Violence against old people in the city of Campinas, São Paulo, in the last 11 years: a temporal analysis

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Abstract

Objective: To analyze the notifications of cases of violence against old people in the period from 2009 to 2019 using data obtained from the Violence Notification System (SISNOV) in the city of Campinas, State of São Paulo, Brazil. *Method:* This is an epidemiological research with a quantitative, descriptive approach and temporal trend. For the analysis of the notifications, information was observed according to the sociodemographic variables characteristic of violence and its aggressor, and according to the annual temporal analysis: age group, types of violence, means of aggression, and gender of the author. *Results:* 1,217 old people suffered aggression, (69.5%) of which were female, with a predominance of the age group between 60 and 69 years (35.8%), widows (37.7%), and whites (64.4%). The most prevalent type of violence was neglect (33.1%), with the residence (92.9%) being the place of greatest occurrence. Most of the aggressors were male (55.6%), and the way to do it was with body strength (24.4%). The temporal trend analysis showed an increase in the age group: 60-69 years, physical violence, means used for that - body strength, objects, and poisoning -, and gender of the aggressor - both. *Conclusion:* The results obtained were in line with other studies, indicating a trend in the profile of victims and aggression, and it is important for this group to know their rights and be encouraged to make complaints, as well as health professionals so that increasingly effective public policies are developed to address this issue.

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INTRODUCTION

The phenomenon of family violence permeates the entire history of mankind. However, it was only from the mid-twentieth century that it began to deserve due attention by health professionals as they began to report cases[1]. Currently, studies related to violence have progressively sought to understand the situations of abuse faced by the old people in different settings. This fact is motivated both by the increase in the number of victims in our country and by national and international surveys indicating the family as being the main source of occurrence of cases of violence against this age group[2].

According to the World Health Organization (WHO), violence comprises the intentional use of physical force or power (in fact or threatening) against oneself or another person, group, or community, resulting in or the possibility of injury, death, psychological damage, developmental disability or deprivation, or all of them. Regarding its classification, violence can be classified as physical, psychological, sexual, financial abuse, neglect, abandonment, and self-neglect[3].

In Brazil, violence against old people is reflected in the bidirectional nature of dependence imposed on the generations usually due to economic factors, as they all reside in the same household. This interaction based on differences and shared values can be a burden to the caregiver who generally works in an unpaid way and has other duties, especially when family financial resources are scarce, and in the presence of difficulties of locomotion, behavioral disorders, and cognitive deficits, often inherent to senescence and senility. These situations set the scene for the establishment of conflicts in the domestic space, usually resulting in violence[4,14].

Violence against old people is a social and health problem within the scope of public policies and on the rise in Brazil, but with recent compulsory notification. *Estatuto do Idoso* (the statute for old people) is created in 2003, a great accomplishment for this population which, among other guidelines, determines that suspected or confirmed cases of abuse must be reported to the competent authorities. In 2011, other legal provisions emerged to assist in the increase of notifications in Brazil: the inclusion of cases in the list of diseases and conditions of compulsory notification in all public and private health services in the national territory, and the requirement of communication to the epidemiological surveillance. Despite this, the formalization of a policy alone does not provide protection guarantees, since for the consolidation of a right it is necessary for it to be taken over by the population so that they do not become vulnerable victims of aggressors[5].

Concerned with the population's vulnerability to exposure to violent acts, the municipality of Campinas, State of São Paulo, implemented in 2005 the Violence Notification System (SISNOV) in an electronic, integrated, intersectoral, and interinstitutional way, for disclosing cases of domestic and sexual violence against children and adolescents, women and old people[6]. In 2009, information began to be shared by annual newsletters about cases of violence against old people[6].

However, violence against old people has been poorly reported to the competent bodies (police authorities, Public Ministry, or the State and Municipal Councils for the Old People), remaining disguised in the context of secrecy or family arrangement. Among the obstacles to the act of notifying are the precariousness of public resources to investigate and solve the situations reported, the lack of a protective network, the lack of notification flow, as well as the low training of professionals to identify the cases. The multiplicity and failure to integrate information sources and the high rates of under-registration are also challenges to be overcome, aiming at obtaining estimates of violence occurrence to assist surveillance and assistance for this population[7,10].

Bearing in mind that violence against the old population is a serious public and social health problem, little reported and of multifactorial causes, the need to investigate the data referring to these cases in the city of Campinas, State of São Paulo arose, since it has its coverage system for reporting cases of violence. Also, no study on this topic was found in the literature for the municipality.

Given the need for an investigation leading to thinking of ways to guarantee the care of this population and ensure that the law is effectively

enforced, the present study aimed to analyze the sociodemographic aspects, characterize violence and the aggressor by the analysis of notifications of cases of violence against old people from 2009 to 2019, also comprising a historical series of time trends, through data obtained from the Violence Notification System (SISNOV) in the city of Campinas, State of São Paulo, Brazil.

METHOD

This is an epidemiological research with a quantitative, descriptive approach and temporal trend carried out in the municipality of Campinas with secondary data obtained from the SISNOV on violence against individuals aged 60 years or over in the period from 2009 to 2019.

Campinas, located in the countryside of the State of São Paulo, Brazil, has an estimated population of 1,220,146 inhabitants in 2019[8], of which 146,368 are old people, 62,538 are male, and 83,830 are female, representing about (12%) of the municipality's residents.

Data was collected via access to the SISNOV *website*: http://sisnov.campinas.sp.gov.br/. Then, a database containing all the variables to be analyzed and the respective years was subsequently prepared by the authors. The variables were analyzed according to the sociodemographic profile of the old people (age, gender, marital status, education level, and race/color), and also according to the characterization of violence (types of violence, place of occurrence, the gender of the author, means used for that, relation with the victim, and occurrence).

The description of the notifications for the period analyzed for the sociodemographic variables and characterization of violence and aggressor included the creation of tables with values of absolute frequency (n) and percentage (%).

To analyze the annual time trend of notifications of cases of violence against old people, the variables of interest (age group, types of violence, means of aggression, and gender of the author) were used, chosen by the authors according to the relevance indicated by the scientific literature and presented in the format of figures. The Chi-square trend test of *Cochran-Armitage* was used, and the level of significance adopted for the statistical tests was (5%), that is, $p<0.05$.

RESULTS

The total notifications identified for the study period comprised 1,217 victims of violence, of which (69.5%) were female and (30.3%) male, with a predominance of (35.8%) in the age group between 60 and 69 years old, (37.7%) of widowed marital status, and (64.4%) white of race/color. Regarding education, (31.9%) had incomplete/complete elementary school (Table 1).

Regarding the characterization of cases of violence, the most prevalent types are neglect and abandonment (33.1%), followed by psychological and moral (24.9%), with the own household (92.9%) being the place of highest occurrence. Most of the aggressors were male (55.6%), and the way to do it was with body strength and beating (24.4%). Regarding the relation with the victim, it was identified that the children are the main responsible (56.6%), and in (46.8%) of cases the act was repeated (Table 2).

The analysis of the annual time trend of the variable age group (Figure 1) showed a significant increase for 60-69 years ($p<0.001$), and a significant decrease for 70-79 years ($p=0.011$) over time.

For the types of violence practiced (Figure 2), the time trend analysis over the years showed significance for physical ($p<0.001$) and others ($p<0.001$), showing an increase over time, and psychological/moral ($p<0.001$), torture ($p<0.004$), and financial/economic ($p<0.001$) decreased.

Regarding the means used for the aggression (Figure 3), there was a significant time trend for body strength/beating ($p<0.001$), objects (blunt, sharp, hot, firearm) ($p<0.001$), poisoning ($p<0.001$), and other ($p<0.001$), increasing over time.

For the analysis of the gender of the aggressor, the time trend analysis showed a significant decrease over time for females ($p<0.031$), as both genders ($p<0.001$) increased over the years.

Table 1. Sociodemographic profile of old people (N = 1217) from 2009 to 2019 in Campinas, SP.

Characteristics of victims	n (%)
Age group (years old)	
60 - 69	436 (35.83)
70 - 79	422 (34.68)
80≥	359 (29.50)
Gender	
Male	369 (30.32)
Female	846 (69.52)
Ignored	2 (0.16)
Marital status	
Ignored/blank	163 (13.39)
Single	137 (11.26)
Married	337 (27.69)
Widow/er	459 (37.72)
Divorced	121 (9.94)
Education Level	
Ignored/blank	489 (40.18)
Illiterate	115 (9.45)
elementary school 1st - 4th grade incomplete/complete	389 (31.96)
elementary school 5st - 8th grade incomplete/complete	102 (8.38)
Incomplete/complete high school	85 (6.98)
Incomplete/complete higher education	37 (3.04)
Race/color	
Ignored/blank	161 (13.23)
White	784 (64.42)
Black	128 (10.52)
Yellow	10 (0.82)
Brown	134 (11.01)

Source: The authors.

Table 2. Characterization of cases of violence (N = 1217) from 2009 to 2019 in Campinas, SP.

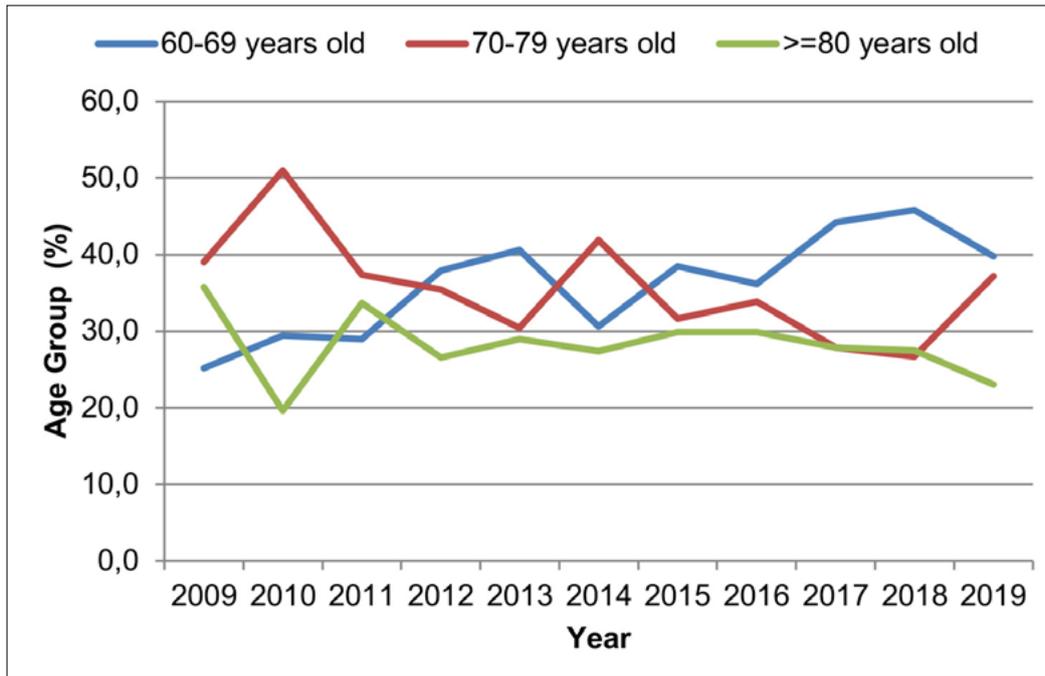| Characterization of violence	n (%)
Types of violence	
Physical	332 (20.22)
Psychological/moral	410 (24.97)
Torture	11 (0.67)
Sexual	21 (1.28)
Financial/economic	211 (12.85)
Neglect/abandonment	544 (33.13)
Others	113 (6.88)
Place of occurrence	
Ignored/blank	31 (2.55)
Residence	1131 (92.93)
Thoroughfare	27 (2.22)
Collective householding	11 (0.90)
Others	17 (1.40)
Gender author aggression	
Blank	10 (0.82)
Ignored	74 (6.08)
Male	677 (55.63)
Female	374 (30.73)
Both genders	82 (6.74)
Means of aggression	
Body strength/beating	297 (24.40)
Hanging	14 (1.15)
Objects (blunt, sharp, hot, firearm)	57 (4.68)
Poisoning	39 (3.20)
Threat	252 (20.71)
Other aggression	103 (8.46)
Ignored/blank	455 (37.39)
Relation with the victim	
Child	689 (56.61)
Friend	36 (2.96)
Former spouse	14 (1.15)
Caregiver	19 (1.56)
Unknown	40 (3.29)
Grandchild	42 (3.45)
Sibling	28 (2.30)
Spouse	130 (10.68)
Other relations	219 (18.00)
Occurred other times	
Ignored/blank	283 (23.25)
Yes	570 (46.84)
No	364 (29.91)

Source: The authors.

Figure 1. Analysis of the time trend for the age group of old people victims of violence in the period of 2009-2019, Campinas, SP.
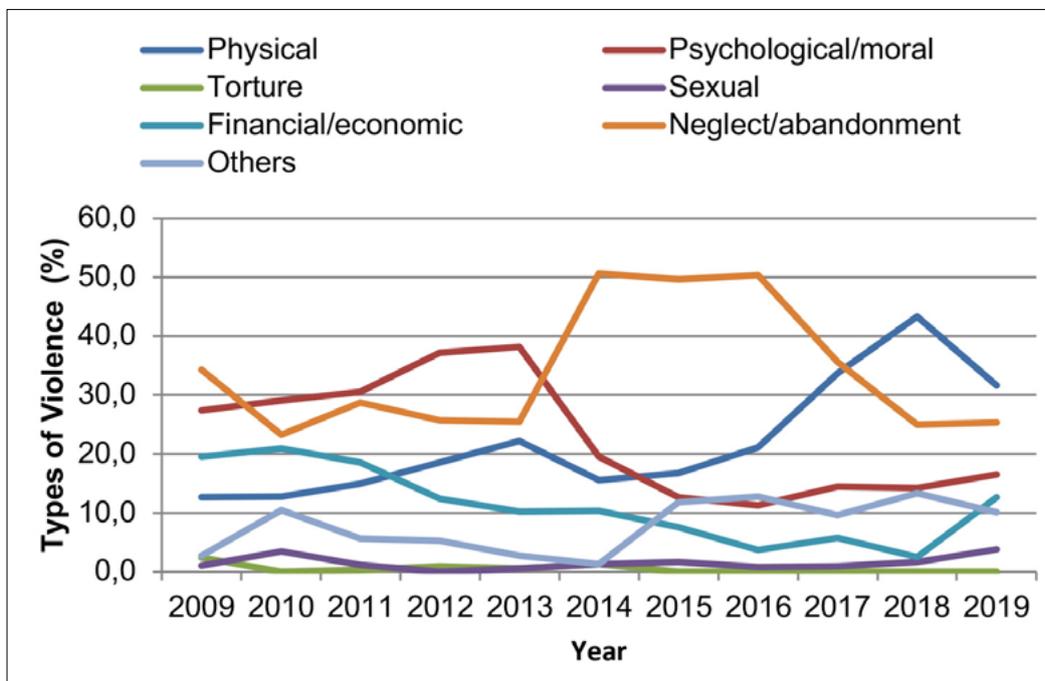
Source: The authors.

Figure 2. Time trend analysis of the types of violence against old people. 2009-2019, Campinas, SP.
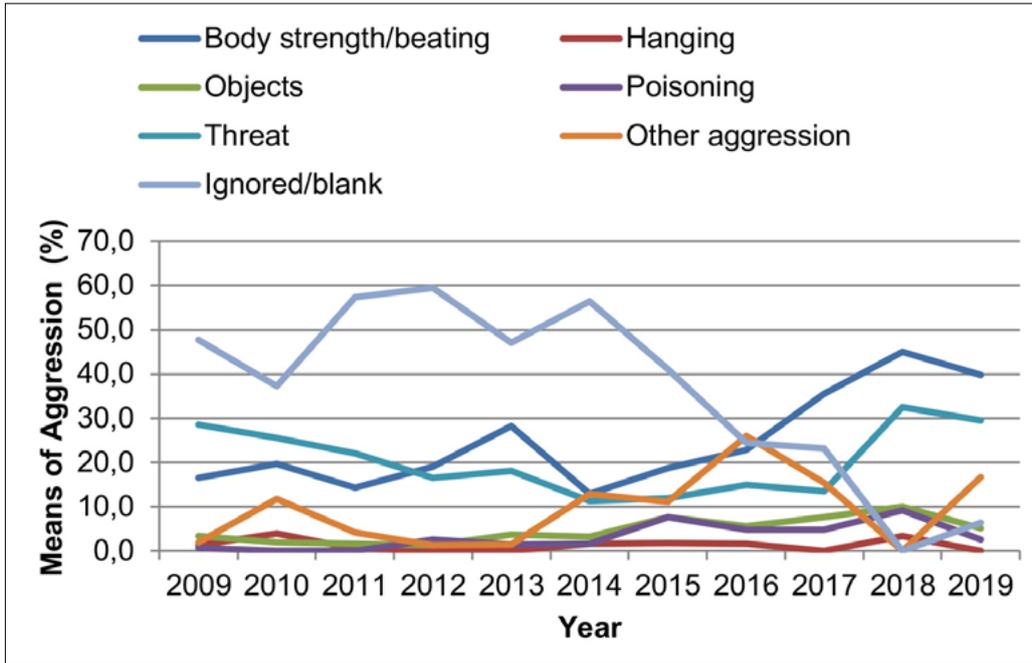
Source: The authors.

Figure 3. Time trend analysis of the means of aggression. 2009-2019, Campinas, SP.
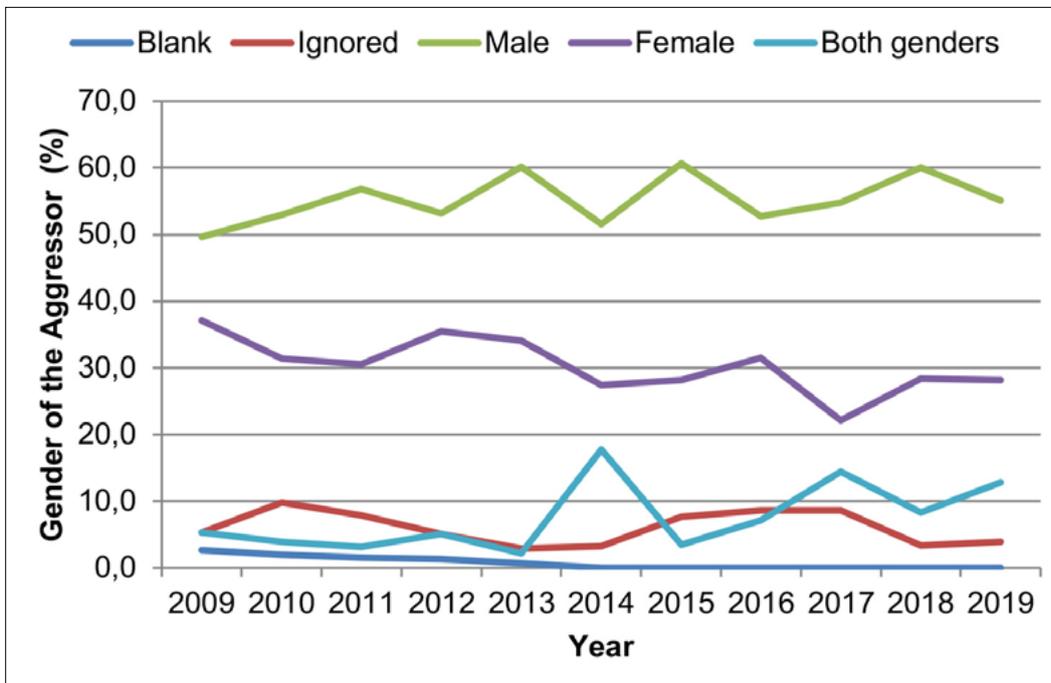
Source: The authors.

Figure 4. Time trend analysis of the gender of the aggressor, 2009-2019, Campinas, SP.

Source: The authors.

DISCUSSION

This historical series study identified 1,217 notifications of cases of violence against old people in the municipality of Campinas, State of São Paulo, Brazil, over the past 11 years.

Regarding the sociodemographic profile of the old people abused, the main results found showed the following prevalence: age group between 60 and 69 years old, women, widows, with a low level of education, and white race/color, which is consistent with other similar studies carried out[9-11] such as the one developed in three Brazilian municipalities (Ribeirão Preto, SP, Teresina, PI, and João Pessoa, PB) aiming to identify the sociodemographic characteristics of victims and aggressors, types of violence, and places of occurrence by the analysis of police reports. The researchers found the prevalence of cases in the age group of 60 to 69 years old, female, married, and with low education[9], differing from the present study about marital status, as the prevalence was of widowed women.

An investigation carried out in the city of São Paulo[11], an integral part of the SABE study (Health, Well-being, and Aging) with 1,126 old people, found a prevalence of (10%) of violence against this age group. Regarding the sociodemographic characteristics, (59.8%) were female and (59.1%) of white race/color; the findings were similar to the present study.

The predominance of old females observed in the vast majority of studies about violence has been described in the scientific literature as the feminization of old age, being characterized by an increase in the number of women in relation to the number of men in this age group[12]. Some factors contributing to this discrepancy can be related to gender inequality in relation to life expectancy. Despite the greater longevity, women have more functional limitations, biological aspects, the difference in exposure to mortality, occupational risk conditions, and use of legal drugs. Also, women tend to take better care of their health, dedicating more time and attention to self-care and seeking more specialized services. The world trend towards the feminization of old age was seen in the last demographic census carried out by IBGE in 2010, when it demonstrated that females represent (55.5%) of the old population in Brazil[12].

Another variable having an important association with violence in old people is education. In the present study, there was a predominance of the low level of education, corroborating the findings from international and national studies[9] in which subjects with more years of education are less likely to suffer aggression when compared to those with less education[13]. On the other hand, the results presented here contradict those presented in a research carried out in Betim, Minas Gerais, where old women with the complete elementary school had a lower risk of suffering violence when compared to those with a higher level of education - above the 5th grade[13]. However, it is worth emphasizing and supporting the findings of Avanci, Pinto, and Assis[10] that education favors tolerance and acceptance of human rights.

The predominance of neglect/abandonment (33.13%) and psychological/moral violence (24.97%) reaffirms the findings of Matos et al.[14] who identified (56%) of cases of neglect and (21%) of abandonment in a study carried out at a reference center in geriatric and gerontological health at Distrito Federal. In a literature review[15], the most common types of violence identified by the authors were the psychological, physical, and financial ones.

The time trend analysis of the present study showed an increase in physical aggression and other types of violence over the age of 11. Said increase can be explained by the dependence of the old people on carrying out their daily activities, becoming increasingly dependent on their caregivers, a fact that is considered a public health problem as it causes important losses in the quality of life of the old people.

In the findings of the present study, attention is drawn to the characteristics of the means of aggression, comprising body force/beating, use of objects (sharp, hot, firearm), and poisoning, which have shown important growth, especially between the years 2016 and 2018 representing the main means of abuse. In a study on intrafamily violence with old people seen in urgent and emergency services in 24 Brazilian capitals and the Federal District, the authors found that (28.6%) of them were victims of

body strength/beating, (18.3%) of blunt objects, and (10.5%) of poisoning[10].

Intrafamily violence has peculiarities that deserve careful attention, especially by the professionals involved in investigating and addressing this type of occurrence. Each family has a life history built over the years and based on beliefs, personal values, behaviors, and attitudes inherent to each family component that, in turn, are related to each other. Thus, the recording of a violent situation may become just another number in the statistics. It is necessary to understand the entire context, family interrelationships, and their dynamics to be used as the basis for more effective and efficient interventions by specialists[3,10].

The literature points out that the higher frequency of aggressions in households also observed in the present study may be due to the shock of generations imposed by living together, permeated by disputes over physical space, financial difficulties, and lack of knowledge about the aging process and changes caused by the same. Besides, it is noteworthy that in our country (28%) of the homes have at least one old person and (90%) of them live with their close family members[14].

Still in this context, the literature shows that the family concentrates the greatest number of cases of violence against old people, and those who live with family members with problems of alcoholism, drug addiction, or emotional difficulties are subject to a high risk of aggression, usually by male relatives. People who lived in violent environments during childhood or who witnessed the abuse of old people tend to reproduce these behavior patterns[16].

In a study[10] analyzing the data on intrafamily violence of old people treated in urgent and emergency services collected via the Accident and Violence Surveillance System (VIVA) Survey, the male gender was predominant among the aggressors. The study by Meirelles et al.[17] analyzed 14,900 notifications extracted from the Information System for Notifiable Diseases (SINAN) and 18,228 cases from the Mortality Information System (SIM) from 2012 to 2017 in the state of Minas Gerais, Brazil, identifying the child as the main aggressor (26.4%).

In the present study, the time trend analysis over the years showed an increase in both genders (male and female) with regard to the perpetrators of aggression. This fact can be explained based on the new family models where the children return to live with their parents, and in which the old person becomes responsible for the family support with the money from their retirement or alimony[18]. In an ecological study carried out to understand the meanings and possible factors of violence, old women recognized that it is a product of multiple levels of influence on human behavior, especially intergenerational relationships[19].

As Minayo points out[20], violence in Brazil has historically been structured into nuclei: structural (inequality, poverty, misery, discrimination), institutional (inefficient public policies and domination), and interpersonal (forms of communication and daily relations of indifference). Given this, several old people are victims of these forms of violence, often concomitantly, causing physical and mental impairments and making intra-family coexistence difficult[21].

As a limitation of the study, it is evident that there may be an underreporting of cases of violence in Campinas, SP, due to factors such as neglect in health care because of the difficulty of professionals in detecting their indicative signs[22], lack of monitoring and guidance for continuous reporting[23], fear of the old people in making complaints against their aggressors[24]. Also, there were some variables in the SISNOV database, making it difficult to interpret the data.

To face violence against old people, an adequate protection network for the care of victims is suggested, reinforcing their greater dimension where other public policies are urgent to guarantee effective rights to old people. In this sense, one way that can be used to guarantee such rights is social control[25], composed of family members, friends, people from the community, and existing services. Basic Health Units (UBS) are an example of this, emerging as a potential source of support since professionals working in primary care are important subjects in detecting and managing situations of family violence due to access, proximity, and continuity of care

that this model of assistance offers the population, strengthening the support network for vulnerable people, especially the old people who generally use these services more frequently and regularly[26].

CONCLUSION

The present study showed, through the analysis of cases of violence against old people, that the majority of abuse is against old women aged 60-69 years, widows, white race/color, with a low level of education. Regarding the characterization of the aggressions, neglect/abandonment was identified as being the most common type, with the use of body strength and beating as a means of physical aggression practiced by a male individual, with the place of occurrence being the own household. The temporal trend analysis showed an increase in the

age group: 60-69 years, physical violence, means used for that - body strength, objects, and poisoning -, and gender of the aggressor - both.

The results obtained corroborate other research on the same topic, indicating a trend in the profile of victims and types of aggression. We emphasize the importance of this group knowing their rights and being encouraged to make complaints, as well as health professionals so that increasingly effective public policies are developed to face this problem.

Still, the present study contributes to expand the knowledge about the topic and to provide subsidies for the development of public policies directed to vulnerable old people and those victims of violence in the city of study.

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