

# The epidemiology of violence against the elderly in Brazil according to the type of aggressor

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White skin color, <68 years, knowing how to read and write, sleep problems, not feeling pleasure in doing activities and having a physical disability were associated with the **unknown aggressor**. Poor health, smoking, discrimination in the health service and feeling bad about oneself were associated with the **known aggressor**.

## BACKGROUND

- Identify the factors associated with violence against the elderly in Brazil, according to the type of aggressor (known or unknown).

With aging, individuals become more vulnerable, due to dependence on other people for basic activities of daily living, a cognitive deficit or natural limitations of aging itself, which generates less defense power and facilitates the action of aggressors.

## METHODS

- It was conducted a population-based cross-sectional study with secondary data from the National Health Survey in 2013, totaling 11,697 individuals aged 60 years or older in Brazil.
- The dependent variable was having suffered violence by a known or unknown aggressor and the independent variables were divided into blocks (Socioeconomic and demographic; Self-perception and health care; Health service use; Health status/disease and Functioning).

The effect of the independent variables on the response variable was expressed by the "Odds Ratio" with a 95% Confidence Interval. Hierarchical models of simple and multiple multinomial logistic regression were performed. In the simple analysis, variables with p-value <0.25 were elective for multiple analysis. A thematic map was constructed according to the spatial distribution of violence, by state.

## RESULTS

Table 1: summary of the variables that were significant for each type of violence.

Variables	Unknown	Known
Color or race	OR	OR
White	2,53	—
Yellow and Indigenous	—	0,08
Age	—	—
<68 years	1,68	—
Can you read and write?	—	—
yes	2,76	—
Health assessment	—	—
Very bad or bad	—	2,39
Do you smoke any tobacco products?	—	—
Yes, daily	—	2,17
Yes, less than daily	—	4,09
Discrimination in the health service by a doctor or other health professional for:	—	—
Type of illness?	—	—
Yes	3,78	3,04
Reason for race/color?	—	—
Yes	—	0,02
By religion/belief?	—	—
Yes	—	6,06

## RESULTS CONTINUED

In the last two weeks, have you had sleep problems, such as difficulty falling asleep, waking up frequently at night or sleeping more than usual?	—	—
Almost every day	1,83	—
Did you feel uncomfortable because you had little interest or didn't feel pleasure in doing things?	—	—
More than half of the days	3,43	—
Almost every day	0,36	—
Did you feel bad about yourself, feeling like a failure or feeling like you let your family down?	—	—
Less than half the days	—	3,87
Almost every day	—	5,14
Do you have a physical disability?	—	—
Yes	5,53	—
How difficult is it to go out alone using transport such as bus, subway, taxi, car, etc.?	—	—
Has little difficulty or no difficulty	6,46	3,13

Caption

- Violence by an unknown person
- Violence by an acquaintance
- Violence by an unknown and known person

Figure 1: Map of violence against the elderly in Brazil.



## CONCLUSIONS

Thus, estimating the prevalence of violence against older people, the type of aggressor, as well as associated factors, is essential for identifying and preventing individual, institutional and structural abuse. Additional research on this topic is recommended, focusing on social determinants, which can use different methodologies, considering the sociocultural, economic and health context of this population.