



Systematic Review

What Does it Matter? Factors in Occurrence of Elderly Abuse among Healthcare Workers in Nursing Homes: A Systematic Review

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ABSTRACT

Introduction: Elderly abuse appears to become an important public health concern and to be widely underestimated by health professionals. The cases are misunderstood and misreported, and often reported as fatal consequences of crimes toward elders. The aim of this review was to explore the factors in occurrence of elder abuse among healthcare workers in nursing homes.

Methods: Seven databases, including Scopus, EBSCO, ProQuest, PubMed, CINAHL, Web of Science and ScienceDirect, were explored to search relevant articles. The initial keywords were “elderly” “abuse” “healthcare workers” and “nursing homes”. The search was limited to English and the data sources were limited to articles published from 2015-2020.

Results: The perspective of the WHO’s integrated care for older people was used as a lens to discuss the results. Fourteen articles were involved in the review. This review suggests that healthcare workers in nursing homes do elder abuse because of their high workload and lack of knowledge around the topic.

Conclusion: This finding acts as a contributor to the paucity of study about elder abuse among healthcare workers. The available evidence suggests that elder abuse has become a significant problem in nursing homes. It is indicated that elder abuse was never been a popular topic among the health workers in nursing homes.

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INTRODUCTION

Aging is a global phenomenon, involving time, speed, and scale where aging takes place between and within the global area. Data from World Population Prospects, show the number of elderly people aged 60 years and over is predicted about 901 million or 12.3% of the world’s population, and by 2050, the number of elderly people will more than double to 2.1 billion or 21.3%. The number of elderly people aged 80 years or over is growing faster than the population of older adults. It is likely the elderly people in the future will remain the largest age group in long-term care facilities or nursing homes (Department of Economic and Social Affairs, 2015). Long-term care or nursing homes daily activity services include assistance with activities of daily living (ADLs;

dressings, bathing, and toileting) (range: 15%-38%) that mainly comprise activities related to mobility (range: 10%-19%) and eating and drinking (range: 2%-17%), instrumental activities of daily living (IADLs; medication management and housework) was rarely observed (up to 3%). Residents were largely observed in a lying or sitting position (range: 89%-92%), and health maintenance tasks. Long-term care services assist people to improve or maintain an optimal level of physical functioning and quality of life, and can include help from other people and special equipment or assistive devices (Harris-Kojetin et al., 2019)(den Ouden et al., 2015). According to the U.S. Bureau of the Census, slightly over 5% of the 65+ population occupy nursing homes, congregate care, assisted living, and board-and-care

homes, and about 4.2% are in nursing homes at any given time. The rate of nursing home use increases with age from 1.4% of the young-old to 24.5% of the oldest-old (National Center for Health Statistics (U.S.), 2018). Almost 50% of those 95 and older live in nursing homes.

This fact is not in-line with the government’s political will to protect the aging population. There is a growing number of elderly people who living in worry, poverty, abandoned, susceptible to be in violence, and other forms of abuse. However, there is a paucity of reports that highlight the number of elder abuse. Violence and abuse can be caused by a dependence of the lives of elderly on the productive age group and they are assumed as the life burden. Abuse of the elderly is expected to increase due to rapidly increasing population growth in many countries (United Nations. Department of Economic and Social Affairs, 2019). Anecdotally , most of the problems come from the internal problems or family problems (Pickering, Ridenour, Salaysay, Reyes-Gastelum, & Pierce, 2017). However, is it only in terms of the family that can abuse the elderly? Research shows that, in every country with care facilities, there is elderly abuse and some evidence shows that abuse and neglect may be very common among nursing home workers. Research in the US shows that 40% of nursing home staff admit to psychological abuse and 10% physical abuse. There is significant awareness about the problem of older harassment in institutional arrangements among populations in European Union (EU) countries(Yon, Ramiro-Gonzalez, Mikton, Huber, & Sethi, 2019).

Many cases related to elder abuse in nursing home by healthcare workers have not been reported yet. Two of the most possible causes are that only a small number of the cases have been reported to the authority, and there is limitation of access to do research on elder abuse, thereby causing the lack of data of elder abuse in nursing homes (Pickering,

Ridenour, & Salaysay, 2016) (Mion & Momeyer, 2019). Lack of reporting has been identified by community healthcare providers and includes clinicians reluctant to acknowledge abuse, fear of liability and limited number of services available to implement for abuse, lack of protocol to identify abuse, and the reason for lack of case detection decisions by healthcare workers include lack of knowledge about elder abuse, its prevalence, signs and symptoms, risk factors, and information about perpetrators, so that they don’t realize their attitude and behavior to the elderly is wrong even become violent toward them (Schmeidel, Daly, Rosenbaum, Schmuch, & Jogerst, 2012) (World Health Organization (WHO), 2015). The elderly condition in the future must be much better with the improvement of older quality of life. Nursing homes as a place of long-term care for the elderly in improving optimal quality of life should be a comfortable and safe place for the elderly, and must be able to recognize symptoms or factors in occurrence about abuse and neglect among healthcare workers to minimize abuse and neglect of elderly in nursing homes.

MATERIALS AND METHODS

Search strategy and selection criteria

This research focused on nursing homes, was part of a larger systematic review of studies examining factors =in occurrence of elder abuse in nursing homes, and description of the methodology consists of comprehensive step search strategy to identify relevant study. First, the initial process is collecting relevant study by determining the keywords related to the topic and purpose of this research. A search strategy was developed for each database using a combination of free text and controlled vocabulary (i.e. MeSH terms). The keywords that we used to search in the databases according to Boolean search operators are “Elderly Abuse” and “nursing homes”

Table 1. Initial keywords used to search for previous studies through Scopus, Web of Science, and EBSCO

Elderly	Abuse	Healthcare	Nursing homes
Old*	Neglect	Healthcare workers	Long-term care facilities
OR	OR		
Age*	Violence		
OR	OR		
Geriatric	Mistreatment		
OR	OR		
Elder	Abandonment		
	OR		
	Victim		

Table 2. Initial keywords used to search for previous studies through PubMed, CINAHL and ProQuest, and PsycINFO

Elder	Abuse	Healthcare	Nursing Homes
Older	Neglect	Healthcare workers	Long-term care facilities
OR	OR		
Aging	Violence		
OR	OR		
Geriatric	Mistreatment		

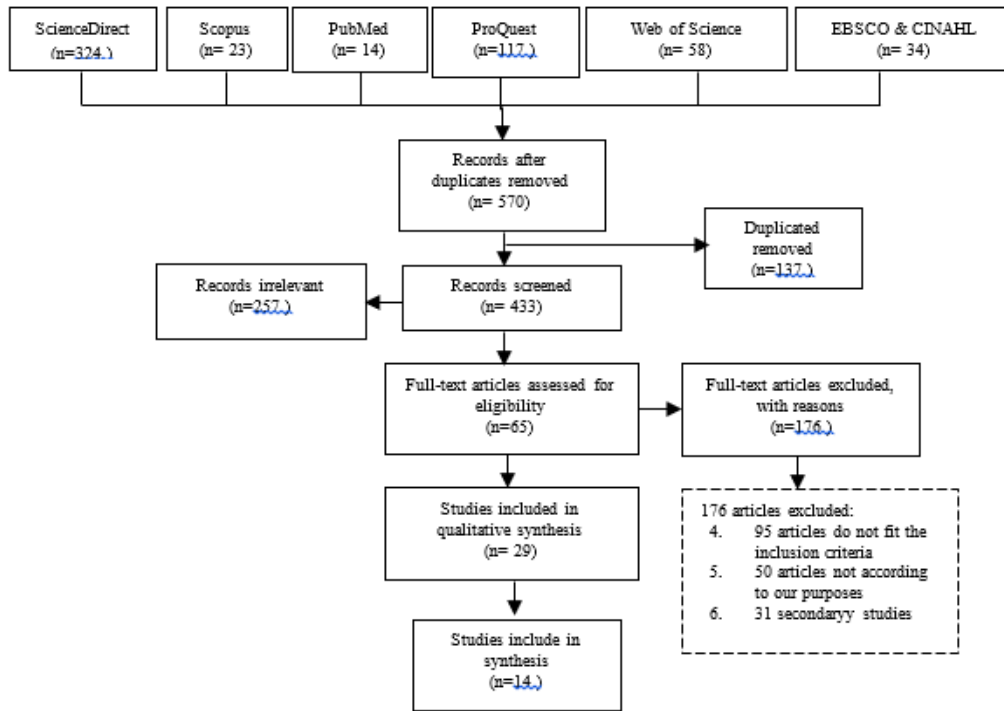


Figure 1. Flowchart of articles selected on the systematic review, the articles obtained from Scopus, EBSCO, CINAHL, Web of Science, PubMed, ScienceDirect and ProQuest as many as 570 articles and final studies included in synthesis as 14 articles.

Table 3. General characteristics of selected studies (n=14)

Category	n	%
Year of Publishing		
2015	3	21.43
2016	2	14.29
2017	2	14.29
2018	5	35.71
2019	1	7.14
2020	1	7.14
Type of abuse		
Neglect	6	42.86
Psychological	4	28.57
Physical	3	21.43
Sexual	1	7.14
Factors occurrence of elder abuse		
Education level	1	7.14
Lack of knowledge	5	35.71
Workload related stress	4	28.57
Staff problem	1	7.14
Discrimination against	1	7.14
Lack of adequate regulations	2	14.29
Type of study		
Cross-sectional	4	28.57
Secondary data analysis	2	14.29
Qualitative study	6	42.86
Systematic review	2	14.29

and “healthcare workers”. We searched major academic databases, including Scopus, Web of Science, PubMed, EBSCO, ProQuest, CINAHL, and ScienceDirect. We use EBSCO because of the rich collection in medical, K-12, public library, law, corporate, and government market articles. The use of ScienceDirect in our study is because of its collections in scientific, technical, and medical

research. ProQuest was used for its collection in research and learning, publishing and dissemination, and the acquisition, management and discovery of library collections. The university librarian was also involved to assist the search for related articles, particularly gray literature.

Second, reference list of publications retrieved in the first step were screened for relevant studies.

Author and Title	Aims	Methodology, data collection and sample	Key findings
Elder Abuse and Its Impact on Quality of Life in Nursing Homes in China Fei Wang et al. (2018)	To investigate the prevalence of elder abuse in nursing homes and its associated demographic, clinical factors and QOL in Macau and Guangzhou, China.	Cross-sectional study Participants' basic socio-demographic and clinical characteristics were collected by a standard data collection sheet designed for this study based on a review of case reports. The interview was conducted by three trained research assistants. The Chinese version of the nine-item Patient Health Questionnaire (PHQ-9) was used to evaluate the severity of depressive symptoms. Quality of life was assessed by the Chinese version of the WHO Quality of Life brief version-WHOQOL-BREF. A total of 681 subjects (244 in Macau and 437 in Guangzhou) were consecutively recruited in 11 nursing homes.	a. Between sites differences were found in terms of gender, education level, religious beliefs, perceived financial status, family history of psychiatric disorders, sleep disturbance, presence of chronic medical conditions and Patoent Health Questionnaire total score between the two cities, but not in the prevalence of elder abuse. b. The discrepancies in education level, perceived financial status and religious beliefs between the two sites were probably due to the different sociocultural and economic backgrounds c. Elder abuse is common in nursing homes in both Macau and Guangzhou. Appropriate strategies and educational programs should be developed for health professionals to reduce the risk of elder abuse in nursing homes.
Elder Abuse in Nursing Homes: Do Special Care Units Make a Difference? A Secondary Data Analysis of the Swiss Nursing Homes Human Resources Project Descriptive correlational study design -Blumenfeld, O.A., Fierz, K. & Zúñiga, F. (2016)	To describe the prevalence of observed emotional abuse, neglect, and physical abuse in Swiss nursing homes, to compare Special Care Units (SCUs) with non-SCUs concerning the frequency of observed emotional abuse, neglect, and physical abuse. To explore how resident-related characteristics, staff outcomes/characteristics, and organizational/environmental factors relate to observed elder abuse.	Secondary data analysis of the Swiss Nursing Homes Human Resources Project (SHURP), a cross-sectional multicenter study. Data collection consisted of 3 questionnaires: 1 facility-level questionnaire for administrators, 1 unit-level questionnaire for unit managers, and 1 individual-level questionnaire for direct care workers. Data on resident characteristics were extracted either from the resident assessment instruments routinely used in Switzerland or from each nursing home's electronic records. A total of 156 nursing homes, including 400 units and 4,599 care workers, met the inclusion criteria for this study.	a. Abuse is related to care workers' stress due to high workloads and the perception of residents as being difficult. b. A positive teamwork and safety climate is associated with lower rates of emotional abuse and neglect. c. Nursing home managers would be well advised to broach the issue of the various forms of elder abuse by offering comprehensive training to care workers, both within and outside the workplace, in order to sensitize them to difficult caring situations, work stressors, and especially their own behavior d. Abuse prevention training should be integrated into the education of healthcare professionals and specifically offered to those closest to the residents
Risk factors for work-related stress and subjective hardship in healthcare workers in nursing homes for the elderly: A cross-sectional study Pélissier, C. (2015)	To explore potential risk factors for work-related stress by detailing working conditions and subjective hardship according to occupational category in healthcare workers working with elderly patients.	A cross-sectional descriptive survey Data on nursing home working conditions were collected by occupational physicians. The study population was limited to those in direct contact with the elderly, who were divided into 3 occupational groups defined by qualifications and tasks:	a. Nursing home workers to prevent stress related to insufficient ability should be encouraged to attend job training courses, which should cover knowledge of the specific care needs of elderly patients and of the authority/responsibility required to do their job.

Author and Title	Aims	Methodology, data collection and sample	Key findings
<p>Addressing elder abuse through integrating law into health: What do allied health professionals at a Community Health Service in Melbourne, Australia, think?</p> <p>Lewis, V.J., et al (2019)</p>	<p>To look at the attitudes of Community Health Service (CHS) staff regarding the integration of a lawyer into their CHS both before and after the integration occurred.</p> <p>a.</p>	<p>housekeepers (HKs), nursing assistants (NAs) and nurses (Ns). Psychosocial stress was assessed with the Siegrist questionnaire. The subjects included 706 HKs, 1,565 NAs and 378 Ns, and the findings showed confusion of tasks and responsibilities in the study population.</p> <p>The surveys were designed by the authors with additional input from the Project Advisory Group and senior health service staff. Questions were divided into attitudes and beliefs about the links between law and health and personal confidence in identifying and dealing with abuse. Participants comprised 127 people who responded to the survey before the lawyer was embedded in the service site and 54 who responded at follow-up. The data were not matched, but at follow-up, 20 respondents indicated they had completed the baseline survey, 26 had not and 8 could not recall.</p>	<p>b. This study highlighted some potential risk factors for work-related stress in the care of elderly people among care workers working in nursing homes</p> <p>c. The results showed that there was substantial confusion of tasks between the three occupations categories and that nursing home workers were exposed to verbal abuses and physical assaults, and experienced hardships, particularly when there was a lack of training in an area.</p> <p>a. Information and training as part of this service model should focus on the skills needed for CHS staff to play their role in such a partnership.</p> <p>b. In this instance, information sessions, training and any other efforts to encourage staff to work with a lawyer did not need to focus on the benefits, but on upskilling staff so they were confident about identifying abuse and had the practical skills to know how and when to involve the lawyer.</p>
<p>Oops! It's happened again! Evidence of the continuing abuse of older people in care homes.</p> <p>Moore, S. (2018)</p>	<p>To explore the evidence of the continuing elderly abuse in care homes.</p>	<p>Qualitative study</p> <p>The questionnaire was issued as before to the care staff complements in the six newly opened care homes for older people participating in this research, with a participant information sheet explaining that there was no obligation to complete it.</p>	<p>a. There is, therefore, a need to acknowledge at central government level that current regulatory and safeguarding regimes continue to fail many of the older people living in care homes, their relatives and the public who no doubt scrutinize the Care Quality Commission quality ratings, drawing from them a false sense of security.</p> <p>b. If the personal value frameworks of many staff who are employed in care homes to provide care are incompatible with the work they undertake, the possibility that abuse will occur and remain unreported endures.</p>

Author and Title	Aims	Methodology, data collection and sample	Key findings
Elder abuse in Norwegian nursing homes: a cross-sectional exploratory study Botngård, A. (2020)	b. To estimate the prevalence of observed and perpetrated staff-to-resident abuse in Norwegian nursing homes.	A cross-sectional exploratory study of nursing staff in 100 randomly drawn Norwegian nursing homes. Data collection, survey questionnaires with invitation letter on the first page, and sealed collection boxes were provided to the coordinators at each nursing home. Of the nursing staff, 6337 were eligible for inclusion, whereas 3811 returned questionnaires, giving a response rate of 60.1%. Of these, 118 were excluded before analyses because they reported not working in direct care, worked in nursing home day care centre or assisted living facilities, or had not answered any items about abuse. The remaining 3693 nursing staff were included in the statistical analysis.	a. This study findings demonstrate that approximately two-thirds of staff in Norwegian nursing homes reported having committed one or more acts of resident mistreatment during the past year, with neglect and psychological abuse being the most commonly reported. b. Public awareness campaigns and educational programs for healthcare staff are vital interventions to reduce and prevent elder abuse, and this can be conducted in a variety of ways including training courses, workshops, educational, seminars, scientific meetings and conferences.
Framing scandalous nursing home care: what is the problem? Jonson, H. (2016)	a. To investigate different ways in which nursing home scandals in Sweden have been framed b. To discuss the relations between these existing frameworks To identify ways of describing the problem that are absent in the current debates.	Qualitative contact analysis Data for the study consisted of media articles, television documentaries and internet debates, expert reports and court hearings, and interviews with representatives of organizations dealing with the issue of mistreatment in nursing home care for older people. Two types of media studies were conducted based on (a) media reports available from the Swedish media database Retriever during the period of 1990 – 2013 and (b) television documentaries on cases of nursing home scandals, including 600 comments in an internet debate at the webpage of the National Broadcasting Corporation of Sweden following two television documentaries on scandalous care using a case study approach	a. The main finding was that Swedish nursing home scandals tend to place older people and older care recipients out of focus. b. The absence of an interpretive framework that relates care practices to the problem of ageism. c. The capacity of the social model to frame activities at the individual level as part of an enabling or disabling society is of particular interest for the field of elder-care.

Author and Title	Aims	Methodology, data collection and sample	Key findings
<p>Perceptions of Abuse in Nursing Home Care Relationship in Uruguay</p> <p>Figueredo, N. B., and Zabalegui, A.Y (2015)</p>	<p>c. To describe the care relationships between caregivers and elderly people in Uruguayan nursing homes</p>	<p>A qualitative study with an ethnographic approach</p> <p>Nine nursing homes for elderly people located in four Uruguayan departments. Twenty-three purposively and theoretically selected participants were interviewed and observed between January 2011 and January 2012.</p>	<p>a. A cultural context of discrimination against the elderly and other factors converge to perpetuate elder abuse and suffering in care homes.</p> <p>b. The lack of adequate regulations covering safety and quality of care, lack of a care model and regular inspections.</p> <p>c. Absence of minimum training requirements for caregivers, and lack of support in situations that have psychic and spiritual repercussions.</p> <p>d. Nursing home managers need knowledge, skills, and communication strategies to identify and manage inappropriate behavior. An urgent review of nursing home regulations is required to protect elderly people's rights.</p>
<p>Job demands, emotional dissonance and elderly abuse: The moderating role of organizational resources</p> <p>Andela, M, Truchot, D. and Huguenotte, V. (2018)</p>	<p>The present study focuses on elderly abuse committed by caregivers in nursing homes. It aimed at a better understanding of neglect and abusive behaviors by considering the working context and the emotional dissonance of these professionals.</p>	<p>A cross-sectional exploratory study</p> <p>1500 questionnaires were sent to 109 nursing homes. Depending on the nursing homes size and the number of healthcare worker working in, the envelopes were containing 15 to 50 questionnaires.</p> <p>Contextualized nursing homes' job demands and resources were measured with different subscales of the scale</p>	<p>a. This study suggested that the job resources represent key factors to moderate the effects of emotional dissonance and job demands on elderly abuse.</p> <p>b. Correlation indicated that both job demands (workload and emotional demands) were positively associated with higher risk of neglect and abusive behaviors, while both organizational resources (quality of the relationships with the colleagues and the team supervisor) were negatively related with both components of elderly abuse.</p> <p>c. Findings presenting caregiver's work overload and certain resident behaviors, such as being difficult, aggressive or having mental problems or physical aggression from residents as risk factors.</p> <p>d. High-quality relationships among the team members and with the team supervisor are essential resources in the prevention of neglect and abusive behaviors.</p>
<p>Preventing elder abuse and neglect in geriatric institutions: Solutions from nursing care providers</p> <p>Wangmo,T., Nordström, K. and Kressig R. W. (2017)</p>	<p>To explore how and why abuse and neglect occurs in geriatric institutions and presents practical prevention measures.</p>	<p>Exploratory qualitative interviews were carried out with purposive sample of 23 nursing staff members.</p> <p>Face-to-face interviews with 23 nursing care providers were carried out between April 2014 and December 2014. These interviews were done by KN (post-doc scholar with a background in philosophy and received</p>	<p>a. Ensuring proper education and training, better management nursing care provider's responsibilities and timely intervention to address abuse and neglect, as well as rotating care provider.</p> <p>b. Implementing these suggestions will allow geriatric institutions, its managers, and nursing care providers to improve quality of care and reduce such negative occurrences in these settings</p>

Author and Title	Aims	Methodology, data collection and sample	Key findings
		some training in qualitative methods before the interviews). These interviews were analyzed using thematic analysis. Participating nursing staff members reported several factors pertaining to the care provider, the older patient, and the institution that precipitated abuse and neglect.	
The prevalence of elder abuse in institutional settings: a systematic review and meta-analysis Yon, Y., Ramiro-Gonzalez, M., Mikton, C.R., Huber, M. and Sethi, D. (2018)	d. To conduct a systematic review and meta-analysis of the problem in institutional settings and to provide estimates of the prevalence of elder abuse in the past 12 months.	A systematic review and meta-analysis Fourteen academic databases and other online platforms were systematically searched for studies on elder abuse. Additionally, 26 experts in the field were consulted to identify further studies. All studies were screened for inclusion criteria by two independent reviewers. Data were extracted, and meta-analysis was conducted. Self-reported data from older residents and staff were considered separately.	a. Despite higher rates of abuse and neglect in the institutional settings than in the community settings, elder abuse in the institutions has not achieved the same public health priority as other forms of abuse. b. Greater attention and resources are needed to ensure that nursing and residential home facilities strike a balance between providing care for the complex needs of older residents and ensuring proper support of the staff through training, education and adequate manpower and wages to ensure quality of care. c. Global action to improve surveillance and monitoring of institutional elder abuse is vital to inform policy action to prevent elder abuse.
Voices from the Frontlines: Examining Elder Abuse from Multiple Professional Perspectives DeLiema M., Navarro,A., Enguidanos, S. and Wilber, K. (2015)	To examine the attitudes and perceptions of health professionals in responding to elder mistreatment and to compare these attitudes and perceptions to those of APS workers who investigate abuse	A qualitative study (open-ended discussion protocol building on previous focus group work with professionals who respond to EAN (elder abuse and neglect). Focus groups were conducted as part of a larger study on EAN prevalence in low-income community settings. Two healthcare provider focus groups were conducted in 2008—one with geriatric care managers (n = 4) who address the needs of community-dwelling elders and one with hospice staff (n = 13), all of whom worked at a health maintenance organization (HMO) in a large metropolitan area. The third focus group was composed of APS workers (n = 9) recruited from branch offices that provide services in the same region as the healthcare professionals.	a. Finding of this study is that although the health professionals had knowledge of and experience with mandatory reporting laws, they used discretion and professional judgment to determine whether to make a report to APS (adult protective service). b. APS workers have large caseloads, reducing their time with individual clients. APS workers attributed large caseloads, in part, to minor or irrelevant incidents referred by mandatory reporters to avoid liability and also to misconceptions about the function of APS among healthcare institutions.

Author and Title	Aims	Methodology, data collection and sample	Key findings
Staff conceptualizations of elder abuse in residential aged care: A rapid review	c. To explore how residential aged care staff conceptualize and identify elder abuse.	A rapid review The literature search was conducted to identify articles published from 2000 to 2017, regarding elder abuse in RACFs. This time period was selected to ensure that the information collected was relevant and up to date. The search was performed in bibliographic databases.	a. Older and more educated staff were found to report more abuse perhaps indicative of these staff having a greater and broader understanding of what abuse is, feeling less threatened by the consequences and a greater desire for abuse to be addressed. b. Need to understand the skill level, competencies and attributes of those who make up the workforce in RACFs: what is their age, gender, training and cultural background. RACF staff, particularly those who are junior and less well trained, may not conceptualize suboptimal care with harm or abuse. c. Education and attitudinal change is one way in which to begin to address elder abuse in RACFs – specifically education and training to promote awareness about the complexities of abuse and the different risk factors, and how to identify and address abuse.
Radermacher, H., Toh, Y.L., Western, D., Coles, J., Goeman, D. and Lowthian, J. (2018)			
Preventing elder abuse and neglect in geriatric institutions: Solutions from nursing care providers	e. To explore how and why abuse and neglect occurs in geriatric institutions and presents practical prevention measure	Exploratory qualitative interviews Face-to-face interviews with 23 nursing care providers were carried out between April 2014 and December 2014. Purposive samples of geriatric institutions and nursing care providers working in the German speaking north-western region of Switzerland was recruited. Co-authors (RWK and KN) planned out the data collection and KN contacted the responsible persons of seven geriatric institutions. Three nursing homes, one inpatient geriatric center, and the regional home care provider responded positively to the request for participation. Data analysis followed descriptive thematic analysis approach where participants' voices were assumed to reflect the reality.	a. Irrespective of cultural and geographic differences, geriatric settings may have unique characteristics and challenges within a nursing setting. c. Elder abuse could be due to the fact that nursing care providers do not wish to implicate themselves nor their co-workers to third parties, although there is no Swiss law concerning mandatory reporting of elder abuse.
Wangmo, T. Nordström, K. and Kressig, R.W. (2017)			

Third, we searched additional web-based platforms, including specialized journals, gray literature from Google and WHO's Global Health. The relevant literature was searched from 29 November, 2019 and the research process followed the Cochrane guidelines (Akl, 2019). We limited search literature period from 2015 until 2020 which is research articles, news, government policy, and some of the gray literature about abuse and neglect on elderly. All sources are in English. We excluded studies that reviews and conference proceeding, and resident to resident mistreatment in nursing homes.

Study selection

By using the above criteria, we found 570 literatures potentially related to this literature. All articles used English language. For the first step, we found 433 journals supporting this literature. Then we read the author's abstract and obtained appropriate 65 journals. There were 14 articles that most appropriate to support our purpose. Figure 1 shows the flowchart of study selection.

RESULTS

From the 570 studies that were initially identified through the comprehensive search strategy for factors of elderly abuse among healthcare workers in nursing homes, 14 full text articles related to abuse in nursing homes were independently reviewed. Based on 14 articles that have been analyzed (Table 3), six studies (42.86%) showed type abuse of neglect, four studies (28.57%) psychological abuse, three studies (21.43%) physical abuse, and one study (7.14%) sexual abuse. Regarding the types of research designs, there were six studies (42.86%) having qualitative articles.

From the 14 articles that have been analyzed, it shows that all articles related to elderly abuse in nursing homes. Factors in occurrence of elderly abuse are lack of knowledge about abuse (35.71%), Nursing home managers need knowledge, skills, and communication strategies to identify and manage inappropriate behavior (Arens, Fierz, & Zúñiga, 2017) (Stanley & Flynn, 2015) and work-related stress (28,57%), abuse is related to care workers' stress due to high workloads and the perception of residents as being difficult (Pélissier et al., 2015).

The study shows that a positive teamwork and safety climate is associated with lower rates of emotional abuse and neglect (Daichman, Aguas, & Spencer, 2016). Abuse prevention training should be integrated into the education of healthcare professionals and specifically offered to those closest to the residents. Public awareness campaigns and educational programs for healthcare staff are vital interventions to reduce and prevent elder abuse, and this can be conducted in a variety of ways, including training courses, workshops, educational, seminars, scientific meetings and conferences.

DISCUSSION

Elder abuse

Elder abuse is a violation of human rights and includes physical, sexual, psychological, emotional, financial and material torture, neglect and serious loss of dignity. An aging population globally has caused increased violence in the elderly. Elder abuse is one of human rights abuse and able to cause injury, disease, a decrease in productivity, isolation, and the feeling of despair (Richmond et al., 2020). According to the Centers for Disease Control and Prevention there are various types of elder abuse, such as physical, verbal or psychological, sexual, financial and neglect. Physical abuse is an act conducted by using of force that leads to create wound, pain, and damage in some part of the body. For example hitting, pushing, kicking, burning, slapping, and pinching (Centers for Disease Control, 2016).

Neglecting elderly is a failure in providing the needs and optimal service or to prevent danger in their life. Examples of neglect are the lack of health maintenances, failure in providing physical tools like spectacles, the hearing tools, dentures, and failure in giving protection. Neglect abuse is a failure to fulfill basic needs including food, housing, clothing and medical care (Caceres, Bub, Negrete, Giraldo Rodríguez, & Squires, 2018).

Education really needed: Knowledge about elder abuse

The results of the study carried show that surveys and reports indicate that elder abuse by healthcare workers is an important problem and that many abuse incidents are not reported. Any member of the healthcare team can abuse older clients. Abuse can take place in a nursing home, or in any setting where healthcare workers care for clients. Factors related to elder abuse by healthcare workers include stress at work, e.g. long hours, too much work and not enough staff, worker burnout and lack of knowledge about abuse in elderly (Lewis, White, Hawthorne, Eastwood, & Mullins, 2019). Forms of violence were about physical abuse in the elderly when injured due to hitting, kicking, pushing, slapping, burning or other show of force in nursing homes. Sexual harassment involves coercion in the elderly to take part in sexual acts when the elderly do not approve. Psychological / emotional abuse is behavior that destroys self-esteem or the wellbeing of the elderly, such as calling names, scaring, embarrassing, destroying things or ignoring them. Neglect is a failure to fulfill basic needs, including food, housing, clothing and medical care (Lewis et al., 2019)(Botngård, Eide, Mosqueda, & Malmedal, 2020).

The problem of neglecting the elderly is also triggered due to lack of awareness about the legal provisions mechanism for the incidence of abuse of the elderly. Active participation of community members, adults and the elderly must be made aware of the legal provisions. The government must also pay

attention to legal policies regarding elderly people living alone. Rapid, effective and efficient recovery mechanisms are needed to ensure a safe and happy life for the elderly (Dasbas & Isikhan, 2019).

Healthcare workers education and empowerment

Obstacles to the detection and management of elder are because the lack of knowledge. Wrong treatment to elderly population has become a medical and social problem in this last 20 years (Figueredo Borda & Yarnoz, 2015). Because of the lack of reporting, it is often undetectable. Even though there has never been accurate data because of the lack of research and studies about that, in daily practice we often found some cases that indicate wrong treatment of the elderly in nursing homes. Various attitudes like violence, neglect, exploitation, and isolation by healthcare workers and relatives can give fatal effect for the elderly. Those attitudes, deliberate or not, could lead to decline the quality of elderly life and health (Andela, Truchot, & Huguenotte, 2018; Figueredo Borda & Yarnoz, 2015).

Educators have an important and unique role in designing and developing programs for those who work in elderly life care. The social workers and care givers who collaborate with educators have a huge challenge in the increase of elderly abuse. Education about abuse in the elderly is an important way to prevent abuse in the community. Changes in attitudes toward abuse in the elderly can affect a person's attitude toward an older person. The study found that additional educational efforts regarding misuse of the elderly need to be made to support the intention of harassment to abuse the elderly (Wang et al., 2018).

The healthcare services and facilities need changes within local health system

Responsibilities for promoting the health in its service providers are divided among individual, community, health professionals, health services institutions, and the government. They would have to work together through the healthcare system which contributed to the achievement of health. The role of the health sectors has to increase health promotion, in addition to responsibilities in clinical which provide the services and treatment (Wangmo, Nordström, & Kressig, 2017). Health services have to hold a mandate and also consider the cultural needs. This mandate has to support individual needs and communities' health, also opening a broader channel or pathway between the health, social components, political, economic, and physical environment (Radermacher et al., 2018). To support the life of the elderly, a safe and comfortable place to live is needed. Modification of environment by adding the equipment is indispensable, because changes that are adjusted to the elderly require interacting with the environment in nursing homes. There are four modifications of residence and medical environmental benefits, there are the ease of access, adding independence, maintaining security, and or

thrift energy conservation (Radermacher et al., 2018).

The call for political will: Health policy

Responsibility to the elderly is an obligation for the government, the community, family and nursing homes. Taking into account the elderly population and the possibility of the growth of the elderly in situations of violence, many sectors are pressured to formulate policies, guidelines and studies to overcome this problem (DeLiema, Navarro, Enguidanos, & Wilber, 2015). Elder abuse in the US as a guideline requires more attention because it is estimated that 84% of cases have never been reported to the protection agency and there is no federal law regarding elder abuse, even though each country has special laws to prevent misuse of the elderly [26], [27]. The elderly growth in the world has increased very high, thus this has been strategic reason to protect seniors by law protection in the form of regional regulation.

The elderly nursing houses are services to elderly with high dependency care rate (physical weak), they live at the facility for unlimited time. Daily services for elderly is the type of service for elderly who are still active and living among the communities. Nursing homes and elderly rehabilitation is the type of service caring for those who are acute and have high medical dependency rate. Health services facilities for elderly are supported by health teams who work professionally. Health teams cooperate in any facilities to offer a health services to elderly plenary.

CONCLUSION

This review highlights the essence of elder abuse and wellbeing. The fact is that even the fundamental needs of the elders are often undermined, thus, this paper suggest that at least the healthcare needs to be aware of elder abuse and its consequences. Further, there is need to empower society to reduce the possibility of abuse. This paper also underscores the need for elder-friendly environment and reinvented health services, all of which needs a better political will from the government of Indonesia.

CONFLICT OF INTEREST

The authors declare no potential conflict of interests

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