Executive Summary

Violence against elderly people is a global public health problem. It is on the rise both in the developed and developing countries which necessitated the policy makers at the international and national level to come out with legislations for their safety and security. With advancing age, vulnerability of elders to abuse increases. Increasing number of reported incidences of violence against elderly people by the print media in West Bengal prompted the researcher to think of the issue for systematic investigation.

The broad objective of the present research was to understand the nature of violence experienced by the elderly population and its impact on mental health. The physical health status of the elderly people was also explored. Nine specific objectives were developed and 26 hypotheses were formulated for verification. The study was carried out in Kolkata, West Bengal covering male and female elderly people above 60 years of age and they were selected from the Old Age Homes located in and around Kolkata, West Bengal. A total of 200 elderly people, 100 male and 100 female, participated in the study voluntarily provided complete data and they were selected following convenience sampling technique from five Old Age Homes. Five study tools, one Semi-structured Questionnaire and four standardized psychological study tools viz., Psychological General Well-Being Schedule, The Satisfaction with Life-scale, Subjective Happiness Scale, and Maslow’s Security and Insecurity Feeling Inventory were used after local adaptation for data collection. Internal consistency of the psychological tests was ascertained by Cronbach’s alpha, which indicates high internal consistency of most of the tests ranging from .75 to .90. Therefore, it might be stated that all the tests are highly reliable in the Indian sample.

Findings revealed that most of the elderly people studied up to Higher Secondary level (114, 34.0%) while 34.0% and 18.9% were graduate and Post Graduate respectively. The Government service was the most common
profession for most of the male members while women were housewives. About 83.5% of the elderly people were married and the rest 16.5% were unmarried. About 23.0% married people did not have any child. Out of 200 elderly people covered in the study 147 (73.5%) belonged to West Bengal and the rest 26.5% came from the neighbouring states. Majority of them belong to higher middle class category.

Findings with regard to health status are concerned, 81.5% were suffering from either major or minor ailments like (i) instability, fall, arthritis, movement disorder, pain in bones and joints, osteoporosis (55.8%), (ii) urinary incontinence, constipation, nocturnal enuresis, loss of sphincteric tone (38.0%), (ii) cataract, narrowing of visual field, glaucoma, retinopathy, retinal detachment, color vision (36.8%), (iv) deafness, progressive loss of hearing, otitis media (14.2%), and so on.

As reported, 48.5% elderly people were suffering from some sort of psychological problems like insomnia (57.7%), forgetfulness/dementia (73.2%), anxiety (10.3%), depression (52.6%) and so on. About 69.0% of them were undergoing treatment. Self savings was the main source of money for bearing medical expenses (73.9%), followed by support form children (23.2%) and relatives (2.9%).

Most of them had been staying at Old Age Homes for the last one to three years (87.5%) and the main reasons for coming to Old Age Homes include lack of space (46.5%), followed by lack of manpower at home to look after them, personal preference to live independently (28%) and humiliation experienced at the family (12.5%).

Further findings disclosed a very disturbing picture as 87.0% female elderly people reported feeling of insecurity at their own house compared to 16.0% male elderly people which was found to be statistically significant at 0.01 levels. At the same time, 82.0% female elderly people reported neglect as compared to only 7.0% male elderly people (p<0.01). Again significantly more number of
female elderly people reported mental harassment. So far as physical violence is concerned, 15.0% and 9.0% female and male elderly people reported that they had experienced the same (p>0.01).

In case of problem, most of the elderly people felt like to contact their own children (71.0%), followed by siblings (20.5%) while rest of them contacted other people. Regarding social support during crisis situation in life, 19.0% female and 23.0% male did not receive the same.

Interestingly an overwhelming number of elderly people were happy at the Old Age Homes. However, about 52.5% felt that Old Age Homes should be more neat and clean and quality of food should be better (39.5%). A good number of them (16.5%) also suggested that there should be some recreational facilities at the Old Age Homes.

Data pertaining to psychological variables i.e., Psychological General Well-being, Subjective Happiness and Feeling of Security are concerned, male elderly people were found to be with higher mean score compared to their counterparts i.e., psychologically male elderly people were in better state of mind compared to their counterparts i.e., female elderly people.

Although mean score of married elderly people in Psychological General Well-being was found to be higher compared to unmarried elderly people, unmarried elderly people were found to be more satisfied in life (p<.05). At the same time, unmarried people had better feeling of happiness compared to married people. However, married people had better feeling of security compared to unmarried people.

Further analysis of data revealed that elderly people who experienced any sort of neglect in the family had poor state of mental health in term of psychological general well-being, subjective happiness, satisfaction with life and feeling of insecurity.
On the basis of the findings of the present study, a number of steps have been suggested at the end of Chapter V for prevention, intervention and rehabilitation of the elderly people in addition to future directions for further research in the same area.