

Examining the effect of elder abuse on welfare status: the case of selected districts in Southwestern Uganda

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Abstract

Purpose – *This paper aims to examine the predictive potential of elder abuse on welfare status of older persons in selected districts in Southwestern Uganda.*

Design/methodology/approach – *The study took a cross-sectional descriptive and analytical design. Using a sample of 285 respondents, data were obtained from 201 usable questionnaires collected from caregivers and officials relating with older persons in this area making it a response rate of 70.5%. Using statistical program for social scientists (SPSS), the researchers tested and analyzed six hypotheses.*

Findings – *Results indicate that physical abuse, emotional abuse, financial abuse and neglect negatively and significantly predicted welfare status. Though negatively related, social abuse and sexual abuse did not significantly predict welfare status.*

Practical implications – *Family members and caregivers must make practices that do not promote physical abuse, emotional abuse, financial abuse and neglect as these negatively affect the welfare status of elderly persons. District officials such as community development officers and other persons handling older persons need to implement policies that promote the welfare status of the elderly.*

Originality/value – *The study demonstrates that the existence of physical abuse, emotional abuse, financial abuse and neglect is a deterrent to older person's welfare status.*

Keywords *Elder abuse, Physical abuse, Emotional abuse, Financial abuse, Sexual abuse, Social abuse, Elderly abuse, Welfare status, Uganda*

Paper type *Research paper*

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1. Introduction

Elder abuse is a global health concern as noted by governments and international organizations. It is considered a prevalent phenomenon around the world with distressing effects on the victims. Although it is not a new phenomenon, interest in examining elder abuse is relatively new in Uganda. According to the [CDC \(2020\)](#), elder abuse is an intentional act or failure to act that causes or creates a risk of harm to an older adult. The Ministry of Gender, Labour and Social Development (MGLSD) defines “Older Persons” as individuals aged 60 years and above ([UBOS, 2019](#)). Older persons make up 4.3% of Uganda's total population and will remain a minority in the near future hence exposing them to risk of abuse ([MGLSD, 2020](#)).

Elder abuse often occurs at the hands of a caregiver or a person the elder trusts ([CDC, 2022](#)). Elder abuse is defined as “a single or repeated act or lack of appropriate action that occurs in any relationship where there is an expectation of trust that causes harm or distress to an older person or violates their human and civil rights” (Working Group on Elder Abuse, 2002; WHO, 2020). Types of elder abuse include physical, social, financial, psychological or sexual and can include mistreatment and neglect ([Better Health, 2018](#); [MGLSD, 2020](#)).

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Similarly, [Relationships Australia \(2018\)](#) identifies six forms of elder abuse as physical, emotional/psychological, social, financial, sexual and neglect. Elder abuse can take the form of intentional or unintentional neglect of an older adult by the caregiver ([Robert and Michol, 2014](#)). These definitions suggest that whether intentional or unintentional, any act causing harm or distress to an older person is abuse. Recent research in Uganda shows that about 30.4% of the older persons experienced two types of abuse concurrently, and a majority (66.6%) experienced both physical mistreatment and neglect ([Atim et al., 2023](#)). In the African setting, elder abuse is often characterized by the immediate family members, trusted caregivers or the society often subjecting the elderly to abuse. The elderly constitutes the most vulnerable group after children. In Africa, this group is highly marginalized and left to fight the most difficult battle of their lives – how to live well and cope with abuse in old age. The elderly persons have always been seen as objects for welfare and a burden on the family and the system. The most vulnerable among the elderly are the poor and disadvantaged ones. They are in the rural and urban areas, among educated and uneducated and in all the various ethnic groups. They are subjected to all kinds of human degradation. They are deprived of respect and their rights. The level of awareness on the plight of the elderly is low. The issue is often complex and linked with other problems in the society such as age-discriminating attitudes. It is unacknowledged and regarded as a taboo to discuss in the open. When reported it is often dismissed as family or domestic issue that should be resolved in the home ([Atim et al., 2023](#)). Older persons are abused socially, physically, sexually, economically and psychologically. Their basic human rights such as the right to life and liberty, the right to work and the right to freedom from discrimination are violated. The older persons suffer abuses such as rape, theft and burglary, dispossession of property by individuals, families or the community and are, among other things, accused of witchcraft, preventing or causing too much rain for which they are tortured and assaulted. This situation arises because they live in isolation or they are too frail to defend themselves and there are no mechanisms to protect them ([The Republic of Uganda, 2012](#)). Elder abuse affects welfare status.

Welfare and well-being are often used interchangeably. Welfare or well-being refers to an overall condition emphasizing happiness and contentment, though also including one's standard of living in financial or material ways ([Econlib, 2022](#)). Welfare status refers to a person's relative level of respectability and honor including individual well-being, ability to thrive, life satisfaction, improved quality of life and improved life expectancy ([Sedikides and Guinote, 2018](#); [Kobau et al., 2010](#)). As defined by [CDC \(2018\)](#), well-being is a positive outcome that is meaningful for people and for many sectors of society, because it tells us that people perceive that their lives are going on well ([CDC, 2018](#)). However, it is important to note that there is no harmony around a single definition of well-being, nonetheless there is general consensus that at minimum, well-being contains the presence of positive emotions and moods (such as contentment and happiness), the absence of negative emotions (such as depression and anxiety), satisfaction with life, fulfillment and positive functioning ([Frey and Stutzer, 2002](#)). From a UNDP perspective, welfare is primarily a matter of education, health and income, as reflected in the HDI, a combination of three social welfare types (long and healthy life, access to information and a decent standard of living) ([UNDP, 2020](#)).

The concept of welfare status is rooted in the social exchange theory.

2. Theoretical underpinnings, literature review and hypotheses development

2.1 Theoretical review

Social exchange theory is a social psychological approach to the study of human interactions. The fundamental premise of the social exchange theory is that human relationships are essential for survival and that individuals engage in interaction to satisfy their needs ([Blau, 1964](#); [Homans, 1958, 1961](#)). In this study's context, abuse can occur in the context of tactics and responses in family life. In other words, social exchange

contemplates on the interaction and dependence between the victim and the caregiver. Most of us act according to a series of unwritten rules and have interchangeable relationships with others. These unwritten rules and expectations establish a balance between what we offer and what we receive. The social exchange theory is characterized by reciprocal interdependence, which is one party's action is contingent on the other party's behavior (Blau, 1964; Cropanzano and Mitchell, 2005). When power balance is devastated and a more powerful person unjustly controls others, the problems such as anger demanding care, personal conflicts, unresolved family problems and perhaps even greater risk of abuse will occur (Soares *et al.*, 2010). The weak and poor status that the elderly is persistently found in makes them become dependent. To Das and Teng (2002), social exchange can be viewed as an ongoing reciprocal process in which actions are contingent on rewarding reactions from others. The exchange dependence on the caregiver, for example, in the context of the elder community can lead to loss of the importance of older persons in conveying societal values, traditions and cultural issues. Consequently, the burden of dependence is unbearable for the poor and unskilled caregiver, which is why it creates a growing sense of negative feelings that can create hatred for the elderly and anxiety on the caregiver, hence elder abuse.

Now the authors turn to review of literature on the various relationships.

2.1.1 Physical abuse and welfare status. Physical abuse is the intentional or reckless use of physical force or physical coercion that may result in bodily injury, pain or impairment. Acts of physical violence include, but are not limited to, hitting, beating, pushing, shoving, shaking, slapping, kicking, pinching and burning. Physical abuse also embraces any unlawful, excessive or unnecessary use of physical or chemical means to restrain an elder, such as force-feeding and punishment (Wallace and Crabb, 2017; Storey, 2020). Physical abuse has detrimental psychosocial consequences, physical trauma, increased hospitalization and mortality, depression and anxiety (Ernst and Maschi, 2018) and cognitive decline (Li and Dong, 2020). Other empirical studies have also revealed that physical abuse can lead to failure to thrive among older persons. When an older person is physically abused, research has found that side effects include physical injuries such as bruises, fractures, dislocations, burns and loss of hair and death (Brozowski and Hall, 2010; Iborra, 2009; Donovan and Regehr, 2010). In addition, decreased quality of life and poor health among the elderly is associated with elder abuse (Honarvar *et al.*, 2020). Besides, Honarvar *et al.*'s (2020) study indicates that physical abuse had a direct and inverse effect on quality of life, although the effect differed between men and women. Research shows that health problems associated with elder abuse increase utilization of health services. Usually, it is either the family of the abused elder person or the national governments that meet the financial costs for the health care given to the abused by the health-care providers. The World Report on Violence and Health (2002) reports that:

[...] for older people, the consequences of physical abuse can be especially serious. Older people are physically weaker and more vulnerable than younger adults are, their bones are more brittle and convalescence takes longer. Even a relatively minor injury can cause serious and permanent damage.

This implies that the consequences of physical abuse are devastating on the abused elder people and on the institutions responsible for the welfare of the older people, hence limiting their ability to thrive. The authors hence hypothesize that:

H1. Physical abuse is negatively associated with welfare status.

2.1.2 Social abuse and welfare status. Social abuse is behavior that aims to cut you off from your family, friends or community. It can also involve a person or people trying to damage your relationships with others. The concept of social abuse has been picked because man is a social animal. Furthermore, given the fact that the concept of elder

abuse is rooted in the social exchange theory, scholars may not miss out on this concept. People who are socially abusive may also attempt to make you look bad or ruin your reputation. Social abuse can include things done in the home, in public, over the phone or on the internet and social media ([Department of Social Services-1800Respect, 2022](#)). Social abuse could involve withholding or controlling mail or phone calls, preventing the elderly from attending religious or cultural events or taking over their home without consent. Social isolation often allows other forms of abuse to take place ([Relationships Australia, 2018](#)). Results reveal that social abuse can leave the older person anxious and distressed at not being able to have contact with other people. It can lead to mental or physical illnesses ([Seniors Rights Victoria, 2022](#)). Social abuse resulting from misconceptions such as those of witchcraft can lead to many negative consequences. These include assault, murder, stigmatization, discrimination, exclusion, relocation and destitution which ultimately affect the welfare of the older persons. In the United Republic of Tanzania, for example, 500 older women are murdered each year following accusations against them of practicing witchcraft. As a result, large numbers of older women are evicted from their homes and communities in fear of being accused of witchcraft and end up becoming destitute in urban areas ([Nhongo, 2008](#); [HelpAge International, 2012](#)). The authors hence hypothesize that:

H2. Social abuse is negatively associated with welfare status.

2.1.3 Financial abuse and welfare status. Financial abuse is defined as the illegal or improper use of an elder's funds, property or assets including, but not limited to misusing or stealing an older person's money or possessions, coercing or deceiving an older person into signing any document (such as contracts or will) and the improper use of conservatorship, guardianship or power of attorney ([Phelan, 2020](#)). Research has shown that a number of persons in different countries in Africa experience financial abuse with Nigeria at 13.1% ([Cadmus and Owoaje, 2012](#)), Egypt at 22.2% ([El-Khawaga et al., 2021](#)), South Africa at 24.4% ([Bigala and Ayiga, 2014](#)) and Uganda at 22.2% ([Atim et al., 2023](#)). Among these countries, Uganda has the lowest gross domestic product ([Simona and Statista, 2021](#)); consequently, its population experience higher levels of poverty, leading them to abuse older persons who are financially unstable or dependent older persons. Older persons become a target by family members, caregivers due to their old age vulnerability. Empirical studies reveal that financial abuse can be harder to spot than the other types of elder abuse as it may not physically affect the victim. In fact, elder financial abuse may go on for years before it is finally noticed ([Nursing Home Abuse Center, 2022](#)). Older people that do not have a good support network of trusted family or friends could be at a greater risk of abuse. If people are not checking up on an elder, financial abuse can go unnoticed for days, months or even years. It is argued that the long-term consequences of elder financial exploitation can be devastating. Financial abuse can also be emotionally destructive. In some cases, elders have become depressed or anxious after suffering from financial exploitation, according to the National Center on Elder Abuse ([NCEA, 2022](#)). The NCEA reported that 53% of elder financial abuse cases were committed by family members such as adult children or spouses. In addition, financial abuse leads to compromised physical wellness; diminished independence in later life; monetary loss; financial dependence; psychological decline; loneliness ([Wong and Waite, 2017](#)); and depression, anxiety and sleep disorders ([Weissberger et al., 2020](#); [Acierno et al., 2019](#)). The writers hence hypothesize as follows:

H3. Financial abuse is negatively associated with welfare status.

2.1.4 Emotional or psychological abuse and welfare status. Emotional abuse is the infliction of anguish, pain or distress through verbal or nonverbal acts including, but not limited to verbal assaults, insults, threats, intimidation, humiliation, isolation and harassment ([Neuhart and Carney, 2020](#); [Wallace and Crabb, 2017](#)). Emotional abuse has been associated with feelings of shame and guilt; loss of self-esteem and compromised sense of self-worth;

physical decline; loss of attachment to the perpetrator, who may be a family member caregiver; diminished psychological wellness; increased morbidity and mortality; emotional distress, loneliness, isolation as well as depression, posttraumatic stress disorder and other adverse psychological health outcomes (Neuhart and Carney, 2020). In addition, Honarvar *et al.* (2020) revealed that regarding the associations between the components of quality of life and abuse, the total quality of life score had the strongest correlation with the emotional component of abuse. With regard to psychological effects of abuse, a few studies found that, other things being equal, abused adults revealed significantly higher levels of depression than nonabused adults (Bristowe and Collins, 1989; Pillemer and Prescott, 1989). However, few studies of other likely psychological consequences, such as learned helplessness and alienation, posttraumatic stress disorder or feelings of guilt, shame and fear are available. Feelings of guilt and shame lead to depression hence limited individual well-being (Podnieks and Thomas, 2017). A study by Lyberg *et al.* (2013) found out that older people had memories of prior guilt and shame and in some cases more or less concealed regret about how their mental health problems had affected their family members (Lyberg *et al.*, 2013). In support of these results, a recent study established emotional abuse as the most cause of depression and anxiety (Honarvar *et al.*, 2020). The authors hence hypothesize as hereunder:

H4. Emotional abuse is negatively associated with welfare status.

2.1.5 Sexual abuse and welfare status. Sexual abuse refers to nonconsensual sexual contact of any kind with an older adult, perpetrated through force, threats or the exploitation of authority. Sexual abuse includes, but is not limited to, unwanted touching, sexual assault or battery, sexual harassment and sexual interaction with elders who lack the capacity to give consent (Band-Winterstein *et al.*, 2019; Wallace and Crabb, 2017). Empirical research has established that the effects that occur on the elderly as a result of sexual abuse include experiencing trauma of the genitals, breasts and mouth (Bavel *et al.*, 2010; Iborra, 2009; Manthorpe, 2011). There is also evidence that this form of abuse can lead to the transmission of sexually transmitted diseases to older adults such as HIV/AIDS, syphilis, among others (Cohen, 2007; Brozowski and Hall, 2010; Donovan and Regehr, 2010). Other studies reveal that, due to sexual abuse, some older persons have experienced posttraumatic stress syndrome, sleep disturbances, depression and/or anxiety, dissociative symptoms, changes in self-image, increased hospitalization and poor health; feelings of shame and guilt (Band-Winterstein *et al.*, 2019). The authors hence hypothesize as follows:

H5. Sexual abuse is negatively associated with welfare status.

2.1.6 Neglect and welfare status. Neglect is the refusal or failure to fulfill any part of a person's obligations or duties of care to an elder which include, but are not limited to, life necessities such as food, water, clothing, shelter, personal hygiene, medicine, comfort and personal safety (Wallace and Crabb, 2017). Research results indicate that neglect has a great association with malnutrition and dehydration, unmet basic physiological needs, including hygienic conditions and living quarters, functional impairment, lower quality of life, psychological distress and depression, poor physical health and increased disability and mortality (Ayalon, 2015). Furthermore, other studies have also revealed that when an older person is neglected, he may stop eating. This results in dehydration, malnutrition, deterioration in illnesses and death. Isolation, loss of dignity and restriction of freedom of movement among the elderly have also been established as other consequences (Bavel *et al.*, 2010; Mupila, 2008; Se'ver, 2007). The authors hence hypothesize as below:

H6. Neglect is negatively associated with welfare status.

The study examines the predictive potential of elder abuse indicators on welfare status. In this study, the authors gather data from persons who relate with elders on a usual basis. These respondents are suited to provide appropriate opinions on the questions asked

because they often relate with the elders. These might be the first works to the best of the understanding of the authors to study elder abuse and welfare status in a single, comprehensive study particularly in a sub-Saharan developing environment. Consequently, this study provides the following contributions: First, the authors analyze the measures of elder abuse as portrayed in a developing country setting – Uganda. Second, the researchers examine the influence of elder abuse indicators on the welfare status of individuals in selected districts in Western Uganda. Third, the authors increase understanding of welfare status by suggesting to stakeholders specifically the MGLSD and Civil Society Organizations (CSOs), key implications of elder abuse principally on the welfare of the elderly. By exploring the Ugandan context, the study hence contributes to literature with a perspective from a small examined environment. The study is presented in six sections; Section 1 for introduction, Section 2 is theory, literature review and development of hypotheses, Section 3 is methodology, Section 4 is results, Section 5 is discussion and Section 6 is conclusions, implications and areas for further review.

The study is benched in the following hypothesized model (Figure 1).

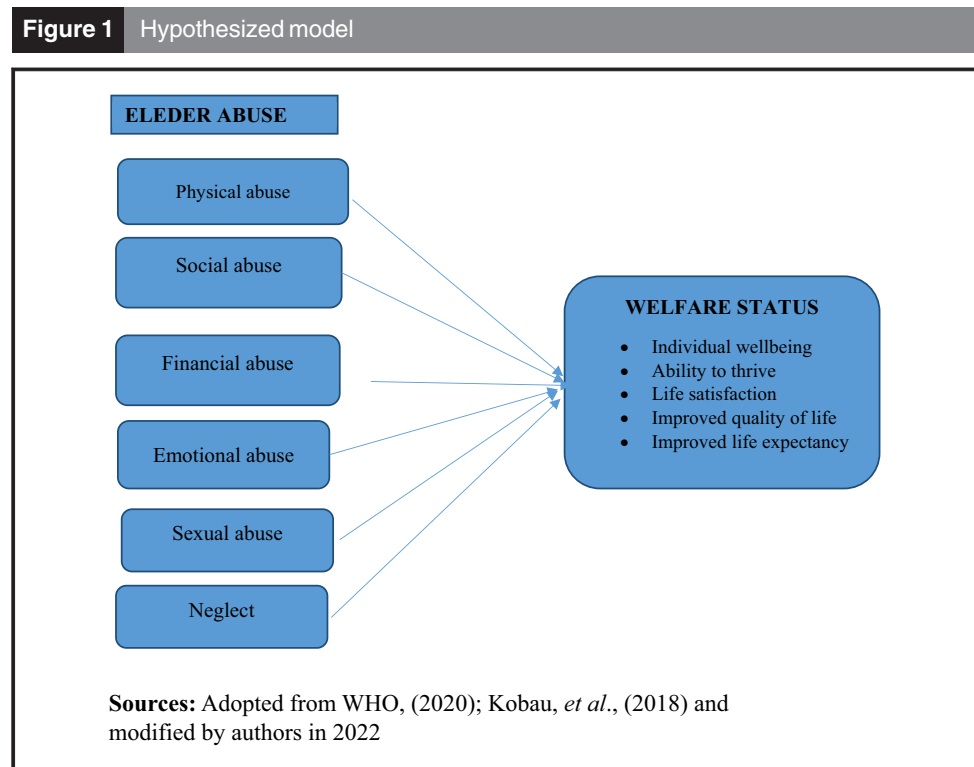
Now the researchers provide the methodology used in the study.

3. Methodology

In this section, the researchers present the research design, population, sample size and sampling procedure. The researchers also discuss the data collection instrument, measurement of variables, validity and reliability.

3.1 Research design

The study adopted a cross-sectional descriptive and analytical research design. It explored the association between the measures of elder abuse and welfare status among older people in selected districts in Southwestern Uganda.



3.2 Population, sample size and sampling procedure

The study targeted the opinions of a population of 437 respondents who included caregivers, probation offices, community development officers, police, local leaders, religious leaders and CSOs in Kisoro, Rukiga, Rukungiri, Bushenyi and Mbarara districts in Southwestern Uganda. The districts were chosen because studies have indicated that instances of poor welfare of older persons had been on the rise (Atim *et al.*, 2023; Wamara *et al.*, 2022). The above respondents who formed the unit of analysis were chosen because they on a daily basis work with the elderly persons, know their challenges and hence were much suited to provide appropriate responses for this study. The researchers sought 95% assurance level and computed a sample size of 285 (Krejcie and Morgan, 1970). To obtain the 285 respondents, the researchers used proportionate simple random sampling. In this approach, each category sample size was directly proportional to the population size of the entire population of categories. That means that each strata sample had the same sampling fraction (Table 1).

In this paper, the researchers present results derived from 201 usable questionnaires. The particulars of the 201 respondents are provided in Table 2.

3.3 Data collection and measurement of variables

The researchers used a self-administered questionnaire anchored on a five-point Likert scale. The response categories ranged from “1 – Never” to “5 – Very often” for welfare status and “1 – strongly disagree to “5 – strongly agree” for elder abuse. The researchers measured elder abuse according to the National Centre for Elder Abuse (NCEA, 2010), World Health Organization (WHO, 2021) and Better Health (2018). It was operationalized in terms of physical abuse, social abuse, financial abuse, emotional abuse, sexual abuse and neglect. It had items such as “Family members and caregivers abandon older persons”. The authors measured welfare status according to the works of Kobau *et al.* (2010) and Sedikides and Guinote (2018). It was operationalized in form of individual well-being, ability to thrive, life satisfaction, improved quality of life and improved life expectancy. It had items such as “Older persons are able to cope with life with ease”.

3.4 Comparing responses of gender on elder abuse and welfare

The authors carried out an independent-samples *t*-test, in a bid to compare the mean scores of different gender of respondents on both welfare status of elders and elder abuse in selected districts in Western Uganda. The results of Levene’s test for equality of variances helped establish whether the variance (variation) of scores for the male and female respondents is the same. As for welfare status, Levene’s test statistic was 1.998, $p \geq 0.05$. This means that the assumption of equal variances was not violated implying that there are equal variances assumed among the males and female respondents in the

Table 1 Proportionate random sampling

Category	Target population	Sample
Caregivers	181	118
Probation officers	5	3
Community Development Officers (CDOs)	58	38
Police	52	34
Local Council Leaders (LC3)	58	38
Civil Society Organizations (CSOs)	5	3
Religious leaders	78	51
Total	437	285

Source: Field Data (2022)

Table 2 Demographic statistics

Category	Frequency	%
<i>Sex</i>		
Female	63	31.3
Male	138	68.7
<i>Age</i>		
30–39	25	12.4
40–49	114	56.7
50–59	56	27.9
60 and above	6	3.0
<i>Education level</i>		
Primary	2	1.0
Secondary	43	21.4
Tertiary	61	30.3
University	95	47.3
<i>Occupation</i>		
CDO	33	16.4
Probation officer	3	1.5
Police officer	27	13.4
Local council leader	130	64.7
CSO employee	8	4.0
<i>District</i>		
Kisoro	52	25.9
Rukiga	19	9.5
Rukungiri	28	13.9
Bushenyi	37	18.4
Mbarara	65	32.3

Source: Field Data (2022)

understanding of the phenomenon of welfare status for the elderly in the selected districts in Western Uganda. On the other hand, Levene's test statistic for elder abuse was -2.971 , $p \leq 0.05$. This means that the assumption of equal variances has been violated implying that there are equal variances assumed among the males and female respondents in the understanding of the phenomenon of elder abuse of the elderly in the selected districts in Western Uganda. These results have implications for further analyses in the study.

From the results in [Table 3](#) above, skewness and kurtosis levels are not far from zero, which indicates normal distribution of data. Also, skewness and kurtosis statistics do not exceed values of 3 and 10, respectively (Kline, 1998; Teo, 2009) implying that the data were normally distributed. Another indicator of acceptable levels of skewness and kurtosis is that the absolute value of the skewness is less than three times the standard error (Field, 2006).

Table 3 Means and data normality

Variable	Mean	SD	Skewness		Kurtosis	
	Statistic	Statistic	Statistic	Std. error	Statistic	Statistic
Physical abuse	3.71	0.761	-1.683	0.172	2.429	0.341
Social abuse	3.72	0.757	-1.741	0.172	2.639	0.341
Financial abuse	3.74	0.748	-1.702	0.172	2.757	0.341
Emotional abuse	3.78	0.759	-1.517	0.172	2.534	0.341
Sexual abuse	3.65	0.687	-1.088	0.172	1.521	0.341
Neglect	4.11	0.969	-2.204	0.172	4.852	0.341
Welfare status	2.24	0.475	1.099	0.172	0.694	0.341

Source: Field Data (2022)

In comparison to the mean, the standard deviations (SDs) range from 0.371 to 0.761 as shown in [Table 3](#). These are small SDs relative to the mean indicating that the data points are close to the mean, an expression that the mean represents the data observed.

3.5 Validity

Validity was measured in terms of convergent and discriminant validity ([Saunders et al., 2006](#); [Sarantakos, 2005](#)). In this study, the researchers determined validity using exploratory factor analysis (EFA) which sought to uncover the underlying structure of a relatively large set of items ([Hair et al., 2006](#)). While carrying out EFA, the researchers explored the Kaiser–Meyer–Olkin (KMO) assumptions which determine sampling adequacy and Bartlett’s test of sphericity that determines the significance of correlations ([Field, 2006](#)). Results indicated that the acceptable limit for KMO ([Field, 2006](#); [Tabachnick and Fidell, 2007](#)) which is 0.70 and above was attained and Bartlett’s test was significant at $p \leq 0.05$ for all the variables, indicating acceptance for factorability ([Table 4](#)).

3.6 Common methods bias and multicollinearity

For purposes of minimizing possible common methods bias, the researchers used procedural remedies into the study design based on guidelines by [Podsakoff et al. \(2003\)](#). These included pledging to the respondents that the information provided would be kept unidentified and private. Furthermore, all the scale items in the questionnaire were randomly displayed. The questionnaire was designed in such a way that it had negatively worded items that served as intellectual speed bumps to encourage unbiased rather than automatic responses from respondents (i.e. psychological separation). Results indicate that this study does not substantially have the problem of common methods variance (CMV), discharging misgivings by [Podsakoff et al. \(2012\)](#), that the effect of CMV has been an uncompromisingly stated concern in organizational investigation. In this study, the determinant for each of the two variables was above 0.00001 ([Table 4](#)), a mark of the nonexistence of multicollinearity ([Field, 2006](#)).

3.7 Correlations and reliabilities

The correlations ([Table 5](#)) provide an insight into the direction, strengths and significance of the relationship between variables. Correlation analysis results for the independent variables (measures of elder abuse); physical abuse, social abuse, emotional abuse, financial abuse, sexual abuse and neglect and the dependent variable; welfare status are negative and significant. Total elder abuse too, has a negative and significant relationship on welfare status.

4. Results

Results in [Table 5](#) indicate that physical abuse is negatively and significantly associated with welfare status ($p = -0.456^{**}$). This implies that positive variations that occur in physical abuse may create negative variations in welfare status. Equally, social abuse is significantly

Table 4 Validity

Variable	Factors generated by EFA	Cumulative % of variance explained	KMO	X ²	Bartlett's test of sphericity df	Sig	Determinant
Elder abuse	6	0.741	0.756	4,301.978	325	0.000	0.004
Welfare status	5	0.846	0.942	6,901.556	295	0.000	0.034

Source: Field Data (2022)

Table 5 Correlation analysis and reliabilities

Variable	1	2	3	4	5	6	7
Physical abuse (1)							
Social abuse (2)	0.989**						
Financial abuse (3)	0.969**	0.980**					
Emotional abuse (4)	0.922**	0.941**	0.959**				
Sexual abuse (5)	0.721**	0.711**	0.685**	0.636**			
Neglect (6)	0.752**	0.756**	0.731**	0.702**	0.717**		
Welfare status (7)	-0.456**	-0.469**	-0.454**	-0.453**	-0.528**	-0.521**	

Notes: **Correlation is significant at the 0.01 level (two-tailed). The diagonals represent the reliabilities
Source: Field Data (2022)

and negatively related to welfare status ($p = -0.469^{**}$). This implies that positive variations that occur in social abuse may create negative variations in welfare status.

Financial abuse is negatively and significantly linked to welfare status ($p = -0.454^{**}$). This implies that positive variations that occur in financial abuse are associated with negative variations in welfare status.

Emotional abuse was a negative and significant predictor of welfare status ($p = -0.453^{**}$). This implies that positive variations that occur in emotional abuse are associated with negative variations in welfare status. Sexual abuse also appeared to have a negative and significant association with welfare status ($p = -0.528^{**}$). This implies that positive variations that occur in sexual abuse may create negative variations in welfare status. Neglect was negatively and significantly associated with welfare status ($p = -0.521^{**}$). This implies that positive variations that occur in neglect may be associated with negative variations in welfare status. Lastly, when the dimensions of elder abuse were added together, results indicate that elder abuse was negatively and significantly associated with welfare status ($p = -0.554^{**}$). These results prove that $H1-H6$ have been upheld.

The researchers additionally carried out hierarchical regression analysis (Table 6) to confirm the correlation results. The analysis intended to test $H1-H6$ as advanced in literature review. Using hierarchical regression analysis, the researchers entered physical abuse in the first model to predict welfare status. In addition, the researchers added social abuse to physical abuse in the second model to predict welfare status. In the third model, the researchers added financial abuse to both physical abuse and social abuse to predict welfare status. In the fourth model, the researchers added emotional abuse to physical abuse, social abuse and financial abuse to predict welfare status. In the fifth model, the researchers added sexual abuse to physical abuse, social abuse, financial abuse and emotional abuse to predict welfare status. In the sixth and last model, the researchers added neglect to physical abuse, social abuse, financial abuse, emotional abuse and sexual abuse to predict welfare status. The researchers used Model 6 to provide results for the hypotheses tested. It had an *Adjusted R²* of 0.316 at a probability level of 0.001 indicating that, overall, the six measures of the independent variable elder abuse significantly explained 31.6% of the variation in welfare status.

The researchers proceeded to discuss the results.

5. Discussion of results

Physical abuse negatively significantly explained welfare status. This implies that positive variations that occur in physical abuse may create negative variations in welfare status. The study demonstrates that among the people of Southwestern Uganda, when older persons are bruised, this results into not only the inability to live dignified lives, but also the absence

Table 6 Hierarchical regression analysis

Item	Model 1	Model 2	Model 3	Model 4	Model 5	Model 6
(Constant)	3.297***	3.335***	3.323***	3.338***	3.723***	3.707***
PA	-0.456***	0.361***	0.359***	0.292***	0.609	-0.128**
SA		-0.469***	-0.961	-0.890	-0.778	-0.006
FA			-0.454***	0.311*	0.268	-0.008*
EA				-0.453***	-0.269	-0.043**
SXA					-0.528***	-0.386
NG						-0.521***
R	0.456 ^a	0.472 ^a	0.473 ^a	0.476 ^a	0.559 ^a	0.580 ^a
R ²	0.208	0.223	0.224	0.226	0.312	0.336
Adjusted R ²	0.204	0.215	0.212	0.211	0.295	0.316
Std error of est	0.423	0.420	0.421	0.422	0.399	0.393
R ² change	0.208	0.223	0.224	0.226	0.312	0.336
df	199 (1)	198 (1)	197 (1)	196 (1)	195 (1)	194 (1)
Sig	0.000	0.000	0.000	0.000	0.000	0.000
Regression	9.376	10.048	10.082	10.199	14.077	15.141
Residual	35.674	35.002	34.968	34.851	30.973	29.909
Total	45.050	45.050	45.050	45.050	45.050	45.050

Notes: Dep. variable: Welfare status *Correlation is significant at the 0.05 level (two-tailed). **Correlation is significant at the 0.01 level (two-tailed). ***Correlation is significant at the 0.001 level (two-tailed), Narration: PA – physical abuse, SA – social abuse, FA – financial abuse, EA – emotional abuse, SXA – sexual abuse, NG – neglect
Source: Field Data (2022)

of a secure atmosphere. In this study, we confirm that older persons fail to live independent lives and also to cope with life with ease because of the kicks they obtain from their caretakers. The act of beating and or punching older persons results into older person's inability to steadily cope up with their lives. They actually feel and believe that their lives are not doing well at all. This finding confirms recent works by [Honarvar et al. \(2020\)](#) which revealed that physical abuse led to decreased quality of life and poor health among the elderly. Their results also indicated that physical abuse had a direct and inverse effect on quality of life, although the effect differed between men and women. The results further support those of the [World Health Organization \(2002\)](#) which found the adverse consequences of physical abuse on old people.

Similarly, the study found social abuse to be a negative but nonsignificant predictor of welfare status. This implies that positive variations that occur in social abuse are not associated with the negative variations that happen in welfare status. This may mean that preventing the older persons from having contact with family and friends and involvement in social activities; restricting movement may have no association with the devastating or negative results on the welfare status of elders. Conversely, these results deviate from earlier empirical studies which revealed that victims of elder abuse who receive a high level of social support experience less depression and report less generalized anxiety and poor health and vice versa.

The study found that financial abuse had a negative and significant relationship with welfare status. This means that positive variations that occur in financial abuse create negative variations in welfare status which is an indication that if older person's property is grabbed, mishandled or their money is stolen or misused, their quality of life diminishes due to stress and other related challenges such as depression. Besides, it is argued that the long-term consequences of elder financial exploitation can be devastating because financial abuse can be emotionally destructive. These results are in line with those of [Atim et al. \(2023\)](#) which revealed that older persons with 80 years and above and those with severe functional dependence experienced stress. The study supports findings by [NCEA \(2022\)](#) which argue that in some cases elderly persons have become depressed or anxious after suffering from financial exploitation.

The study further found that emotional abuse was a negative and significant predictor of welfare status. This implies that positive variations that occur in emotional abuse may create negative variations in welfare status. In this study, the researchers argue that old persons feel that their health status has deteriorated when they are humiliated by those taking care of them. Insulting older persons not only affects their health such as inability to detect chronic conditions such as heart disease, cancer or diabetes but actually negatively affects such older persons to live a positive life. The study found that when older persons feel verbally harassed, they will not only be unable to cope with life with ease, but indeed fail to have good and healthy lives. In this study, the researchers argue that, the inability by elderly persons to cope with their lives steadily is an outcome of older persons feeling that they are tormented. This results support empirical evidence from a study by [Kong and Jeon \(2018\)](#) which reveals that experiencing emotional abuse by a family member leads to poor welfare among old persons.

On the other hand, the study found sexual abuse to be a negative and but nonsignificant precursor to welfare status. This implies that positive variations that occur in sexual abuse are independent of negative variations in welfare status. This negates results of a study by [Band-Winterstein et al. \(2019\)](#) that discloses that, due to sexual abuse, some older persons have experienced posttraumatic stress syndrome, sleep disturbances, depression and/or anxiety, dissociative symptoms, changes in self-image, increased hospitalization and poor health and feelings of shame and guilt.

Finally, the study found neglect to negatively and significantly associate with welfare status. This implies that positive variations that occur in neglect may create negative variations in welfare status. In this study, the researchers argue that when family members and caregivers abandon older persons, the older persons feel that they are a burden to the family. The tendency for family members to leave older persons alone in the villages makes the elderly lose out on the basic necessities of life. In this study, we find that the failure for older persons to live a positive life is a result of some family members and caregivers threatening to abandon the elderly if they do not agree to what they are told. In addition, the act by caregivers to intentionally withhold necessities from the elderly or overlook them, breeds feelings of abandonment and being less supportive to them. Similarly, failure to provide necessities such as adequate food, accommodation or medication can limit the welfare status of the elderly. This confirms the results of [Ayalon \(2015\)](#) which revealed that neglect of older persons has consequential effects such as malnutrition and dehydration, unmet basic physiological needs, functional impairment, lower quality of life, psychological distress and depression and poor physical health.

After the discussion of the results, the researchers present the conclusion, implications and proposals for further research.

6. Conclusion, implications and further research

6.1 Conclusion

This study provides a novel effort to examine the effect of elder abuse on welfare status in a developing country setting, namely, Uganda. This study highlights a high occurrence of elder abuse in Uganda. The research results indicate that family members and caregivers who engage in physical abuse, emotional abuse, financial abuse and neglect negatively affect the welfare status for older persons. The study did not find social abuse and sexual abuse to significantly predict welfare status. This study provides evidence of elder abuse in Uganda hence creating a need for instigating more effective ways of raising awareness about elder abuse and its effect on welfare status of older persons. This calls for designing interventions to prevent this social-ill affecting older persons.

6.2 Implications

Our results have numerous implications for the prevention of and intervention in the case of elder abuse. From an academic opinion, the authors reconnoiter the part played by elder abuse on the welfare status of older persons in Western Uganda. These results propose that family members, caregivers and other relatives may deter the level of welfare status of older persons if they engage in physical, emotional, financial abuse and neglect. This study has practical implications for government parastatals and other stakeholders specifically the MGLSD and CSOs in that it provides specific elements to note that negatively impact elder welfare status. The implication for caretakers is to provide a conducive atmosphere which enables elderly persons to experience individual well-being, have the ability to thrive, have satisfaction with their lives, improved quality of life and improved life expectancy through desisting from abusing them financially, physically and emotionally, let alone neglecting them. Moreover, policymakers stand to gain insights from our study where they will be able to design more suitable support programs caretakers should follow that enhance deterrence of elder abuse for welfare status. The study contributes to the practical side of the social exchange theory where unwritten rules and expectations establish a balance between what we offer and what we receive. In this study, we practically note that when power balance is devastated and a more powerful person unjustly controls others, the problems do not just end at anger, demanding care or personal conflicts or unresolved family problems (Soares *et al.*, 2010) but beyond to reduced welfare status of the elderly. The implication for district officials and policymakers is to provide a favorable atmosphere which allows stakeholders precisely the MGLSD and CSOs to intentionally implement policies and practices if the welfare status of older persons is to improve. In addition, policymakers stand to advance perceptions from this study where they will be able to project more suitable support programs that supplement the positive practices for elder welfare status. This study furthermore suggests a new course to the MGLSD and CSOs stakeholders specifically on what to teach caregivers to particularly avoid (physical, emotional, financial abuse and neglect) for the elderly to achieve a better level of welfare status. Also, the study has endeavored to prove or disprove whether the theoretical foundations for welfare status particularly for elders in selected districts in Uganda are supported. Consequently, the study has contributed to long-term social exchanges discussion in the service sector. Despite many scholars' inconsistent opinions on what constitute elder abuse, this study brought to light the true conformation of elder abuse among Ugandan elderly persons. Moreover, the study has thrown more light on the predictive role of elder abuse on welfare status. These results on the predictive potential of elder abuse on welfare status extend the social exchange theory perspective that human relationships are essential for survival and that individuals engage in interaction to satisfy their needs.

6.3 Limitations and areas for further research

All of the above data were collected using self-administered questionnaires; hence, the study may suffer from mono-method bias. Furthermore, the study took a cross-sectional design to data collection. Therefore, a longitudinal design may be taken to explore the same variables in the same or different setting. Further research in this area needs to be conducted to examine elder abuse and welfare status in other perspectives, taking into account the effect of different testing grounds. The study found social and sexual abuse to be nonsignificant predictors of welfare status among older persons in Southwestern Uganda. Future scholars may particularly explore this associations but in a different setting to confirm or disconfirm these results. Besides, a qualitative study may be required in the future, either in the same sector or in a dissimilar context using similar variables to additionally validate the current outcomes. Notwithstanding the likely limitations of using single-period data, the results of the present study deliver treasured intuitions into the effect

of elder abuse on welfare status by: highlighting crucial illustrative factors of welfare status; examining the elderly welfare status phenomenon in a less studied setting; and synthesizing ideas from numerous sources of literature consequently generating a shopping center of literature relating to elder abuse for welfare status.

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