Research article

Explanations around physical abuse, neglect and preventive strategies among older Yoruba people (60+) in urban Ibadan Southwest Nigeria: A qualitative study

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ABSTRACT

Older people’s views, experiences and explanations on abuse and neglect in later life is marginal in the literature. With more cases of physical abuse and neglect in old age in sub-Saharan Africa, this study explored the views and positions of older people and community stakeholders like religious leaders on why physical elder abuse and neglect and preventive measures within community settings in Nigeria. An exploratory research design that consisted of two focus group discussions with older Yoruba men and women (60+) and six semi-structured interviews with religious leaders (Christianity, Islam, and Traditional) guided the study. Based on thematic analysis, the findings revealed that older persons and religious leaders have multiple interpretations of physical elder abuse and neglect. Social ills, poor economic situation, evil machinations, and stereotypes and misconceptions of old age and spirituality are possible explanations for physical abuse and neglect. The intersecting nature of the factors promoting vulnerability to physical abuse and neglect in later life also emerged in the preventive measures suggested by older persons and community members. As such, the participants affirmed that most older persons are becoming conscious of vulnerability to abuse and do contest actions, relationships, and contexts that can reduce their vulnerability and earn more social acceptance. Nonetheless, the participants expressed worries over the absence of policies and legal frameworks that can protect older people against physical abuse and neglect. More worrisome was the growing spread of social ills, stereotypes around old age, poverty in old age, witchcraft accusations and ageism. These developments are compounding ageing experiences, including physical abuse and neglect in urban spaces in Nigeria.

1. Introduction

Across the globe, the population of older people is increasing and those aged 60 years and above will be above 2 billion by 2050. One in every six older people aged 60 years and above has suffered at least one form of abuse in their lifetime (World Health Organisation, 2017), and their population is becoming more susceptible to various forms of abuse (WHO, 2018). By 2050, an estimate of 320 million older people would have been victims of elder abuse. There are no time and contextual boundaries to the possible occurrence of elder abuse.

By definition, elder abuse is conceptualised 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, 2002, p. 3). From this conception, elder abuse is a social phenomenon that can occur in family relationships, therapeutic interactions, institutional homes, and communities. A systematic review and meta-analysis of 52 studies from 28 countries indicated a growing occurrence of elder abuse within communities (Ho et al., 2017). Available reports on elder abuse in communities might be higher than what exists in reality. There are indications that cases of elder abuse might be lower compared to the cases occurring within institutional homes and care facilities (WHO, 2017).

Nonetheless, whether in communities or institutions, five common types of elder abuse exist in the literature, and they are: psychological, physical, sexual, financial, and neglect (Ho et al., 2017; Johannesen and LoGiudice, 2013). The various types of elder abuse have been reported in different studies among older people in communities and institutional homes, which makes scary especially in low-income countries, where they are likely to suffer one form of elder abuse in their lifetime (Ho et al., 2017; WHO, 2018). The growing evidence and chances of suffering at least one form of abuse or the other in the present life for more contextual explanations and preventive measures within a given social context.
Research on risk factors for elder abuse among community-dwelling older persons shows a broad category/range of factors. These factors fit into a network of personal, relationships, community, and cultural factors (Krug et al., 2002). In distilling the evidence, Johannesen and LoGiudice (2013), through a systematic review of the risk factors of elder abuse, reported that 13 forms of elder abuse were common across the 49 studies reviewed. The review by Johannesen and LoGiudice (2013) could not include studies within the African region for lack of such studies and in some cases, methodological limitations. Nonetheless, a recent study in South Africa found poor health, socioeconomic factors, marriage, and cultural beliefs and practices are predominant risk factors for abuse in old age (Mouton and Soutlerand, 2017). Findings from studies on risk factors have improved the body of evidence and possible ways to design intervention that could stem the tide of elder abuse. The growing prevalence of elder abuse, however, might be a pointer that much of these interventions are less effective in addressing the myriad of intersections between cultural beliefs, values and practices, and contextual specific risk factors.

Nigeria is experiencing a growing trend of elder abuse (Van Den Brulle, Dimackh and Crandall, 2019), and this is occurring concomitantly with challenging political economy and modernisation of values and practices that are shaping intergenerational relationships including the social values and support for older people (Aboderin, 2017). In the last two decades, Nigeria has witnessed high-income inequalities with the high cost of living and poverty rates. Among other social categories, the report showed that women and older people are among the most affected (Oxfam International, 2017). Older people, including those that are still working and the retirees, earn insufficient incomes and have depended on their adult working children, religious organisations (Ebingbo et al., 2018), and other significant others for survival (Josephson, 2017; Togoun-Bickersteth and Akinyemi, 2014). Older people that have worked all their lives for the government have suffered in many ways. Their pensions are paid occasionally, and the pensions are far from what can help them in meeting 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 aged parents and relatives (Mayston et al., 2017). The absence of quality formal support for older people also increases vulnerability, especially with ill-health and financial dependence on others. Amid these developments, the psychosocial health needs of older people are unattended to, with enormous consequences on their ageing experiences (Animasahun and Chapman, 2017). These challenges then provide opportunities to label older people with poor health and socioeconomic conditions as individuals suffering from their evil deeds. Against these backdrops, it becomes critical to interrogate the contestations and normalisation of physical abuse and neglect from the viewpoints of older people and religious leaders.

Research and policy literature on elder abuse are dominated by the experiences and worldviews of research scientists and policymakers which has led to the relegation of the lived experiences and perspectives of older people (Garnham and Bryant, 2017; Taylor, Killick, O’Brien, Begley and Carter-Anand, 2014). The implications include a skewed understanding of elder abuse, alienation of older people from their stories, and misconceptions around the problem (Schwab and Wangmo, 2017). This research seeks to explore the perspectives of older people on why physical elder abuse and neglect exist among their peers. This research focuses on answering the critical question: what are the explanations around elder abuse and perceived prevention strategies among urban-dwelling older Yoruba people (age 60+) and religious leaders in Ibadan Nigeria? The research adopts an interpretative constructivist theory along with a qualitative exploratory research design that consists of a focus group discussion (FGD) and face-to-face semi-structured. It is hoped that this research will provide useful contextual evidence in understanding the gradual normalisation of physical elder abuse and neglect and suggest approaches that can reduce vulnerability to such abuses in Nigeria. Research in this direction has the potentials to reveal how older people position themselves for and against abuse and provide evidence on why what, how, and which different contexts are promoting vulnerability to abuse in old age. It also has the potential to shape the direction for evidence-based policies around social protection and the need for increased capacity to function in old age (Beard et al., 2016; Yan, 2015).

2. Social-cultural factors, physical elder abuse, and neglect

In sub-Saharan Africa, the literature on elder abuse has highlighted the roles of value shifts and ideological differences as critical contributors. Some recent studies in this direction have highlighted how cultural values that reverence the benefits of respecting and caring for older people are fast dwindling in the region (Akanle and Adeogun, 2014; Sossou and Yogtiba, 2015; Wumbla, 2018). In describing the state of earlier evidence, Oppong (2006) identified how cultural values, social ills, and economic challenges intersect to promote the vulnerability of older people across different settings in the African region. In the review, Oppong (2006) highlighted how older people had lost their social value and reverence due to the value shift from collectivism to individualism. Religion plays a critical role in the social tagging of older persons as witches and wizards across different African communities (Asamoah-Gyadu, 2015; Brooke & Ojo Crampton, 2013). With decades of economic challenges, social ills, health challenges, and insecurity, religiosity has engulfs the minds of young and old in search of solutions (Rotimi et al., 2016).

In Nigeria, among Christians that are Pentecostals, for instance, 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 adult working children that are Pentecostals, sometimes find it excusable to stay away from family members especially when their aged parents are of a different faith. Akanle and Adeogun (2014) through in a qualitative study that consisted on 20 interviews and four group discussions among community leaders, religious leaders and older people in Ibadan Nigeria revealed how Pentecostalism is interfering with values around old age and support for older people. The findings from the study affirmed dwindling support and neglect of older people by their significant others, including their adult working children. Though, it is difficult to attribute changing value system to Pentecostalism alone; some other sociocultural factors like beliefs around witchcraft (Eboiyehi, 2017), and economic ideology of liberalisation of the Nigerian economy are part of the critical factors in the emerging trend of elder abuse and neglect of older persons in Nigeria (Agunbiade and Akinyemi, 2017).

Nonetheless, the findings by Akanle and Adeogun (2014) demonstrates how individualism inherent in Pentecostalism and the misconceptions around old age are interfering with the traditional preference for collectivism (Akanle and Adeogun, 2014). Addressing misconceptions around old age through cultural frames can offer significant insights in designing interventions and policies that can minimise the complications of single or repeated episodes of elder abuse (Melchiorre et al., 2016; Mouton and Soutlerand, 2017). Older people’s views and that of key stakeholders like community and religious leaders are also absent in the literature. It is crucial to understand and include older people and key community stakeholders in the search for understanding and possible ways to reduce vulnerability and prevent abuse and neglect of older persons. However, there is a dearth of such studies in the literature in sub-Saharan Africa, and Nigeria in particular where incidence and prevalence of elder abuse are high (Piveta de Lima et al., 2018; Schillerstrom and BYrd, 2016). A focus on older person’s positions on abuse and preventive measures will also provide insights into the possible deployment of individual agencies in later life to prevent or avoid physical abuse and neglect in community settings.
3. Theoretical perspective

The symbolic interactionist perspective adopted in the study of elder abuse and neglect within the study setting is informed by the indications that both old age and elder abuse are culturally framed and could be challenging despite the existing boundaries in the literature. As a theory, symbolic interactionism locates elder abuse and neglect within cultural values, beliefs, and practices that define what qualifies as abusive or otherwise within a network of social relations (Abolfathi Montaz, Hamid and Ibrahim, 2013). As social actors progress through the socialisation process, the values and meanings of what constitutes abuse and neglect are acquired. The same process also helps to understand the differentiated meanings that elder abuse and neglect could earn within a given social setting.

Symbolic interactionism is a broad variant sociological theory with the view that social realities are given meanings and relevance in a network of relations (Abolfathi Montaz et al., 2013). The theory shares the broad position that these meanings are drawn from cultural views and interpretations, which are negotiated and transmitted in different ways (Ritzer and Yagatich, 2011). All forms of social realities are embedded in some meanings and interpretations, especially those living with such experiences. Outside this framing, it becomes difficult to attain both objective and subjective knowledge of the reality of interest.

Symbolic interactionism has other variants or positions, and it is a common trait with sociological theories (Ritzer and Yagatich, 2011). Despite the varied positions, scholars within the broad tradition of interactionism share a common ontological stance, which says that meanings within a network of relations are the bedrock of generating valid knowledge and understanding. In espousing this position further, Harris (2010) argues that interpretative constructionism represents one of the variants of interactionist theory that positions social actors as active constructors and co-constructors of their realities. For scholars within this tradition, social realities, including elder abuse, are possible to investigate through a combination of methods that position the participants at the centre of the research. Their ontological stance is that how social actors interpret and respond to life events are critical frames to understanding what constitutes valid knowledge about a subject of inquiry.

Among the Yoruba people what constitute old age and the notion of Among the Yoruba people what constitute old age and the notion of old age is described in chronology terms, but with deeper attachment to social interpretations around bodily changes and interactions. Bodily changes such as wrinkling of the skin, poor vision, cognition and mobility difficulties sometimes serve as objective and subjective indicators of ageing and old age. The more these features are overt, the higher the social expectations of how much people should relate and respond to life events. Three common words describe old age in the Yoruba language, and they are agba, agbalagba and arugbo. The word agbalagba (older person) is used to qualify the bodily changes and the social expectations in relationships and response to issues. Depending on contexts and the relationship involved, a young person can sometimes be described among his or her peers as a reverend person (elder or old person). Largely, old adults are considered as agbalagba, while older and the very old are described as arugbo. The word arugbo is reserved for those whose skin, vision, health and social engagements have declined. These descriptions are often invoked in both public and private spheres of interactions and when assigning responsibilities. Existing evidence points to the multifactorial nature of elder abuse and neglect and the differential consequences it could have on the well-being and the social situation of older people (Abolfathi Montaz et al., 2013; Killick, Taylor, Begley, Carter Anand, & O’Brien, 2015; Mysyk et al., 2016). It is critical to, therefore, understand the views, positions, and dispositions towards responsive prevention of physical elder abuse and neglect. With the focus on the views and perspectives of older people and community members like religious leaders, this research adopts a sociological interpretative stance as described by Larkin et al. (2006) in interpreting the voices and positions of older people and religious leaders in this study. Through this framework, it was possible to gain insights into the constructions of what qualifies as physical abuse, why, where, when and how it occurs within the social settings of this research. The approach also offers an opportunity to understand the individual agencies and dispositions of older people and religious leaders towards the occurrence and possible prevention of physical abuse and neglect in old age.

4. Methods

4.1. Research Design

The study adopted an exploratory research design that consisted of Focus Group Discussion(FGD) and semi-structured interview. Ritchie, Lewis, McNaughton Nicholls, and Ormston (2014) had earlier argued for exploratory research designs in gerontological research as a critical approach to adding the voice and experiences of older persons within developing countries to the literature. Furthermore, as a method, FGDs can stimulate discussion around an issue that would have been difficult to examine at the level of an individual (McLafferty, 2004). FGDs, as a method, has proven useful in cultural gerontological studies (Koodel, 1995). Complementing FGDs with semi-structured interviews, older people’s voices and perspectives are introduced into the literature in building robust evidence that can help to address the misconceptions and stereotypes that sell older people out as targets for abuse and neglect (WHO, 2002, 2017).

In this research, the use of FGD helped to uncover explanations around physical abuse, contexts, and neglect in old age and older people’s dispositions toward prevention. The face-to-face interviews were limited to the views and experiences of religious leaders within the communities of the study. From anecdotal evidence and emerging studies (Crampton, 2013; Ebioyehi, 2017; Rotimi et al., 2016), religious leaders are at the fore of those spreading doctrines that sometimes label older people as diabolical and capable of inflicting mishaps and pains on anyone.

Fig. 1 depicts the research designs that guided the data generation and analysis processes. The use of FGD and semi-structured interview guides has some limitations. The participants were motivated to speak on dimensions of physical elder abuse, neglect, and prevention.

From Fig. 1, the data collection commenced with two focus group discussions with older people (aged 60+) and ended with semi-structured interviews with religious leaders. An iterative approach was maintained during data collection and analysis. The approach involved going through the initial transcribed interviews and the first group discussion to ensure that emerging issues are captured in the subsequent ones. The aim was to capture the thoughts and positions of the

| Exploratory Research Design | Sampling approach | Recruitment procedure |
|----------------------------|-------------------|-----------------------|
| 2 Focus Group Discussion(Males & Females) | Data coding and | Re-coding |
| 6 Semi-Structured Interviews | Data Coding and | Re-coding and analysis |
| Thematic analysis and complementary presentation of findings |

Fig. 1. Research Design for this study (Source: Author).
participants (Leech and Onwuegbuzie, 2009). In this way, evidence from the focus group discussions and that of the interviews were presented in a complementary manner (Leech and Onwuegbuzie, 2009), in order to gain insights into the dynamics and nuances of physical abuse and neglect within the study settings.

4.2. Setting and study population

This community-based research took place in Inalende and Odo Oba communities in Ibadan South East Local Government Area (LGA), Ibadan, Oyo State Nigeria. Evidence from Cadmus and Owoaje (2012) shows a growing incidence of elder abuse in some neighbourhoods in Ibadan South East LGA. Nigeria. There is also the problem of elderly destitution and begging on the streets, across different parts of urban Ibadan (Awobiyi, 2014).

The city of Ibadan is predominantly a Yoruba city, and it is the capital of Oyo State in the Southwest geopolitical zone in Nigeria. Ibadan is receptive to the influx of people from ethnic groups and tribes in Nigeria (Togunu/Bickersteth et al., 1997). Ibadan has grown over the decades, including the spatial arrangements and population spread. The early settlement areas are the inner core of the city with high population density. Others are the medium and the low-density areas, showing the signs of an expanding city (Jiboye, 2014). The inner core of Ibadan is characterised by low-cost houses, congestion, and poor layouts. Nonetheless, these features make social interactions across different social categories. The knitted setting promotes conflicts and different forms of vulnerability which might be difficult to verify.

The study population consists of older people (aged 60+) and religious leaders within urban Ibadan, Oyo State Southwest Nigeria. Both categories of participants were chosen because they possess the requisite knowledge, experience, and perspectives relevant to the research question. Their views could also help in understanding some stereotypes and misconceptions around old age, physical elder abuse, and neglect in the Yoruba context.

4.3. Sampling and recruitment procedures

A purposive critical sampling approach was employed in recruiting the participants (Onwuegbuzie and Leech, 2007). The approach entails the recruitment of cases based on the knowledge they possess, experiences, and position about the subject of inquiry and their availability to provide critical information within a time frame (Patton, 1990).

The inclusion criteria for participation include age (60+), place of residence within the study sites, and ethnic affiliation (Yoruba). Age 60 years and above was taken as the cut off based on the sense that older people within this age category would likely be grandparents, whether they have a child or not. These social qualifications are sometimes used to define old age among Yoruba people (Togunu-Bickersteth, 1988). The inclusion criteria for religious leaders include membership, the presence of a place of worship in the study sites and a common acknowledgement of the leadership status among community members and worshippers/followers of such groups.

Community entry was facilitated with the help of Community Liaison officers at Ibadan South East Local Government Area (LGA) area. In Nigeria, Community Liaison officers are critical links to accessing neighbourhoods and for community engagement purposes (Dent, 2000). The Liaison officers were briefed on the purpose of the research and their roles in facilitating entry into the study settings.

4.4. Recruiting focus group participants

The recruitment process commenced after receiving the support of the LGA Liaison officer. The Community Liaison officers provided the links to the chairpersons of the Landlord associations and religious groups in the neighbourhoods. Communities and neighbourhoods in urban Ibadan have Landlord associations for community development, security provision, and social cohesion (Ajayi et al., 2013). With the help of the landlords, individuals within households were approached and recruited based on the inclusion criteria for the FGDs. At this point, a screening questionnaire was administered to enlist and document eligible participants.

The recruitment of FGD participants was targeted at 6 to 9 participants for each FGD session with the same number of males and females. The gendered conduct of the FGDs provides spaces for men and women to share their views and positions among their peers, without any form of intimidation or dominance that might emerge if the groups were mixed. The possibility of being intimidated by men in a group discussion is high for women due to the patriarchal nature of the Yoruba society (Familusi, 2012).

During the recruitment process, each eligible participant was asked for a convenient time to meet for the discussion. The most frequent time was adopted and communicated to all the participants before the meeting date at the community halls in Inalende and Odo Oba (both communities are in Ibadan South East LGA).

4.5. Recruiting interview participants

A similar approach was maintained in the recruitment of interviewees. The LGA officers assisted in identifying places of worship or meeting points of the three dominant religious’ groups (Christianity, Islam, and Traditional) within the communities for the semi-structured interviews. Religious leaders are important as existing studies have linked physical abuse and neglect in old age to Witchcraft accusations (Atata, 2018; Cadmus and Owoaje, 2012; Eboneyi, 2017; Offong, 1983). Six interviews were conducted among the religious leaders (Christians, Muslims, and Traditionalists) on equal proportions.

4.6. Research instruments

FGD and semi-structured interview guides were developed and pre-tested to ensure the removal of unclear questions and rephrasings. The FGD guide had 15 questions, and the interview guide contained 17 questions. The extra two questions in the interview guide were focused on religious’ leaders’ views and positions on physical elder abuse, neglect, and prevention. The FGD commenced with an icebreaker question to simulate reflections on who and what old age entailed. The discussion continued under the next four highlighted thematic issues:

1: What are the various forms of physical abuse and neglect among older people?

The questions under the theme set the stage for the participants to construe what it means to suffer physical abuse and neglect and reflect on examples around their daily lives on what qualifies as physical elder abuse and views around the various forms.

2: What factors do older people and other community members consider as predisposing factors to physical abuse and neglect in old age?

The questions here were structured to help the participants reflect on what factors within their contexts and among their peers promote vulnerability to physical elder abuse and neglect.

3: What are the explanations around physical abuse and neglect in old age among older people and religious leaders?

The questions under this theme motivated the participants to discuss their thoughts around specific contexts and why physical abuse and neglect exist among their peers.

4: What ways do older people and religious leaders think physical abuse and neglect can be prevented in old age?

The last part of the FGD guide was focused on understanding the available measures in place and the strategies aimed at preventing physical abuse and neglect in old age.

The data collection was handled by the author and was assisted by an experienced male social researcher who was 68 years of age during the fieldwork. For cultural reasons, the field assistant who had been trained with the research instruments facilitated the focus group discussion, and
the author acted as a note-taker. The FGD moderator and notetaker are fluent in both English and the Yoruba Language. The defined roles was a bit eclectic as the note taker on some occasions slipped some written notes to the moderate for areas that need further probing without disruption the discussion or any form of distraction. However, all the interviews were conducted by the author, while the field assistant provided some supports.

Two FGD sessions were held among male and female older persons (60+) in the study locations. Thematic, sub-themes and individual focus group responses were relied on in arriving data saturation despite the small number of FGD sessions (Hancock et al., 2016). FGD participants spoke in the Yoruba language based on a consensus. In line with the literature (Kitzinger, 1994; McAlfferty, 2004), there was a moderator and note-taker during the FGDs. On average, the FGD among older men lasted 69:09 min, and that of the older women was 59:03 min. All the six face-to-face semi-structured interviews were also conducted in the Yoruba language as preferred by the interviewees. The longest interview lasted 51 min, and the least was 43 min. The two FGDs and six face-to-face interviews were audio-digitally recorded.

4.7. Data analysis

The analysis commenced with verbatim transcription of the digitally-recorded focused discussions and interviews in the Yoruba language. The next step was the translation of the recorded sessions into the English language. The transcripts were free of the names of the communities, gender and the religious groups that participated in the discussions and interviews. The real names of participants were anonymised when mentioned during the interviews. These steps were taken to ensure confidentiality and compliance with ethical requirements (Wiles et al., 2008).

The analysis proceeded by following the six steps to the thematic approach, as suggested by Braun and Clarke (2006). First, all the transcribed transcripts were read multiple times to increase familiarisation with the data. Next was an application of both inductive and open coding to the words and expressions of the participants. The data analysis procedure was less cumbersome with the thematic structure of the FGD and interview guides. The adoption of an iterative disposition throughout the analysis process provided the needed depth and nuances understandings of the transcripts.

All codes were examined for similarities and differences. Similar ones were merged, while dissimilar were retained to form patterns (Bryman, 2016). Taking cues from Bazeley and Jackson (2013), the transcripts and codebook were transferred into the NVivo 11 software for useful categorisation and formation of higher categories and patterns. At this stage, the focus was on the connectivity of categories, patterns, and the direction of the findings. The categories were considered for divergent and convergent patterns to form clusters and coding trees. The aim was to retain the interpretations of the participants in the findings. As such, the words of the participants were taken as excerpts, where relevant to provide insights and contexts to the findings. Throughout the process, the complementarity of evidence from the FGDs and interviews was ensured in the themes and sub-themes that emerged from the findings.

4.8. Ethical considerations

Institutional ethical approval was received from the Human Ethics Research Committee at the University of Southampton with the certificate number 41632. The procedural step of securing ethical approval ensures that the research process is transparent, unharful, and adheres to established standards of conducting human research (Wiles et al., 2008).

At the inception of every interview, all the participants were briefed on their rights to volunteer to participate and withdraw at any time from the research up to two weeks from the date of the interviews and FGDs. Literate participants provided written consents, while those who could not, gave oral consent. All the participants were assured of the confidentiality of the information shared. Participants in the FGDs were encouraged to keep the discussions within the group and not to disclose any information shared with others outside the discussion settings. All the participants were also informed of their right withdraw if they became distressed during the discussion, or if they felt unwell. Participants were informed of a free counselling session and how they would be mobilised to assess the service in case of any distress.

5. Findings

5.1. Profiles of the study participants

As indicated in Table 1, sixteen participants took part in the two FGDs across the two communities (Inalende and Odo-Oba) in Ibadan Oyo State. As depicted in Table 2, six interviewees were held with religious leaders across the study locations.

The mean age for men was 74.5 years, and that of the women was 65.6 years. It was interesting that the majority of the participants are still working to earn a living. The pattern cuts across both genders despite the age gaps between the men and women in the study. A few of the male participants also reported being involved in more than one occupation. Two among the males have retired and only live on whatever comes to them through contracts. All the female participants are involved in trading and earn a living through subsistence trading. The urbanised of Ibadan could have provided more opportunities for older persons to earn a living than for older persons in rural areas.

The average age of the interviewees was 75.5 years. All the religious leaders were above 60 years of age, but with a wide age range with compare to that of women leaders. The oldest among the women was 65 years and the oldest among the men was 90 years of age.

5.2. Forms of physical abuse and neglect among older people

The participants affirmed and described the realities of physical abuse and neglect in old age as a regular occurrence. For most of the participants, their peers and members of their communities are reference cases of diverse forms of abuse from those close or around them. On physical abuse, two broad forms emerged: inflicting bodily pain and compulsive

Table 1
Sociodemographic characteristics of Focus Group Participants (Older men and women).

| Participants | Age | Marital status | Religion | Occupation | Living alone or with someone |
|--------------|-----|----------------|----------|------------|------------------------------|
| Men          |     |                |          |            |                              |
| P1           | 68  | Married        | Muslim   | Contractor | LWS1                         |
| P2           | 65  | Married        | Muslim   | Contractor | LWS                          |
| P3           | 65  | Married        | Muslim   | Bandelier  | LWS                          |
| P4           | 75  | Married        | Muslim   | Blacksmith | LWS                          |
| P5           | 60  | Married        | Muslim   | Bricklayer | LWS                          |
| P6           | 65  | Married        | Christian| Farmer     | LWS                          |
| P7           | 70  | Married        | Christian| Farmer     | LWS                          |
| P8           | 72  | Married        | Christian| Fashion designer | LWS |
| P9           | 60  | Married        | Christian| Herballist/farmer | LWS |
| Women        |     |                |          |            |                              |
| P1           | 65  | Married        | Muslim   | Trader     | LWS                          |
| P2           | 64  | Married        | Muslim   | Trader     | LWS                          |
| P3           | 65  | Married        | Muslim   | Trader     | LWS                          |
| P4           | 68  | Married        | Muslim   | Trader     | LWS                          |
| P5           | 68  | Married        | Christian| Trader     | LWS                          |
| P6           | 65  | Married        | Muslim   | Trader     | LWS                          |
| P7           | 64  | Married        | Christian| Trader     | LWS                          |

1. LWS means living with someone, whether the person is a spouse, relative or community member.
restriction, whether subjectively or objectively construed. Restriction was described by the participants as an imposition on older people by their significant others or those around them. The decisions to place such limitation is either justified or sometimes just determined by those around as they subjectively deeded it necessary. For the former, there was a consensus among participants that any act that caused an older person some form of bodily discomfort or bodily harm qualifies as physical abuse.

Some examples of frequently cited forms of physical abuse against older people include beating, pushing, slapping, biting, stoning, punching, and bad finger gestures such as rubbing the index finger on an older person’s nose. These examples were easily mentioned and described among all the participants based on what they have observed and could remember among their peers. Restricting an older person’s physical movement was described as a form of abuse that does not necessarily lead to bodily harm; nonetheless, it was considered as abusive. The fact that such restriction questions their capability and sense of judgement, some of them described confinement as insensitive, hurtful, and dehumanising. One of the interviewees described how one of his older friends was confined to a room by his children:

“So, what they do most times is to lock him in the room. Like a mad man, like he is a nuisance. Because they know he cannot help himself. I felt sorry for him, you know” (Male Islamic Leader, 90 years)

However, a few of the participants trivialised and normalised ‘minor acts of physical abuse’ like confinement as sometimes beneficial.

Care denial and emotional distance are two other related forms of neglect that emerged from the interviews and FGDS. From the individual interviews, care denial could consist of intentional denial of medication or perhaps offer overdose or under-dose of medication, failure to facilitate or deny an older person visits to seek medical help. Care denial also includes denial of assistance with activities of daily living such as using the toilet, having a bath, getting food or drinks, climbing staircases, amongst others. Some of the participants described denial of care as an instrument some caregivers or significant others deploy to enforce compliance or punishment. Two categories of older persons featured prominently in this list of care denial: those with a health challenge and those with personal hygiene problems. One of the FGD participants narrated a case to support to corroborate this view:

“Presently, there is a woman who is sick like this. She is my husband’s childhood friend’s wife. I was there for a visit this morning, and one of the children said to their ailing mother: ‘you are just here pretending, and none among my sisters will help you with anything. We know of someone who suffered a similar fate like yours, but here you are and none among my sisters will help you with anything. We know of someone who suffered a similar fate like yours, but here you are’”

A woman died not long ago in this community. The children left her because she was harsh to them, and they also thought she was evil. The woman was ill for several months, and none of the children showed up except those of us that are her friends or relatives around. Some of them sent money, but none showed up. It was after her death that they showed up for her burial (FGD with older women).

The above excerpts portrayed reduced interaction of adult children with their aged parents as evil and unwelcoming. Some of the participants opined that the children could have forgiven their mother rather than showing up later for her burial. Within the study contexts, the participants described older people that have support in old age and people around as loved and valued by others. A departure from such value was equated to neglect and could negatively impact older people’s well-being including the chances of becoming depressive. Older people with adult children that are uncaring and unsupportive were rated high and at risk of becoming depressive due to neglect or abuse in later life. The consensus around conditions and predisposing factors to abuse and neglect necessitated further exploration.

5.3. Conditions and factors associated with vulnerability to physical abuse and neglect

5.3.1. Personality traits could be a factor

With reference to individual differences, the participants pointed out that the personality of an older person might heighten the risk of experiencing neglect or abuse from their significant others. A well-behaved older person who conforms with the norms and social expectations of old age was postulated to less be likely to experience abuse, compared with non-conforming older persons who frequently overstep the boundaries. When participants were encouraged to identify the personality traits that could elevate the risks of experiencing abuse, they listed mendaciousness, nagging, being too critical of other people, meddling, intolerance, impatience, greed, and promiscuity (especially with younger people). All these traits were considered inappropriate for the exemplary older person. Those whose behaviours are below social expectations were described as childish and thus deserved abuse or neglect.

5.3.2. Perhaps gender

Most respondents thought that the experience of abuse in old-age is not gender-specific. Nonetheless, a few participants opined that women were more likely to experience elder abuse compared to older men. They noted that women’s susceptibility to abuse could be traced to a high network of social relations, poverty and intimate partner violence, which sometimes persist into old age, between couples. Women were also described as more emotionally expressive and such actions or reactions could trigger some abusive reactions from younger people who might found it appalling. For most of the male participants, some older women have had problems with their daughters-in-law, siblings or family members due to such women’s unreassembled to overlook certain exegesis. Citing an example, a participant in the FGD with older women shared that the stereotype and described some older women as overbearing, imperious and sometimes attract undue insults and irritation from those around them. Beyond micro level factors, there was an appeal to changing values and ideological stance as enshrined in the practice of traditional medicine as an explanatory factor.

5.3.3. Greed and profiteering in the practice of traditional medicine

The practice of traditional medicine alongside with other religions is common among older people in many African settings. Interestingly, it emerged from the findings that some of the practitioners now lack the...
integrity that comes with the medical system. Traditional medical prac-
ticitioners are a heterogeneous group and some scandals such as extortion,
false promises of powers and treatment outcomes. As such, some older
medicine men have suffered physical abuse due to their greed and
insincerity with their occupation. One of the FGD participants opined
that ineffective charms or poorly prepared rituals had earned some
medicine men physical assaults:

I remember an aged spiritualist that was lynched by some young men
after the money rituals failed to work” (FGD with older men)

The second scenario in which the practice of herbalism can lead to
maltreatment is when such practice is tagged as evil and aimed at causing
havoc on others such as sorcery or witchcraft:

“There are many cases that are mysterious and difficult to unravel
around us here. Some older people use their knowledge of traditional
medicine for diabolic powers. We have seen parents who are the ones
behind the mishaps happening in the lives of their children. The same
applies to their relatives. Once people around them start sensing they
are evil, they neglect them and stay far away from them” (FGD with
older men).

The feelings that some older people have diabolic powers and are not
generative in their concerns and practices in later life is gradually
becoming normative going by the divide in religious views among
generations.

5.3.4. Religious divide between older and younger people

the growing acceptance of Islam and Christianity is creating a divide
between older people who are more inclined to practise traditional re-
ligions, and younger cohorts of the population, further leading to neglect
of older people. This view was attested to on several occasions among the
participants in the group discussions. A few of the religious leaders
debunked this assertion indirectly by affirming that their religions preach
and encourages support and respect for older persons. However, two
among the interviewees argued that values are changing including some
ideological positions that are stereotypical of older persons. The view
expressed by the participants on religious divide lends credence to the
intersections between macro-level factors such as cultural norms and
generations and perceptions and dispositions towards older people within a
given social setting.

The stereotyping around old age was extended towards health and
illness episodes in later life. Older people who suffer ill-health are
tolerated until it becomes burdensome for their significant others to cope.
The unimplied implications of this stance partly include neglect, avoid-
ance and labelling of older persons as the originators of their ill-health
and therefore must cope with such conditions.

5.3.5. Ill-health and stigmatisation conditions

poor health in unsupportive social setting increases dependence on
others, functional limitations and perhaps some feelings of despair of
rejection. In extending the influencing of stigmatising conditions on
abuse and neglect, the participants mentioned that health conditions
such as mental disorders, epilepsy, and HIV/AIDS could elevate the risk
of experiencing abuse, especially neglect. HIV/AIDS cases were consid-
ered rare, yet, mental disorders, forgetfulness as described by one of the
participants and depressive feelings were mentioned as common.

The unfortunate angle to these conditions was the ease at which some
older people have been tagged and considered as the architect of their
problems. This line of reasoning reinforces the interconnectedness of
micro-level factors such as health conditions, meso level factors such as
family relationships, and macro-level belief systems, with the likelihood
of experiencing abuse in later life. The influence of personality traits
resurfaced in discussions about health. Previous good behaviour or per-
sonality was described as protective of elderly abuse, even with chronic
disabling health conditions.

5.3.6. Toxic or harsh parenting attitudes

Poor parenting, herein referred to as toxic parenting, was predicted to
affect future support from children. Some of the participants believed
that such vengeful acts were common for older persons who were too
strict on their children, those who showed little care, and those who
abandoned their children due to divorce or re-marriage. An example of
the effect of toxic parenting on older abuse is given by one of the
viewpoints:

“...there is a woman who was very strict when she was much younger.
She beat her children mercilessly to the extent that her husband
would confront her with words like God did not create you to have
children; it is by coincidence that you have children. When this
woman became old, God lifted the heads of her children. They
became successful. None of them came to visit her until she gave up
the ghost. It was after three days that people knew she had died in the
house” (Female Christian Leader, 60 years)

There were also hints on the existence of intergenerational transfer of
violence for children who witnessed violence between their parents, in
which case, the parent who perpetuates violent behaviour towards the
other partner is likely to be abandoned and suffer abuse from the adult
offspring in old age.

Concerns about older people’s vulnerability to maltreatment due to
the inability to maintain decent living standards were ubiquitous through
the discussions. Participants recounted with displeasure, how many of
their counterparts have had to beg for alms in open spaces across the city,
and how such acts have exposed them to high levels of physical abuse.
Some accounts of how older people begging for alms on the streets have
been knocked off by vehicles or kidnapped for money rituals were pro-
vided during the interviews.

6. Views on why older people are vulnerable to physical abuse
and neglect

Participants’ explanations around vulnerability to physical abuse and
neglect revolve around value change, materialism, emphasis on spiritu-
ality, and success in life. The fourth explanation is the fear of suffering the
label of a witch or wizard.

6.1. Ideological shifts and preference for shortcuts to material well-being

The high premium on materialism as a marker of success and the
‘good life’; and preference for quick means to success are spreading wide
among younger people. These developments are contesting the norms of
hard work, diligence, and truthfulness as enshrined in the Yoruba cul-
tural belief system. The ripple effects of having ideological shifts in this
form were described by the majority of the FGD participants and the
viewpoint that as remote factors that are encouraging individualism,
preference for violence, impatience towards older people and the tagging
of some older women and men as barriers to the success of some young
persons. Starting with physical abuse, participants in the FGD with older
males decried how the growing crave for materialism, limited opportu-
nities for employment and beliefs in money rituals are gradually driving
violence including the physical abuse of older people. Few cases of
money rituals, including the killing and removal of sexual organs and
some other parts of older women were mentioned. Older men are less
vulnerable to such attacks as recounted by the participants.

6.2. Spirituality and life achievements

As earlier described, the FGD with older men and some of the par-
ticipants in the interviews alluded to the centrality of spirituality and life
achievements. The common position among the participants was that
certain individuals have the powers to invoke pains and setbacks in life,
and this belief is mystified and reinforced in all the dominant religions
among the Yoruba people. Those who possess spiritual powers are considered special and valued when the powers are invoked to bring blessings and comfort to those around the possessor of such powers. In the ladder of events, both old and young can possess such powers. However, there is an enshrined view that older people are at an advantage due to their life experiences and the view that ageing brings purity and generativity. For most of the participants, their experiences and observations have shown that such powers can be abused, and some older people, men, and women have caused pains and setbacks in life for their children and loved ones using the powers of Witcraft and sorcery. Despite the difficulty in establishing the links, a 60-year-old retired police officer and spiritualist described how a mother killed one of her children and caused setbacks for others:

During this my little time on earth, I have seen a mother who kills her child through spirituals. I mean the powers our mothers have (exhibited a kind of fear to mention witchcraft). She did not let the child succeed, though now, the woman is as good as dead because she is just there suffering. Her reason for doing what she did was that the child did not give her money when he came to visit her at home. So, she used her spiritual powers to get him sacked and became poor until the son died. And there are many people like that. There are two older people now in my care (He had earlier described himself as a traditional healer) that are still being cursed. One of them has a stroke now. They can never be successful in their entire life, and they can never have merciful children. The ones that should have had mercy on them ran away from them. They are just worthless now and battling with these health issues. [FGD with older men]

Other participants in the FGD with males also shared the view as expressed by the retired police officer. For most of the participants, the possession of such powers by some older persons cannot be denied and the use to afflict their victims. At this point, some of the participants expressed the view again that some older persons deserved physical assault because of their evil deeds such using their Witcraft powers. As captured in the excerpt above, the consequences of invoking curses and evil on one’s children include neglect and miserable ageing experiences.

Outside the family cycle, the belief in witches and wizards sometimes provides room for blackmailing, unjust labelling and exploitation of others. Some of the participants mentioned how spiritualists, faith healers, and preachers of different faiths have become popular across peoples’ homes. I remember a pastor who claimed to have the gift to channel their powers for the good of themselves and those around them. They are just worthless now and battling with these health issues. [FGD with older men]

6.3. The social curse of living longer than your children or younger ones

A popular worldview among the Yoruba people about old age is to have successful children, younger siblings or relatives that will organise burials for their older parents and relatives. Within this framing, some of the participants expressed the view that older people sometimes stand a chance of being labelled as witches and wizards when there are deaths of younger people around them. A few of such deaths hardly attract social condemnation when there are not insinuations from family members and perhaps with causes traceable to lifestyle issues. However, repeated deaths of young people in families where there are some older people could arise suspicion that an insider enemy is responsible for such deaths. In this sense, older people within such families stand a chance of being labelled as witches and wizards.

Interestingly, some of the participants also brawm at the havoc that has been linked with witches and wizards. Therefore, they express the view that older people using such powers for evils deserve to suffer physical abuse and suffer in neglect. Their conviction was hinged on the need to channel their powers for the good of themselves and those around them. In the form of a sermon, a male Christian interviewee called for repentence of older people with Witcraft spirits as they have caused more harm to society. For him, witches are to suffer and neglected so that they can also feel the pains:

I’m bold to tell you that this world is delicate; many young people have had their destinies disrupted and thwarted. Some are barren and suffered setbacks in life, which makes it difficult for them to survive. Some communities are well laid back because of evil forces, and some older people are not innocent of these developments. [Male Christian Leader, aged 82].

What this participant described in the excerpt depicts a widespread belief amongst the Yoruba people. As earlier expressed, other religious groups, including Islam and traditional religions, acknowledge the potential of witches in causing pains and harm, including untimely death to their victims. The participants at this point alleged that some religious teachings are contributing to the ways young people perceive older people and how some children are neglecting older parents or relatives. It, therefore, becomes normative for older people to share the sentiments that those with such powers should be allowed to suffer and sometimes physical abuse. In expanding the position further, the majority of the FGD participants painted pictures of a peaceful death, the good old age and the desire to suffer little sickness or pains before death. For most of the participants, deaths of younger people, road accidents, the loss of job and some natural disasters are good indicators to label an older person in the family as a witch or wizard.
6.4. Avoidance and prevention of physical abuse and neglect

Five domains that consist of age-appropriate behaviours, self-control, caring, and supportive to others and good parenting traits emerged from the findings as proactive measures against physical abuse and neglect. The domains again reflect the social definition of old age and how older people are willing or exercising their agencies in reducing or avoiding vulnerability to abuse and neglect.

6.5. Acting age-appropriate and boundary maintenance

Across the interviews and FGDs, age-appropriate behaviours were considered as the hallmark of ageing well in interpersonal relationships and social interactions. Society prescribes what and how older people should comport themselves to earn the desired respect. The prescriptions are mostly vague and dynamic, yet individuals are judged by the social aggregate of what qualifies as acceptable within a given context about an issue. Recounting different experiences and positions, the participants predicted that older people who pay less attention to these demands as opening themselves up as victims.

As described earlier, older men stand a chance of suffering abuse when they fail to control their appetite for sex, alcohol, greed for money, farmlands, and other landed properties. The participants at different points cited how the desire for these activities and material wealth have turned many older men as points of the target. In an optimistic position, a traditional female leader, in one of the interviews argued that once an older person stays within the expected boundaries, abuse and neglect become avoidable:

An older person would not be abused by young children when he/she knows his/her limits. Some older people do not know how to overlook things (let go of issues), and this is very important in daily living. Adage: Offend me, and I will ask you. It is the medicine for good friendship (se mi n bi o, ogun ore ni). [Female traditional leader, aged 64].

The position of the traditional was also shared by most of the participants as they admonished older women to watch their boundaries and involvement in the affairs of others. For most of the participants, older women stand higher chances than men to meddle into issues that are not in their purview. Their involvement in other people's affairs sometimes brings them in a frequent clash with others as they stand a chance of having unpopular views. In the FGD with older women, some of the participants described how some of their peers had suffered physical assaults for poking into the affairs of neighbours and sometimes their daughters-in-law.

Keeping to oneself is undesirable, but not a guarantee to shield others from making efforts to assault an older person. In this direction, the participants advocated for a time to withdraw or keep mute when there is a hot argument with violent people. The participants argued that quite a few younger are less cultured and violent. With poor laws protecting older people from abuse, the participants called for a caution under such circumstances. For most of the participants, old age is like a dumpsite, where all sorts of rubbish and degradation are found. Most older people will be tried beyond patience, and the best way to avoid abuse is to swallow the unpleasant attitudes, provocations, and temptations to react to disrespect from others. Most of the participants hold the view that all deeds have repercussions. Whether an individual does evil or good.

Younger people who abuse older people stand a chance of suffering abuse in their old age or perhaps might even die prematurely. As a principle, an older person would not be abused by young children when he/she knows his/her limits. Some older people do not know how to overlook things (let go of issues), and this is very important in daily living. Adage: Offend me, and I will ask you. It is the medicine for good friendship (se mi n bi o, ogun ore ni). [Female traditional leader, aged 64].

The absence of any form of legal protection against physical abuse and neglect could be seen in the emphasis on self-control, boundaries maintenance in interpersonal relations and social relations. Across the interviews and FGDs, the participants claimed unawareness of any legal protection against physical abuse and neglect. The social value on age-appropriate behaviour might be associated with the absence of legal protection of older people against abuse. In this sense, an excerpt from one of the FGD's provide more insights:

There is no law other than I am taking care of my children which makes it impossible for anyone to beat me in this land. Nobody can even beat me because I don't overstep my boundaries. Anyone that dares to beat me would be tied and arrested with real handcuffs, though I would not overstep my boundaries. When you have good children, you cannot suffer. [A 60-year-old participant, FGD with men]

Despite the commonality of the above position, all the participants demonstrated a level of consciousness of the need for some form of protection against physical abuse. In their words, it was disheartening that no conscious efforts are in place to protect older people from all forms of elder abuse in Nigeria. Citing recent violent protests by the National Road Transport Workers Union in Ibadan, some of the FGD participants described how some older people, especially those begging for alms and homeless suffered in several ways without any form of intervention for them.

The participants also shared the view that none of the religions has any direct intervention that addresses physical elder abuse and neglect. However, they argued that none of the religions directly promote physical elder abuse and neglect. However, there is a paradox in this direction as some beliefs around spirituality, the doctrines of Wictrcraft and money rituals are enshrined in religious beliefs.

7. Discussion and conclusion

This research explored older peoples' perspectives and explanations for physical abuse and neglect in old age. Older people's views and experiences are critical to contextualised understanding and evidence-based approaches to addressing vulnerability and social protection of older people. The gerontological literature is limited in evidence on the intersections between contextual factors that intersect with specific cultural risks to increase vulnerability to elder abuse in sub-Saharan Africa (WHO, 2002, 2017). By interrogating the views and positions of older men and women on elder abuse and in conjunction with religious leaders, part of the contextual complexities around such abuse becomes possible to unravel.

In Nigeria, this study is among the few that consider the views and positions of older people (Atata, 2018; Cadmus and Owoaje, 2012), and...
that of religious leaders on why physical abuse and neglect occur and how these can be avoided in later life. The key findings from this research are discussed in line with the research questions and existing literature on elder physical abuse and neglect.

The findings from the interviews and focus group discussions reflect what exists in the literature. The WHO (2017) assessment of elder abuse across the globe shows that Nigeria is among the countries with the highest prevalence of physical elder abuse in the communities. The findings from this research depict the physical abuse of older people as a practice that negates the cultural expectations of how older people should be treated. From the findings, physical abuse of older people also includes the physical restriction on the right to movement. The stoning of older people for possessing Witchcraft powers aligns with the findings by Cadmus and Owoaje (2012) among the Yoruba people and elsewhere in Nigeria (Atata, 2018). However, stoning as a consequence of possessing and deploying such powers is becoming unpopular as neglect emerged to be more preferred.

The findings show that older people who are neglected will appear dirty, unkempt, and malnourished. Such older people are also likely to suffer ill-health as they lack access to healthcare services. The interpretative construction of being poor and unkept as signs of individual failures or perhaps paying for one's evil deeds in later echoes a cultural worldview around sowing and reaping. In a way, the growing acceptance of judging later life by deeds and events from a life course position fits what Aboderin (2017) observation on the dwindling quality of interpersonal relationships and structures over a lifespan. This reflects how limited resources in late adulthood open older people up to maltreatment at unprecedented levels. These developments are revealed how limited resources in late adulthood open older people up to maltreatment at unprecedented levels. These developments are widespread in Nigeria, thereby making older people more vulnerable to accusations and abuse. With the premium on respect for older people shifting to material success, it is becoming more precarious to grow old and are poor at the same time.

Multiple conditions and factors emerged as predisposing conditions to physical abuse and neglect in old age. The findings support the position of scholars, especially those that have found richness in the ecological framework in identifying the broad spectrum of risk factors for the elder abuse within community settings (Cardona et al., 2007; Schiamberg and Gans, 2000). The ecological framework approach supports the interpretative constructivist perspective as it advocates for the situation of risk factors within social settings. The findings from this research show that predisposing factors and conditions that shape physical elder abuse and neglect are co-constructed within structures of interactions. The views of the participants lend credence to existing evidence that elder abuse occurs within an interconnected network of micro, meso, and macro-system (Cardona et al., 2007; Schiamberg and Gans, 2000). However, the occurrence and intersections that exist among these multiple factors are given meanings and relevance within a given social setting. From a symbolic interactionist lens (Ritzer and Yagatich, 2011), these risk factors might be meaningless outside the study settings, as such the richness of contexts and interpretations as ascribed by the study participants have substantial benefits.

Specifically, the important risk-factors identified by respondents were norms violation, practising herbalism, protracted ill-health toxic parenting, and lack/material deprivation. At the micro-level, the quality of interpersonal relations emerged as a critical condition that can increase vulnerability to physical abuse and neglect. This finding portrayed vulnerability to physical elder abuse as fluid and embodied in a network of relations and structures over a lifespan. This finding is a point of departure from quantitative studies that attempt to describe and portray factors and conditions associated with physical abuse and neglect as singular and independent (Bigala and Ayiga, 2014; Burns et al., 2015). For instance, the results of some studies have linked being poor materially, childlessness or barreness in old age to physical abuse and neglect (Burns et al., 2015). In contrast, the findings from this research show that the quality of interpersonal relationships and the subjective assessment of the disposition of an older person are paramount. Such assessments and the quality of interpersonal relations influence the likelihood of suffering from physical abuse or neglect than being poor or childless.

Ill-health, especially those that are chronic, also emerged as a significant condition that can increase the vulnerability to neglect and perhaps physical abuse. These risk factors are consistent with the literature as older people with chronic health conditions are likely to suffer neglect and stigma (Burnes et al., 2015; Chane and Adamek, 2015). The participants in this study considered the stigma around these conditions as a key contributor to abuse and neglect in old age. Sometimes older people with such conditions are confined and assaulted by their significant others. This finding aligns with the claim in the literature that confinement is a form of maltreatment mostly experienced by older people that are incapacitated, sometimes due to health conditions (Chokkanathan and Lee, 2005). There are indications that acts of confinement have adverse psychological effects that sometimes outweighed the pain of sustaining physical injuries from other physically abusive acts (Chane and Adamek, 2015). However, just a few of the participants in this research shared the view as expressed in the interview with one of the religious leaders.

Nonetheless, a popular stance from the findings was the social impressions around older people with such conditions were that they are reaping the fruits of their past deeds. Such interpretation emerged in one of the focus group discussions where a male participant attributed the case of a woman living with stroke to her past evil deeds. Only one among the other participants contested this submission. The burden of care that comes with the provision of support for older people living with chronic conditions could sometimes create tension and negative reactions from caregivers, especially when the caregiver is less supported.

The burden of care on informal caregivers could sometimes trigger physical abuse and neglect of older people. As accounted by the participants in Ethiopia (Chane and Adamek, 2015) and India (Chokkanathan and Lee, 2005) the burden of care and the limited availability of resources to support an aged parent or relative with a chronic condition can trigger negative reactions including neglect and denial of medications. The findings from this research show that some older people with such ill-health could sometimes miss their medical appointments due to neglect and unwillingness to facilitate their hospital visit by those around them.

The place of poverty cannot be discounted from the likelihood of experiencing physical abuse and neglect in old age. Part of the findings revealed how limited resources in late adulthood opens older people up to maltreatment at unprecedented levels. These developments are widespread in Nigeria, thereby making older people more vulnerable to accusations and abuse. With the premium on respect for older people shifting to material success, it is becoming more precarious to grow old and are poor at the same time.

Micro, meso, and macro explanations emerged from the findings as possible reasons for the growing vulnerability to physical abuse and neglect. At the micro-level, inappropriate forms of behaviour were again invoked as part of the possible explanations around physical elder abuse and neglect. The findings revealed that some older people sometimes engage in behaviours that demean them, which makes them vulnerable to abuse. This finding is somehow related to the normativity of elder abuse and the view that some abusive actions could sometimes be rationalised and accepted as normal even among older people.

The intersection between micro and macro factors also emerged as part of the explanations. For instance, it was a common position that emotional distance is widening between parents and their children and that the development is partly expanding to other spheres of parent-child relations. In this regard is the finding that negative life events and divergent religious beliefs between older and younger people might be shaping the occurrence of physical elder abuse and neglect. The participants postulated that older people whose children's religious beliefs are at variance with theirs would likely suffer neglect. In their explanations, the belief in Pentecostalism and the doctrine of separation from the old
ways of life and practices might be contributing to this development. While this account might be partial, it resonates the findings of Akanle and Adeogun (2014) that kinship, filial responsibilities, and participation in traditional religious festivals are waning among religious young people in Nigeria. A development impacting negatively on the support adult children are providing for their aged parents.

The growing acceptance of materialism among young people in Nigeria might also be exposing older people to physical abuse. Smith (2001) describes how enshrined the belief and practice of money rituals are established in the everyday reality of the average Nigerian youth and adults. From the findings in this research, most of the participants alluded to some recent physical abuse of older people, including those related to sex with older women as a performance of money ritual rites. This finding appears paradoxical going by the public display of religiosity within the Christian and Islam folds among young people in Nigeria. The religious divide between older people and younger ones becomes blur here as money rituals are within the domain of traditional religion. However, the finding also corroborates the position of some of the participants on how greed and materialism are also shaping the practice of traditional medicine across the study settings. From the findings in this research, these factors intersect across different spaces in promoting the vulnerability of older people, including physical abuse and neglect.

Connected to the emotional distance is the spectrum of opportunities for children to disconnect themselves from their aged parents. The findings reiterate that the opportunities to neglect older people are growing wide as Wictrica accusations and demonisation of old age spreading among believers in the Christendom and Islam in Nigeria (Akanle and Adeogun, 2014; Atata, 2018; Danfulani, 1999). Among older women in the South-Eastern part of Nigeria, Atata (2018) described the lived experiences of older women who had suffered witchcraft accusations and attacks from their relatives. Similar experiences were also reported in Ibadan, where some of the participants described how these beliefs are spread among young people, which sometimes have exposed some older persons to abuse and neglect (Cadmus and Owoaje, 2012).

A key finding on how to prevent physical abuse and neglect is that such measures lie with the individual. Interpersonal relationships, quality of support in old age and attitudinal compositions emerged dominant among the suggested measures. The tendency towards focusing on individual lifestyles, relationships and subjective assessment of exemplary life as an older person is understandable. Partly, there are no concrete arrangements beside religious sermons to protect and minimise vulnerability in old age. What appears dominant is the neglect of older people by the state to families and informal support networks. Such negligence is overt in the absence of policies and interventions that are aimed at reducing vulnerability and preventing abuse and neglect in old age in Nigeria (Togonu-Bickersteth and Akinyemi, 2014). Despite the voids, the findings around preventive measures indicate how older persons are active and not passive in reconstructing challenges and opportunities in their later life. In this sense, the finding reiterates the continuous relevance of individual agencies and resilience in old age in the search for explanations and measures to reduce vulnerability. It also echoes the need for urgent steps in filling the existing void of policies and laws that can protect and reduce vulnerability among older people in Nigeria (Mark, 2016). Nigeria initiated an ageing policy since 2004 (Togonu-Bickersteth and Akinyemi, 2014), the political will to pass the policy into law and enforce it still in process.

Religion appeared implicated in the findings and the literature as a prominent contributor to physical abuse and neglect within the study settings. The implied negative contributions of religious beliefs and values around stereotyping of older people was acknowledged in the group discussion but was marginally considered in that light in most of the narratives that emerged from the interviews. The stance of the religious leaders was normative as they acted to protect their religious doctrines. Such a stance is expected as all the religious leaders affirmed the support of each religion towards older people. The existence and emphasis on the benefits of supporting older people in religious teachings differ from what exists in practice. At this point, the findings lend credence to the literature on how some religious doctrines around demonic possession, stereotypes around old age are indirectly shaping how physical abuse and neglect of older people within the study settings.

8. Conclusion

By using thematic qualitative analysis, this research revealed that older people and religious leaders have multiple interpretations of the phenomena of physical elder abuse and neglect. A similar disposition exists regarding possible preventive measures and avoidance of abuse and neglect in later life. The findings indicated that individual, relationship, and cultural factors are associated with vulnerability to elder abuse, including those that are related to physical and neglect. Despite being neglected, the findings showed that older people are contesting the factors that promote vulnerability to physical elder abuse and neglect.

They negotiate the process, contexts, and relationships that can make them susceptible to both forms of elder abuse. Nonetheless, it was striking that most of the participants expressed worries over the absence of policies and legal frameworks that can protect them and reduce vulnerability. More worrisome is the growing spread of social ills, poor economic situation, the high cost of living and insecurity that are perhaps fuelling fears and supernatural explanations. In a way, these structural changes, moral decadence, and disrespect for older people are compounding ageing experiences, including physical abuse and neglect.

8.1. Limitations of the study

Qualitative research among older people enhances their participation in knowledge production despite the chances of drifting from the topic of interest. However, with the adoption of focused and structured guides, it was less challenging to refocus their attention on the interaction during each session. The findings from this research are limited in two main ways. The first is the limited sample size, which reflects qualitative research epistemology. The sample of participants is permissible as depths and contexts supersede the quest for generalisation in quantitative research. The participants are recruited within two communities in urban areas in Ibadan. There are chances of eliciting different opinions if the participants were from rural areas and perhaps from other ethnic groups in Nigeria. Despite these limitations, the findings are perhaps feasible due to the research design that was adopted.

8.2. Recommendations

Some recommendations are feasible from the key findings from this research. The recommendations here are unexhausted yet critical to the concerns of the participants. First, there is a critical need for more social campaigns and education against physical abuse and neglect among the Yoruba people.

It is also important to quickly pass into law the ageing policy in Nigeria. The law will serve as a blueprint in protecting the interests of older people and also ensure that there are penalties for those physically abusing and neglecting older people.

With the growing spread of social ills, limited access to modern health facilities, important provision of cash transfer schemes and universal health insurance schemes for older people can reduce their dependence on others. Lastly, religious organisations need to pay more attention to some of the doctrines that might be creating negative impressions around old age. The greed for material wealth and money rituals will require drastic economic measures, empowerment programmes for young people and the resuscitation of work ethics and reward system for diligence and performance in Nigeria.
8.3. Future research

The findings revealed that older people are gradually resenting to fears about growing older to a stage where they would be mostly dependent on others. There is a need to understand further the approaches to help-seeking in the absence of legal provisions and formal support for older people. The concerns and fears of older people on growing older to the fourth age (Baltes and Smith, 2003) deserve research attention on how this might shape the notions of generativity in old age. Older people are critical to the appropriation of the demographic dividend in Africa, how and in what ways can the growing prevalence of physical elder abuse and neglect shape participation of older people in this agenda? The socioeconomic and religious forces influencing younger people’s dispositions and social images of older people need to be better investigated and understood. Lastly, there is an urgent need for profiles of elder abusers in Nigeria.

Declarations

Author contribution statement

Ojo Agunbiade: Conceived and designed the experiments; Performed the experiments; Analyzed and interpreted the data; Contributed reagents, materials, analysis tools or data; Wrote the paper.

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The authors declare no conflict of interest.

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