
1	Experiencing abuse negatively affects the mental health of older adults in my community	26.0%	56.9%	10.2%	4.6%	2.3%	395	2.00	0.87	Agree
2	The fear of further abuse affects the daily activities of older adults	20.3%	66.3%	9.5%	2.6%	1.3%	395	1.98	0.72	Agree
3	Victims of elder abuse often experience a loss of dignity and self-worth	25.0%	64.0%	6.9%	2.0%	2.0%	395	1.92	0.76	Agree
4	Elderly abuse has a long-term impact on the overall quality of life for older adults	26.0%	61.2%	10.0%	2.6%	0.3%	395	1.90	0.69	Agree
5	Elderly abuse results in increased feelings of isolation and loneliness among older adults	25.0%	65.1%	6.1%	3.1%	0.8%	395	1.90	0.70	Agree
6	Neglect leads to a decline in physical health among elderly individuals	27.0%	63.2%	5.9%	1.0%	2.8%	395	1.89	0.78	Agree
Cluster Mean								1.93	0.76	Agree

Source: Fieldwork, 2025

The above table established that older adults' abuse is widely perceived as a pervasive issue that erodes older adults' stability, dignity, health, and social connections, leading to enduring harm and diminished quality of life. The respondents largely agreed that elder abuse severely impacts older adults' well-being. Mean scores ranged from 1.89 to 2.00, indicating strong agreement. The cluster mean (M = 1.93, SD = 0.76) shows that overall, participants perceived

elder abuse as having consistent and significant negative effects on the physical health, mental health, self-worth, and social life of older adults. Specifically, mental health effects were strongly acknowledged (82.9% agreement), fear of further abuse disrupting daily activities (86.6%), loss of dignity (89%), quality-of-life deterioration (87%), increased loneliness (90%), and physical health decline due to neglect (90%) were all widely reported. Overall, the data indicate a strong consensus that elder abuse leads to broad and lasting harm across emotional, social, and physical domains among older adults.

In the interview, some participants reiterated abusive experiences and their impact on their mental and psychological well-being.

One of the interviewees reported:

As one of the victims of abuse and neglect, I often experience feelings of hopelessness, sadness, and anxiety, leading to clinical depression. The fear of further abuse can equally exacerbate these feelings. As an older woman, facing emotional neglect from my children, I withdrew socially and reported persistent sadness, indicating a deterioration in my mental state. I developed severe anxiety over potential future mistreatment. Therefore, abuse can undermine an older adult's sense of self-worth. Constant derogatory remarks or neglect can lead them to feel unvalued and unwanted, damaging their self-esteem. (IDI Mr W Male 61yrs/ 10/7/2025)

Another interviewee narrated:

As an older adult living with my son, I was subjected to verbal abuse. He began to believe I was a burden, often saying that my presence was undesired. My self-worth plummeted, leading me to isolate myself from community gatherings. The chronic stress of living in an abusive environment can lead to cognitive decline. Stress hormones can affect memory and cognitive functions, making it difficult for older adults to think clearly or remember important information (IDI Mr. U Male 61 yrs/ 11/7/2025).

Another interviewee recounted:

As once-active community participant, I suffered neglect from my caregivers, resulting in increased confusion and memory loss. Friends have noted my struggles to recall recent conversations and events, which have significantly altered my active lifestyle. So, older adults' abuse can lead to PTSD, especially if the abuse is severe or prolonged. Symptoms may include flashbacks, nightmares, and severe anxiety, hindering daily functioning (Mrs E, Female, 68yrs/ 9/7/2025)

Another interviewee reported:

After surviving physical abuse, I often experienced flashbacks and severe distress when hearing loud noises, which reminded me of my abusive experiences. I became avoidant and withdrawn, unable to engage with family or friends without significant anxiety. Victims of elder abuse often withdraw from social interactions due to shame, fear, or depression. This isolation can deepen feelings of loneliness

and intensify mental health issues. As a widow, I became increasingly isolated after my relatives neglected my needs. I felt unworthy of love and companionship, leading to a spiral of loneliness and despair, which affected my overall health (IDI Mrs J Female 69yrs/ 11/7/2025)

Another interviewee comments:

Based on my personal experience, older adults who have experienced neglect often exhibit a higher prevalence of chronic conditions such as hypertension, diabetes, and heart disease. This is frequently due to inadequate access to healthcare, poor nutrition, and lack of medication or monitoring. Neglecting routine medical care—such as regular check-ups or medication adherence—can exacerbate these health issues, leading to more severe complications and hospitalizations (IDI Mr D Male/63yrs/ 9/7/2025).

Another interviewee recounted:

I noticed that those subjected to physical abuse often suffer from visible injuries, such as bruises, fractures, or sprains. Older adults may also experience unexplained injuries if they are unable to provide their account of how the injuries occurred due to cognitive decline or fear. These physical injuries can lead to long-term disabilities, making it difficult for older adults to perform daily activities, which further isolates them and can contribute to a downward health spiral. IDI Mr N Male 75yrs/ 10/7/2025).

Another interviewee narrated:

As a victim of neglect, I experienced inadequate nutrition through lack of access to food or intentional withholding. Emotional distress can also suppress appetite. Malnutrition can lead to significant weight loss, a weakened immune system, and an increased susceptibility to infections. It can also lead to muscle wasting, frailty, and longer recovery times from illnesses or surgeries. Abuse and neglect can lead to severe mental health issues, such as depression, anxiety, and increased cognitive decline (e.g., dementia). Many older adults may experience feelings of hopelessness, fear, or worthlessness, directly impacting their physical health (IDI Mr M Male 72 yrs/ 10/7/2025).

Another interviewee reported:

I experienced mental health declines, and it manifested physically, leading to lethargy, withdrawal from social activities, and a lack of self-care, further worsening my physical health status. Neglected older adults are more likely to suffer from pressure ulcers due to immobility or lack of care and may experience higher rates of urinary tract infections, particularly in bedridden individuals. These infections can be serious and lead to hospitalization, significantly increasing morbidity. Poor health due to neglect can lead to a cycle of infections that are difficult to treat due to weakened immune systems caused by previous neglect and abuse (Mr. I Male 72yrs/ 11/7/2025).

7. **Research Objective Four:** Examine the awareness of abuse amongst older adults in Etinan Local Government Area

S/N	Research Question	Responses					N	Mean	Std. Dev.	Remark
		SA (%)	A (%)	UN (%)	D (%)	SD (%)				
1	There are sufficient community resources available to educate people about elder abuse	7.7	42.0	17.0	21.6	11.6	395	2.8737	1.18214	Agree
2	Elder abuse is often overlooked or dismissed in my community	13.6	34.3	22.8	14.6	14.8	395	2.8286	1.26442	Agree
3	Most people in my community understand what constitutes elder abuse	8.5	42.6	21.5	19.0	8.5	395	2.7641	1.11348	Agree
4	I believe that elder abuse is a serious issue in my community	20.7	40.3	18.4	15.6	5.1	395	2.4413	1.13156	Agree
5	I feel comfortable reporting suspected cases of elder abuse to authorities	17.6	50.0	24.5	3.1	4.8	395	2.2755	0.95184	Agree
6	I am aware of the different forms of elder abuse (e.g., physical, emotional, financial)	30.9	52.0	12.2	2.8	2.0	395	1.9311	0.85097	Agree
Cluster Mean								2.52	1.08	Agree

Source: Fieldwork, 2025

The above table indicates that personal awareness and willingness to act are relatively high but systemic and community level support remain weak. The cluster mean of 2.52 indicates a moderate level of awareness and concern about elder abuse among community members. Most respondents generally agree that elder abuse is a serious issue and feel somewhat informed about it. However, variability across responses (Cluster SD = 1.08) suggests mixed perceptions — while many are aware of the forms of elder abuse (mean = 1.93), fewer believe there are sufficient community resources (mean = 2.87) or that the issue is widely acknowledged (mean = 2.83). Notably, over 70% of respondents either agreed or strongly agreed that they are aware of the forms of elder abuse and feel comfortable reporting cases, showing positive awareness and willingness to act. Conversely, higher mean scores in

statements related to community neglect (e.g., 'Elder abuse is often overlooked') reveal gaps in institutional and communal support that require policy attention and education initiatives..

In the interview, some participants reiterated what constitutes older person abuse.

One of the interviewees reported:

As one of the members of this community, I noticed incidents of physical abuse among a considerable number of older adults in this region, and it stems from a caregiver's frustration, substance abuse, or intergenerational conflict over resources or care responsibilities. Physical abuse involves the infliction of physical harm or pain through actions such as hitting, slapping, or any form of violence against an older adult. Signs include unexplained bruises, fractures, or injuries that an older adult cannot explain. Vulnerable older adults may also show signs of fear or anxiety around specific caregivers or family members. Observing family dynamics and the treatment of older family members in communities highlighted frequent instances of neglect and emotional abuse, particularly in cases of economic strain (Mrs E, Female, 68 years/ 9/7/2025)

Another interviewee narrated:

Emotional or psychological abuse is very prevalent in my community. It can arise from traditional beliefs about old hood, where older adults may be seen as burdens, leading caregivers to express their resentment through verbal or emotional mistreatment. Thus, my discussions with community leaders and social workers revealed real cases of physical and financial exploitation faced by older adults, emphasizing the need for awareness and protective measures (IDI Mr N Male, 75yrs/ 10/7/2025).

Another interviewee averred:

My financial exploitation was often perpetrated by my family members who believe they are entitled to my resources. Hence, neglect can often be a result of caregiver burden, where family members are overwhelmed by responsibilities and may inadvertently neglect the older adult's needs. Neglect occurs when caregivers fail to provide essential care, including basic needs such as food, shelter, medical care, and companionship. This can be intentional or due to a lack of resources or knowledge. Signs include malnutrition, poor personal hygiene, untreated medical conditions, or unsafe living environments. The elder may also express feelings of abandonment or loneliness. Academic studies and reports on gerontology and elder rights provide insight into the different forms of elderly abuse, their prevalence, and cultural contexts, further enhancing my understanding (IDI Mr M Male 72 yrs/ 10/7/2025)

Another interviewee affirmed:

Based on my experience, some youths are involved in any non-consensual sexual contact with an elderly individual. This includes unwanted touching, coerced sexual acts, or exploitation. Signs may include unexplained injuries in genital areas, sexually transmitted infections, or changes in behaviour or self-esteem. Victims may become withdrawn or fearful. Sexual abuse of older adults may be underreported due to the stigma attached to both aging and sexual violence, as well as the vulnerability of the older adults' population. Coverage in local media and campaigns by NGOs focused on elder rights issues exposed the societal implications of elder abuse, encouraging dialogue and raising awareness in communities (IDI Mr. A Male 66 yrs/ 10/7/2025).

Another interviewee admitted:

In my community, some believe that all older adults receive proper care merely due to their status, and this can prevent community members from recognizing or reporting abuse. It creates a false narrative that older adult abuse does not exist in these societies, making it difficult for victims to seek help. Our cultural norm emphasizes that family members, especially children, must care for their aging parents. This societal expectation often leads to a reluctance to criticize or intervene in familial contexts, even when neglect or abuse is evident (Mrs E, Female, 68yrs/ 9/7/2025).

Another interviewee averred:

The majority in this region has a misconception that familial care is always sufficient and that any form of family conflict or mistreatment is a private matter. This perception can inhibit open discussions about older adults' abuse and undermine victims' realities. Similarly, the ideology of communal living leads to collective responsibility for the older adults. While this can foster support, it can also create an environment where abuse is collectively ignored, as community members may feel that their involvement is unwarranted. Many believe that because older adults live within a community, they are inherently safe. This misconception overlooks the dynamics of neglect and abuse that can occur even in closely knit communities IDI Mr N Male 75yrs/ 10/7/2025).

Another interviewee asserted:

Our deep-rooted spiritual beliefs influence how health issues, including the effects of abuse, are perceived. Older adults are often seen as protectors of cultural and spiritual knowledge, and abuse may be framed as a spiritual issue rather than a physical or emotional violation. I believe that traditional healing practices alone can address all ailments, perpetuating the idea that medical intervention is unnecessary. This perception can lead to neglect of the genuine psychological and physical consequences of abuse (IDI Mr M Male 72 yrs/ 10/7/2025).

Another interviewee stressed:

Our traditional gender expectations in our community often dictate how men and women are treated in the context of elder care. Older women may face specific vulnerabilities due to societal norms that prioritize the welfare of men, which can influence perceptions of their treatment. There is a misconception that elder abuse predominantly affects men, given their perceived authority as heads of families. This overlooks the unique challenges faced by older women, including domestic violence and economic neglect, which can often be downplayed or ignored (IDI Mr. A, Male, 66 yrs/ 10/7/2025).

Research Objective Five: Evaluate the existing social work interventions among older adults in Etinan Local Government Area

S/N	Research Question	Responses					N	Mean	Std. Dev.	Remark
		SA (%)	A (%)	UN (%)	D (%)	SD (%)				
1	Older adults are aware of the social work services available to them in the community.	10.0	28.2	25.4	23.8	12.6	395	3.0077	1.194	Agree
2	Social work interventions effectively address the needs of older adults in my community.	25.5	48.2	13.3	9.2	3.8	395	2.176	1.035	Agree
3	Current social work programs provide sufficient resources for elderly individuals facing abuse or neglect.	26.4	48.5	14.7	9.4	1.0	395	2.1015	0.932	Agree
4	There is good collaboration between social workers and healthcare providers in supporting older adults.	24.4	53.2	16.5	5.3	0.5	395	2.0433	0.817	Agree
5	I believe that social workers are adequately trained to support older adults.	45.5	45.0	7.4	-	2.0	395	1.6803	0.782	Agree
6	There is a need for more targeted social work programs specifically addressing elder abuse and neglect.	52.7	38.3	6.2	1.8	1.0	395	1.6015	0.772	Agree
Cluster Mean								2.1029	0.922	Agree

Source: Fieldwork, 2025

The table above indicates that respondents generally lean toward agreement, reflecting a moderately positive perception of social work services for older adults. The overall cluster mean (2.10) indicates that respondents generally lean toward agreement, reflecting a moderately positive perception of social work services for older adults. The lowest means (1.60–1.68) for items 5 and 6 reveal strong agreement that there is a need for more targeted social work programs addressing elder abuse and neglect and that social workers are adequately trained to support older adults. The highest mean (3.01) for awareness suggests

neutral or mild disagreement, meaning that not all older adults are aware of the social work services available in their communities. The standard deviation (0.92) reflects moderate variability in responses opinions differ slightly but remain relatively consistent across items.

In the interview, some participants reiterated that social work interventions or programs currently exist in their community.

One of the interviewees reported:

To the best of my knowledge, one of the social work services here is known as Community-Based Support Programmes. These programmes focus on creating community groups that provide mutual aid and companionship for older adults. They often involve home visits, social activities, and health monitoring. These initiatives enhance social interaction and reduce isolation, fostering a sense of belonging. However, their effectiveness can vary due to limited awareness and inconsistent participation among community members (Mr. I Male 72yrs/ 11/7/2025).

Another interviewee comments:

In this region, there are government initiatives, such as the National Social Safety Nets Coordinating Office (NASSCO), which aims to provide financial support to older adults through pension plans and welfare programs. While financial assistance helps alleviate poverty among older adults, challenges such as corruption, bureaucratic inefficiency, and limited coverage hinder full accessibility to these resources. Many of us (older individuals) still struggle to receive their benefits (Mrs E, Female, 68 years/ 9/7/2025).

Another interviewee reported:

I know there are Non-governmental organizations (NGOs) and community health groups that facilitate health initiatives focusing on the physical and mental well-being of older adults, including regular health check-ups, medication distribution, and health education. These programmes improve health outcomes by addressing preventive care. However, accessibility can be an issue, particularly for most of us in rural areas where health facilities are limited (IDI Mr U Male 61 yrs/ 11/7/2025).

Another interviewee advocated:

I want to suggest that there should be organizations that work to raise awareness about older adults' abuse and the importance of elder care through workshops, seminars, and media outreach. Such campaigns can lead to increased community sensitivity towards the issues affecting older adults, promoting respectful treatment and support. However, without systemic changes, awareness alone does not always translate into action (IDI Mr D Male/63yrs/ 9/7/2025).

Another interviewee stated:

Training programs should be offered for family caregivers and community members on best practices for caring for older adults, focusing on physical, emotional, and psychological support. Providing education to caregivers significantly improves the quality of care that older adults receive. However, the ongoing need for more trained caregivers remains a challenge, as many families still lack the resources to implement learned practices (Mrs E, Female, 68 years/ 9/7/2025).

Another interviewee noted:

I believe that the development of integrated care programmes in this community, which combine medical, psychological, and social services tailored to the needs of older adults, will adequately address the care and welfare of older adults. This program should focus on preventive care and the management of chronic diseases. Training for social workers in geriatric care, collaboration with local health facilities, and funding for mobile health clinics that can reach rural areas. Partnerships with local NGOs and health organizations to provide comprehensive health screenings, follow-up care, and health education initiatives targeting older adults (IDI Mrs. C Female 70yrs/ 9/7/2025).

Another interviewee averred:

We need expansion of home-based care services to provide in-home assistance, including personal care, meal provision, companionship, and medication management for older adults in my community. Furthermore, there should be recruitment and training of community health workers and caregivers skilled in geriatric care, along with the provision of transportation resources to facilitate regular visits to patients. Volunteer programs, often initiated by local community members, churches, or youth groups, provide companionship and support, thereby reducing isolation among older adults. Implement awareness campaigns and create accessible reporting mechanisms for elder abuse and neglect, ensuring that older adults and their families know their rights and available resources. IDI Mr N Male 75yrs/10/7/2025).

Another interviewee maintained:

All I want to suggest is to develop educational materials and training sessions for community leaders and social workers on recognizing and responding to older adults' abuse. Collaborate with community organizations to conduct workshops and mobilize community advocates for the rights of older adults, thereby fostering a culture of respect and protection for this vulnerable population. Moreover, there is a need for the creation of community centres dedicated to older adults that offer recreational activities, health workshops, social gatherings, and resources for both caregivers and seniors. Physical space for centres, staff trained in geriatric care and social work, materials for workshops, and activities tailored to interests. Engage local businesses and philanthropists for funding and resource donations, while encouraging community involvement to provide programming that meets the needs of older adults (IDI Mrs. C Female 70yrs/ 9/7/2025).

Another interviewee posited:

As one of the older adults in this community, I advocate for the development of transportation services tailored for older adults to facilitate their access to healthcare facilities, social activities, and essential services. Funding for transport services, vehicles adapted for older adults, and volunteer drivers to assist in getting seniors to appointments. Partnerships with local taxi services or community groups that can provide volunteer transport, along with outreach programmes to educate seniors on public transport options available to them (Mrs R, Female, 77yrs/ 10/7/2025).

4.3 Discussion of Findings

The first research objective established a moderate level of perceived older adults' abuse in the community with physical and sexual abuse being the most visible, while neglect and isolation-though less recognized-remain widespread and damaging. This indicates that male and female older adults differ significantly in how they perceive or experience abuse. Especially, a higher percentage of females fell into the "high abuse" category compared to males, suggesting that female older adults may be more vulnerable to abuse or more aware of its occurrence in the community. Many participants reported different forms of abuse, including physical, emotional, psychological, and sexual abuse, which have significant adverse impacts on their overall wellbeing. This, in tandem with the study of Aslan and Erci (2020), who posited that older adult abuse can take many forms, including physical, financial, psychological, and sexual abuse, and neglect. More so, Ekundayo (2022) corroborates the findings of this study that elder abuse is a violation of basic human rights and medication abuse. In Nigeria, abuse may include witchcraft accusations and a lack of respect, among others.

Similarly, Kalayci and Ozkul (2020) further expand the possibility of mistreatment, abuse and neglect of the older adults owing to factors such as new family formation, cohabitation, disability both physical and mental, low cognitive and functional ability, low economic power of the population, the stress and problems of the caregiver in a situation of dependency, personal problems, and the prior existence of patterns of violence. This study is also consistent with James (2019), who noted that older adult neglect can be either physical or emotional and may consist of confinement, isolation, or denial of essential services. In this context, a case of neglect is established when a caregiver refuses or fails to provide or pay for the necessities of life, such as food, water, shelter, clothing, healthcare, medicine, comfort, and safety. Abandonment also comes under neglect. The authors also observed that elders can neglect themselves by not prioritizing their health and safety.

The second research objective reveal financial hardship, lack of training, limited health care, and weak social networks as major structural causes of older adult abuse in Etinan Local Government Area. This suggests that older adults' awareness of abuse does not significantly differ based on their level of formal education, as many participants reported their different levels of awareness of older adults in their respective household and community. Thus, this study aligns with Rinker's (2019) assertion that awareness and perception of older adults' abuse vary significantly across different cultures and communities within nations worldwide, based on their level of education and orientations. Aday *et al.* (2017) emphasized that societal attitudes toward older adults and older adults' care influence how abuse is perceived and addressed. Negative stereotypes regarding older adults can contribute to underreporting and stigma surrounding older adults' abuse (Bayrak Kahraman *et al.*, 2021).

In a similar vein, the findings of the study are supported by Ojifinni *et al.* (2023), who found that despite increased awareness, reporting rates of older adults' abuse and neglect remain low. The author noted that fear of retaliation, lack of knowledge regarding how to report, and a belief that nothing was done are significant barriers bedevilling awareness of older adults' abuse and neglect. Bayrak-Kahraman *et al.* (2021) established that awareness of what constitutes older adult abuse varies significantly across communities. Many societies may not recognise neglect or financial exploitation as forms of abuse, as these issues can be deeply embedded in cultural practices and familial obligations. Hence, Kahraman *et al.* (2021) advocated for training programmes focused on elder abuse recognition to enhance awareness and improve responses.

The third research objective indicates that older adults' abuse is widely perceived as a pervasive issue that erodes older adults' stability, dignity, health, and social connections, leading to enduring harm and diminished quality of life. The result was significant as

participants identified different factors contributing to the vulnerability of abuse among older adults. In agreement with the findings of this study, DaLiema and Conrad (2017) revealed that economic or financial abuse is one of the factors contributing to the susceptibility of abuse of older adults and is often defined as the exploitation of the older person's resources, usually by someone in a position of trust. The most common tactics of economic and financial abuse include misusing, exploiting, or stealing the older person's money, property, or assets, and/or coercing and pressuring the older person to sign legal documents regarding financial or property arrangements. Similarly, Kanougiya *et al.* (2021) postulated that economic and financial abuse co-occurred with other forms of abuse, including physical, psychological, emotional, and verbal abuse, neglect, threats, and controlling behaviour.

Furthermore, in consistent with the findings of this study, Schwarz *et al.* (2022) stated that lack of access to transport services, inadequate financial support and awareness of rights and services, lack of access to one's resources, having a family member who is poor or unemployed, and having a family member with a particular religious or spiritual belief are contributing factors to older adults abuse in contemporary societies. Kanougiya *et al.* (2021) further opined that there are a range of factors that can contribute to economic and financial abuse, and they include socio-demographic factors, e.g., language barriers, being female, indigenous status, or living in a rural or remote area, and a host of others. Carne (2018) established that relationship factors, such as being divorced or separated, having spent less than thirty years with a partner, dynamics of trust and dependence, and having a business or business relationship with the perpetrator, are significant.

The fourth research objective established that personal awareness and willingness to act are relatively high but systemic and community level support remain weak. The participants differed significantly in how they perceived the underlying impacts of abuse against older

adults. This study validates the findings of Barnes et al. (2022) that older adults who suffer from abuse and neglect often become socially isolated, losing connections with family and community. This isolation exacerbates feelings of loneliness and contributes to deteriorating mental health (Beller & Wagner, 2018). Similarly, Sathya et al. (2022) pointed out that it often leads to severe physical injuries, such as bruises, fractures, and, in extreme cases, death. Furthermore, Dyer et al. (2021) and Mohammed (2018) opined that the effect of abuse and neglect on the wellbeing of older adults in Nigeria is a significant concern, affecting their physical, mental, and emotional health.

Moreover, this study is equally substantiated by Biordi and Nicholson (2013) that older adults who experience abuse may withdraw from social interactions, leading to feelings of loneliness and diminishing self-worth. Yeung et al (2015) indicate that physical abuse can lead to long-lasting health complications, increasing the predisposition of older adults. Equally, experiencing abuse or neglect can lead to anxiety, depression, and a decline in cognitive functioning (Kohn *et al.*, 2015). Older adults' victims may feel hopeless and isolated, impacting their mental and overall wellbeing (Lazenbatt & Devaney, 2014).

The fifth research objective indicates that respondents generally learn toward agreement, reflecting a moderately positive perception of social work services for older adults. The participants indicated that their awareness and perception of existing social work interventions had a significant influence. The findings of this study align with those of Drolet and Choudhury (2024), who revealed that social workers play a crucial role in supporting the older adult population by addressing various challenges the elderly may face in accessing care and services. One of the ways they accomplish this is through advocacy. Thus, Storey (2020) stated that Social Workers work to prevent older adults' abuse by raising awareness about the signs and risk factors of abuse, educating older adults and their families about their

rights, and providing healthy relationships within families and communities. Equally, Bennett & Kingston (2013) corroborated the findings of this study that Social workers intervene in cases of suspected or reported older adult abuse by conducting assessments, providing crisis intervention, and developing safety plans to protect older adults from further harm.

Additionally, in tandem with findings of this study, Williams & Field (2021) opined that Social workers advocate for the rights of older adults who have experienced abuse and help them access legal assistance, healthcare services, and other resources to address their needs. They also advocate for policy changes and systemic reforms to improve the response to older adults' abuse at the community and societal levels.

CHAPTER FIVE

SUMMARY OF FINDINGS CONCLUSION AND RECOMMENDATIONS

5.1 Preamble

This segment of the study will focus on summary of the study, contributions to knowledge, contributions to knowledge, conclusions, recommendations and further studies.

5.2 Summary

The findings of the study show that older adults are still facing a myriad of challenges owing to a significant number of abuses and neglect being perpetuated by their families, caregivers, and society at large. Despite growing awareness campaigns and sensitization Programmes put in place by the Social workers and relevant stakeholders on the danger inherent in the abuse and neglect of older adults in society, there is a significant number of uninformed family members and caregivers who are still subjecting their older adults to a series of abuse and neglect. Based on the foregoing, this study was conducted to investigate the prevalence of older adult abuse and social work interventions in Etinan Local Government Area, Akwa Ibom State, Nigeria. Based on this, a review of the related literature was conducted, and five research questions were formulated to guide the study.

Similarly, five research objectives were developed. Simple random sampling was used to elicit information from 400 respondents, and Purposive sampling was used for in-depth interviews to gather data from 10 research participants. The data obtained were analyzed using pie charts, bar charts, frequency, and simple percentages for the demographic characteristics of the respondents, and Chi-square Statistical analysis to test the five research objectives of the variables under study. The results revealed a significant relationship among the variables under investigation at the 0.05 level of significance. The first objective ascertain the prevalence of different forms of abuse among older adults in Etinan Local Government

Area. The study established a moderate level of perceived older adults' abuse in the community with physical and sexual abuse being the most visible, while neglect and isolation-though less recognized-remain widespread and damaging.

Objective two assess the awareness and perceptions of abuse in study area. The study reveal financial hardship, lack of training, limited health care, and weak social networks as major structural causes of older adult abuse. Objective three identify the factors contributing to abuse in in study area. The findings established that older adults' abuse is widely perceived as a pervasive issue that erodes older adults' stability, dignity, health, and social connections, leading to enduring harm and diminished quality of life. Objective four examine the impact of abuse on older adults in study area. The study indicates that personal awareness and willingness to act are relatively high but systemic and community level support remain weak. The fifth objective evaluate existing Social Work Interventions among older adults in in study area. The study indicates that respondents generally learn toward agreement, reflecting a moderately positive perception of social work services for older adults.

5.3 Conclusions

The study examined the prevalence of older adult abuse in Etinan Local Government Area. It reveals a concerning pattern that underscores the vulnerability of this demographic. Findings indicate that older adults frequently encounter various forms of abuse, including physical, emotional, financial, and neglect, largely exacerbated by societal attitudes, economic hardships, and a lack of adequate support systems from significant others and caregivers. Thus, the high incidence of these abuses and neglects not only affects the physical and mental health of older adult individuals but also highlights societal failures in safeguarding their rights and dignity. Social work interventions play a pivotal role in addressing these challenges. By implementing targeted strategies such as awareness

campaigns, enhanced reporting mechanisms, and comprehensive support services, social workers can play a crucial role in protecting older adults from abuse. Collaborating with local communities, healthcare providers, and law enforcement can foster a holistic approach to prevention and response, ensuring that older adults receive the care, respect, and protection they deserve.

The issues of older adult abuse in the area of study, in particular, and in Nigeria in general require a concerted effort from all stakeholders, including government agencies, NGOs, and community members. Raising awareness, improving educational outreach, and establishing robust support frameworks are essential to mitigate abuse and empower older adults. Such efforts will not only improve their quality of life but will also foster a more compassionate and inclusive society that values and honours its older adults.

5.4 Recommendations

Based on the findings of this study, the following recommendations were made:

1. To improve older adults' wellbeing and care, government and relevant stakeholders should organize community workshops targeting families, caregivers, and older adults to raise awareness about elder abuse, its signs, and consequences.
2. There should be training programmes for social workers focusing on recognizing, reporting, and responding to elder abuse.
3. Local radio and television stations should sponsor the dissemination of information about elder rights and available support services. There should be the establishment of reporting mechanisms by setting up accessible and confidential reporting hotlines for older adults or community members to report abuse without fear of retaliation.

4. A comprehensive epidemiological study should be conducted by utilizing surveys and interviews to gather data on the prevalence of various forms of abuse among older adults in the Nigerian cultural context.
5. Support groups should be created for older adults to share experiences and discuss challenges in a safe space.
6. Collaborative teams that include social workers, healthcare professionals, and law enforcement should be formed to address elder abuse comprehensively.
7. There should be policies that protect the rights of older adults and establish legal frameworks for reporting and addressing elder abuse.

5.4 Contributions to Knowledge

The study has contributions to knowledge in the following ways:

1. Emphasized the importance of a holistic approach to supporting abused older adults.
2. Provided empirical evidence, on how effective the social work interventions were improving the well-being of older adult.
3. Identified the need for a multi-dynamic, collective method in providing support and assistance for abused older adult.

5.6 Further Studies

In line with the findings of the study, therefore, the following areas have been suggested for further studies:

1. The study was limited to the Etinan Local Government Area of Akwa Ibom State. There is a need for similar studies in other local government areas of the state and other geographical regions.

2. Further studies could be conducted by collaborating with academic institutions to explore the experiences and needs of older adults over time through longitudinal research.
3. Further studies could be done on the same topic using qualitative data only.
4. Further study could examine other circumstantial factors, such as psychological factors and emotional issues that affect older adults in the Nigerian cultural context.
5. Further studies could be done to examine the specific socio-cultural dynamics affecting older adults in other Local Government Areas. This study can inform the development of tailored interventions and policies.

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APPENDIX A
QUESTIONNAIRE

Questionnaire on: Prevalence of older adults abuse and social work interventions in Etinan Local Government Area" in Akwa-Ibom State, Nigeria

Dear Sir/Madam,

No:.....

I am a postgraduate student of the University of Benin and I am conducting a study titled “**Prevalence of older adult abuse and social work interventions in Etinan Local Government Area" in Akwa-Ibom State, Nigeria**”. Kindly assist in filling the questions below on the topic above. This study is strictly academic and it was utilized for that purpose, hence the respondent’s “identity” will not be included. Feel free to express your opinion on any given question as your response to the questions will not be altered but used as said. Thanks

Charles Mfon

SECTION A

Demographic Characteristic of Respondents

Section A:

1. Age: (a) 65-69 [], (b) 70-74 [], (c) 75-79 [], (d) 80years and above []
2. Gender: (a) Male [], (b) Female []
3. Religion: (a) Christianity [], (b) Islam [], African Traditional Religion [], Others [].

4. Education: (a) Primary [] (b) Secondary [] (c) Tertiary []

SECTION B: PREVALENCE OF OLDER ADULT ABUSE AND SOCIAL WORK INTERVENTIONS IN ETINAN LOCAL GOVERNMENT AREA" IN AKWA-IBOM STATE, NIGERIA

Please, tick (√) appropriately in the rate of agreement for each question below. The options available in the spaces provided are **Strongly Agree (SA); Agree (A); Undecided (UD); Strongly Disagree (SD); and Disagree (D)**

S/N	Questions	SA	A	UD	D	SD
The prevalence of different forms of abuse among older adults						
1	Emotional or psychological abuse of older adults is a common occurrence in my area.					
2	Physical abuse of older adults is prevalent among families in my community.					
3	Neglect of older adults, such as failure to provide basic needs, is frequently observed in my locality.					
4	Sexual abuse of older adults is a hidden issue in my community.					
5	I have witnessed financial exploitation of older adults in my community.					
6	Older adults often experience isolation or abandonment by their families.					
Factors contributing to abuse among older adults						
7	Financial difficulties in the household contribute to the neglect of elderly individuals.					
8	Lack of social support networks increases the risk of abuse among older adults					
9	Cultural beliefs and attitudes toward aging influence the treatment of elderly individuals					
10	Isolation and loneliness among older adults increase their vulnerability to abuse.					
11	Poor training and knowledge of caregivers can lead to unintentional neglect or abuse.					
12	Limited access to healthcare services contributes to					

	the neglect of older adults.					
The awareness of abuse amongst older adults' older adults						
13	There are sufficient community resources available to educate people about elder abuse					
14	Elder abuse is often overlooked or dismissed in my community					
15	Most people in my community understand what constitutes elder abuse					
16	I believe that elder abuse is a serious issue in my community					
17	I feel comfortable reporting suspected cases of elder abuse to authorities					
18	I am aware of the different forms of elder abuse (e.g., physical, emotional, financial)					
Awareness and perceptions of abuse among older adults						
19	I believe that elder abuse is a serious issue in my community.					
20	I am aware of the different forms of elder abuse (e.g., physical, emotional, financial).					
21	Most people in my community understand what constitutes elder abuse.					
22	I feel comfortable reporting suspected cases of elder abuse to authorities.					
23	There are sufficient community resources available to educate people about elder abuse.					
24	Elder abuse is often overlooked or dismissed in my community.					
Existing Social Work Interventions on abuse among older adults						
25	Social work interventions effectively address the needs of older adults in my community.					
26	I believe that social workers are adequately trained to support older adults.					
27	Current social work programs provide sufficient					

	resources for elderly individuals facing abuse or neglect.					
28	There is good collaboration between social workers and healthcare providers in supporting older adults.					
29	Older adults are aware of the social work services available to them in the community.					
30	There is a need for more targeted social work programs specifically addressing elder abuse and neglect.					

APPENDIX B

INTERVIEW GUIDE

THE PREVALENCE OF ELDERLY ABUSE AND NEGLECT AMONG OLDER ADULTS AND SOCIAL WORK INTERVENTIONS IN ETINAN LOCAL GOVERNMENT AREA" IN AKWA-IBOM STATE, NIGERIA

Age: _____

Gender: _____

Religious affiliation: _____

Field of practice: _____

Years of experience: _____

Educational background: _____

Questions for interview:

The prevalence of different forms of elderly abuse and neglect among older adults

1. **In your opinion, how common is elderly abuse and neglect in your community? Can you provide any examples or anecdotes?** And what specific forms of abuse do you believe are most prevalent?
2. **What factors do you think contribute to the underreporting of elder abuse and neglect in your community?** And are there particular barriers that prevent older adults from speaking out or seeking help?

Factors contributing to elderly abuse and neglect among older adults

3. **Can you describe any specific factors or circumstances in the community that you believe contribute to elderly abuse and neglect?** And how do you think these factors affect the treatment of older adults?
4. **How does cultural beliefs and norms in your community influence the way older adults are treated?** And are there any traditional practices that may inadvertently contribute to abuse or neglect?

Impact of elderly abuse and neglect on older adults among older adults

5. **In your experience, how does elderly abuse or neglect affect the mental health of older adults in your community?** Can you share any specific examples of how individuals have been impacted emotionally or psychologically?
6. **What physical health consequences have you observed among older adults who have experienced abuse or neglect?** Are there particular health issues that seem to be more common in these cases?

Awareness and perceptions of elderly abuse among older adults

7. **What is your understanding of what constitutes elderly abuse? Can you describe the different forms of abuse you are aware of?** How did you come to learn about these forms of abuse?
8. **In your opinion, how do cultural beliefs and societal norms in your community influence perceptions of elderly abuse?** Are there any misconceptions about elderly abuse that you think should be addressed?

Existing Social Work Interventions among older adults

9. **What social work interventions or programs currently exist in your community to support older adults?** How effective do you believe these interventions are in addressing the needs of older adults?
10. **In your opinion, what improvements or additional services could be implemented to enhance the support provided to older adults through social work interventions?** What resources or community support do you think would be necessary to achieve these improvements?

APPENDIX C

LETTER REQUESTING PERMISSION AND INFORMED CONSENT FORM FOR ELDERS

Dear Sir/Madam,

My name is **Charles Mfon**, student of Social Work at the University of Benin, Nigeria. I am a researcher conducting a study on the prevalence of elderly abuse and neglect among older adults and social work interventions in Etinan local government area" in Akwa-Ibom State, Nigeria. Your participation in this study is entirely voluntary. The purpose of this study is to understand the prevalence of elderly abuse and neglect among older adults and social work interventions in Etinan local government area" in Akwa-Ibom State, Nigeria. If you agree to participate, you was asked to share your personal experiences related to disturbing situations within your family life. Your responses was kept confidential and anonymous.

The interview will run for one hour and all we will discuss was kept secret between us. This means that I will NOT put your name in the research study; I will give you a different name when writing your views, so that nobody will know the words belong to you.

You are not forced or obliged to participate in the interview. You can say no if you are not happy and uncomfortable and do not want to continue at any time during the interview. If you do not participate, it will not affect you in any way and you will not be punished or maltreated by anyone; and if you decide to participate there are no rewards.

Do you have any questions about the project at this stage? If you are willing to participate please sign the form below.

In view of the information provided to you above, if you are willing to participate in the research, please sign the consent form provided below.

Thanks so much for your time. I look forward to hearing your views.

Yours faithfully,

Mr. Charles Mfon
Researcher

CONSENT FORM FOR ELDERS PARTICIPATION IN THE STUDY

I hereby consent to participate in the semi-structured interview on the prevalence of elderly abuse and neglect among older adults and social work interventions in Etinan local government area" in Akwa-Ibom State, Nigeria. The purpose and procedures of the study have been explained to me. I understand that my participation is voluntary and that I can withdraw from the study at any time without any negative consequences. I understand that my responses waskept confidential by the researcher.

Name of Participant: _____

Date: _____

Signature or right thumbprint of elder: _____