
To the Editors:

Elder abuse and carer abuse: two sides of the same coin

We read the leading article “Elder abuse – a wake up call” [1] in the March 2009 issue of the *CMJ* with great interest, and commend the authors for highlighting this neglected health issue. While agreeing with the authors that elder abuse is under-reported and under-recognized, we would like to highlight an even more latent aspect: the problems faced by carers of the elderly. The issue is particularly important in developing countries where services for the elderly are poorly developed. Societal norms may also dictate that the elderly be cared for primarily by their offspring. The burden of care is then placed on the family, and in many countries, including Sri Lanka, it is the female family members who traditionally care for the elderly. However, with rapid socio-economic change, more and more women are required to seek employment, and may therefore be required to play a dual role – wage earner and carer. The resulting physical and psychological stress may, by some definitions, even meet criteria for carer abuse.

The physical burden of caring for an elderly person, especially with impaired mobility or when bedridden, is very demanding. This results in the carer often neglecting his or her own health. Elderly persons with dementia, delirium and other psychiatric conditions have disturbed behavior, and tend to become aggressive and develop paranoid ideation. This commonly leads to carers being physically assaulted or verbally abused. Care givers of demented persons often experience ever-increasing demands for care by these patients that may lead to financial difficulties, social isolation, emotional difficulties such as anxiety and depression, and impaired autonomy with increased functional disability [2]. Having to neglect the carer’s own children may lead to ideas of guilt and distress. To add to these problems, elderly persons with cognitive deficits are often unable to recognise their carers, and this may be extremely demoralising.

Distressed and psychologically disturbed carers eventually tend to neglect the needs of their elderly as

well as their nuclear family. This can lead to exacerbations of existing abuse, both emotional and physical. If elder abuse and neglect are to be minimized, issues relating to carers must also be addressed. Carers, particularly of disabled elderly persons, may need more psycho-social support and access to counseling than is presently considered necessary.

References

1. Paranitharan P, Edirisinge PAS, Williams S. Elder abuse – a wake up call. *Ceylon Medical Journal* 2009; **54**: 1-3.
2. Schulz R, O'Brien AT, Bookwala J, Fleissner K. Psychiatric and physical morbidity effects of dementia caregiving: Prevalence, correlates, and causes. *Gerontologist* 1995; **35**: 771-91.

K A L A Kurupparachchi¹ and C A Wijesinghe¹

¹ *Department of Psychiatry, Faculty of Medicine, University of Kelaniya, Ragama, Sri Lanka.*

Correspondence: KALAK, e-mail <lalithkuruppu@lycos.com>.