

ORIGINAL ARTICLE

## VIOLENCE AGAINST ELDERLY WOMEN\*

### HIGHLIGHTS

1. The predominant violence against the elder woman is physical.
2. Violence is related to issues such as education and respect.
3. The fragility of elder women contributes to violence.
4. Elder women primarily refer to the police supporting violence.

Ademara Aparecida de Oliveira<sup>1</sup> 

Carlos Alberto Lazarini<sup>1</sup> 

Maria José Sanches Marin<sup>1</sup> 

Miriam Fernanda Sanches Alarcon<sup>2</sup> 

Magali Aparecida Alves de Moraes<sup>1</sup> 

Elza de Fátima Ribeiro Higa<sup>1</sup> 

### ABSTRACT

**Objective:** To analyze the understanding of older women about violence in this age group.

**Method:** Qualitative research carried out between November 2021 and January 2022 with 40 women over 60 years old, attended in the Primary Health Care Network, in a medium-sized municipality in the interior of the state of São Paulo - Brazil. The data obtained were analyzed in the light of Hermeneutics-Dialectics. **Results:** Five analytical categories were identified: 1. Understanding of violence against the elderly woman; 2. Factors that trigger violence against the elderly woman; 3. Suggestions for actions to prevent violence against the elderly woman; 4. Resources that older women who are victims of violence can access; 5. Nonconformity with violence against the elderly woman. **Final Considerations:** In the light of Hermeneutics-Dialectics, a series of perceived violence against the elderly woman in society was evidenced, with emphasis on physical, disrespect and financial abuse.

**DESCRIPTORS:** Women; Elder abuse; Violence against women; Primary Health Care; National Health Strategies.

### HOW TO REFERENCE THIS ARTICLE:

Oliveira AA de, Lazarini CA, Marin MJS, Alarcon MFS, Moraes MAA de, Higa E de FR. Violence against elderly women. Cogitare Enferm. [Internet]. 2023 [cited in "insert year, month, day"]; 28. Available in: <https://dx.doi.org/10.1590/ce.v28i0.92057>.

<sup>1</sup>Faculdade de Medicina de Marília, Marília, SP, Brasil.

<sup>2</sup>Universidade Estadual do Norte do Paraná, Bandeirantes, PR, Brasil.

## INTRODUCTION

Since the 1970s, changes in Brazilian demographic behavior have been emerging due to the fall in births and mortality, which contributed to a significant growth in the aging population<sup>1</sup>. In the current context, the country has more than 30 million elderly people, a number that represents 16% of the population and according to the projection released by the Brazilian Institute of Geography and Statistics (IBGE, in Portuguese) the percentage of elderly people tends to double in the coming decades<sup>2</sup>.

Brazilian society is increasingly living with elderly people, and, on the other hand, this population is among the groups most vulnerable to violence in the country. It is noteworthy that in 2019, reports of violations against elderly people represented 30% of the total received by Dial 100, a figure that is second only to the group of children and adolescents. The incidence of such violence predominated among women aged between 70 and 79 years<sup>3</sup>.

Violence against the elderly ("VCPI", in Portuguese) can be presented in two forms: visible and invisible. In the first form, there are injuries and deaths; in the second, they occur without hurting the body, but cause suffering. Both can take various forms, in different situations, and the types of violence practiced against the elderly person are usually through physical, institutional, psychological, property, sexual violence; neglect; financial abuse and discrimination<sup>4</sup>.

The elderly women are doubly vulnerable, both due to age and gender issues. Oppression and domination due to gender inequality that is experienced at all ages increases in the elderly<sup>5</sup>.

A recent and significant law for the elderly women is No. 14,423, of July 22, 2022, in which the hitherto called Statute of the Elderly gained a new name, Statute of the Elderly Person. Throughout the Law, the expressions "elderly" and "elderly" were replaced by the expressions "elderly person" and "elderly people", respectively<sup>6</sup>. The masculine word 'elderly' was used to generically designate all elderly people, although women are the majority in the population over 60 years old, so by being renamed, the Statute recognized the demographic weight of women by ensuring their inclusion.

In 2001, when the Ministry of Health (MS) promulgated the National Policy for the Reduction of Morbidity and Mortality from Accidents and Violence (PNRMAV), violence officially entered the agenda of the sector in Brazil and the country began to have a health policy specifically aimed at this social problem<sup>7</sup>. In the historical path of insertion of the theme of violence in the field of public health, violence against the elderly has had priority on the health agenda<sup>8</sup>.

Violence against the elderly people is considered a public health problem, and the Primary Health Care Network, which is closest to people's lives, and consequently to most of the elderly population, has the highest degree of decentralization and capillarity<sup>9</sup>. In this sense, this scenario is appropriate for the development of the research.

In Brazil, specific studies on violence against elderly adults are still scarce and when the cut is made in the scope of Primary Health Care and gender, the number is even less significant. In this light, the guiding assumption of this research is that violence against the elderly woman needs to be understood so that strategies can be devised to mitigate or prevent this type of violence. That said, its object was based on the lack of discussion about the phenomenon, based on the following concern: how do elderly woman understand violence against the elderly women? Thus, the objective of the research was to analyze the understanding of elderly women about violence in this age group.

## METHOD

This is a qualitative field research based on the assumptions of Hermeneutics - Dialectics carried out in a medium-sized municipality in the interior of the state of São Paulo - Brazil, which has approximately 220,000 inhabitants. Data were collected between November 2021 and January 2022 in four units that constitute the Primary Health Care Network, one in each region of the municipality and which concentrated the highest percentage of the elderly women in relation to the total population.

Forty elderly women registered in the Primary Health Care Units, aged 60 years or older, participated. Ten elderly women per health unit were selected through intentional sampling, in which a subgroup that can be considered representative of the entire population is selected<sup>10</sup>. The women were approached by the interviewer while waiting for a consultation or procedure at the unit.

Inclusion criteria were elderly women aged 60 years or older, not institutionalized, assisted in the Health Care Network (RAS, in Portuguese), who were able to communicate verbally, preserved cognitive performance and score above 12 in the Mini Mental State Examination (MMSE) test, in the version with Brucki's suggestions<sup>11</sup>.

All elderly women who agreed to participate in the study had preserved cognitive ability. For data collection, a semi-structured interview script was used, with identification data and six guiding questions on understanding, types, causes, prevention, and possible places of care for elderly women victims of violence.

The interviews were conducted in a reserved room at the Health Unit, maintaining the privacy of the participants and the required confidentiality, being recorded for later transcription in full, lasting around 30 minutes. All were conducted over a period of eight weeks. Participants received information on how to get help in situations of violence, and were offered the possibility of contacting the interviewer, who is an experienced psychologist and master's student.

The collected data were systematized by NVivo 12 plus® software and analyzed in the light of Hermeneutic-Dialectics. This form of analysis demonstrates the potential to unveil meanings, comprehensively and critically analyze reality. It is developed through three stages, which are not necessarily sequential nor excluded<sup>12</sup>. Comprehensive reading of the selected material; Exploration of the material and Elaboration of interpretative synthesis:

The research was approved by the Ethics Committee of the Faculty of Medicine of Marília, opinion number: 4,976,793. To ensure anonymity, participants were coded with the letter P and their respective numbers from one to 40.

## RESULTS

As shown in Table 1, the prevalence of: 60 to 69 years, with partner, elementary school, where 50% report receiving retirement.

**Table 1-** Sociodemographic data of the 40 elderly women participating in the research. Marília, SP, Brazil, 2023

<b>Variables</b>	<b>n</b>	<b>%</b>
<b>Age group</b>		
60-69 years old	23	57.5
70- 79 years old	13	32.5
80-89 years old	4	10
<b>Reported color</b>		
White	16	40
Black	1	2.5
Brown	20	50
Others	3	7.5
<b>Length of Education</b>		
Not literate	1	2.5
Elementary school (1 to 8 years)	27	67.5
Secondary school (9 to 11 years)	10	25
Higher education completed	2	5
<b>Marital Status</b>		
With a partner	24	60
Without a partner	16	40
<b>Current Income Situation</b>		
Retired	20	50
In activity	7	17.5
None	12	30
Other benefits	1	2.5

Source: The authors (2023).

From the analysis made by the Nvivo 12 plus software, a word cloud was built according to Figure 1. The word frequency query allowed to summarize and visualize in a hierarchical way the main data obtained from the interviews.



goes bad. (P22)

*This person to take care of the person must have patience and really like to take care of an elderly person; otherwise, it's no use because they won't have patience. (P16)*

*Oh, they [husband/partner] think they're always able to, they're so young, the woman is old and so on (laughs) there are these things, right? [...] they only see defects in women. (P18)*

Suggested actions to prevent violence against the elderly woman.

*I think what is really lacking is respect and education. (P34)*

*I don't think I should go out in the street a lot, not carry money. (P14)*

*[...] not to find a partner to put inside the house. (P1)*

*The person who is conscious must be taking care of the elderly, especially a person who does not drink or use drugs. (P24)*

*Campaigns, because there are campaigns for everything, so there must be more campaigns in this direction. (P31)*

Resources that elderly women who are victims of violence can access.

*I think I need to look for the authorities, a police force that can help me with anything like that. (P9)*

*[...] she can go to a social worker, to guide her on how to do it. (P25)*

*Seek help [...] if you don't have a relative, I think you would have to ask for help from someone closer, a neighbor or an acquaintance. (P2)*

*Yes, I think that if you are injured, you go to the health center or go to the hospital or seek help. (P26)*

Non-conformity with violence against the elderly woman.

*Ah, an absurdity, where have you seen doing some things like that. As they say, "the world is really ending". (P29)*

*I think it's the height of it. (P16)*

*Oh, I think that the elderly mother is a person who has fought so hard in life, has succeeded [...] having violence like this is not acceptable. (P11)*

*So, I think this is terrible, the person must respect the elderly woman. And that's it. (P26)*

*I'm horrified. (P39)*

## DISCUSSION

The interviewees understand violence against the elderly women in different ways, which includes physical violence such as beating, tying and hurting; disrespect; financial abuse because they take money from the elderly; sexual violence; discrimination, prejudice; neglect, abandonment when they do not take care of hygiene, do not offer food or medicines; verbal aggression, through cursing; not having rights met, such as health-related; lack of patience; exploitation, when you are required to work. However, physical violence, disrespect and financial abuse were predominant. It is also emphasized that for

the elderly women interviewed, it is often their children or grandchildren who promote abuse.

Research in a state in the northern region of the country with elderly women who suffered violence showed an understanding of the phenomenon associated with physical violence predominantly, followed by verbal and moral violence and in the context of interpersonal relationships<sup>13</sup>. A study from Espírito Santo with data on violence against the elderly person, in which most of the victims were women, corroborates the participants' discourse, and the most reported violence was physical, with a prevalence of 66.3%. It should be added that the occurrence often took place at the victims' residence and was motivated by intolerance<sup>13</sup>.

The participants' understanding of violence is corroborated by a Brazilian study with elderly women, in which they reported violence as a social issue permeated by economic, social, and family factors, with fear of being abandoned and disrespected, regarding their rights<sup>14</sup>.

Financial abuse was also very present in the narratives. It is a conduct also known as patrimonial or financial violence and is provided for in art. 102 of the Statute of the Elderly Person as a crime<sup>15</sup>. A study that analyzed the occurrences of financial violence against elderly adults revealed that it is mainly committed by strangers, in 85.6% of cases, and 6.7% by family members of elderly people<sup>16</sup>.

The elderly women interviewed recognize that violence is related to: issues related to education, respect; fragility of older women; family structure; lack of patience; drug use by a family member; machismo; inefficient legislation. However, education/respect and the frailty of the elderly women are highlighted.

Aging is a natural and inevitable process for the human being, encompassing biological changes inherent to age, but also psychological and social. As for the social meaning of elderly, it is perceived that this is permeated by a historical construction with prejudices and stereotypes. The concept of elderly, therefore, goes beyond the merely biological aspect and reflects sociocultural aspects. And, because it is also a social construction, prejudice is present<sup>17</sup>.

The World Health Organization (WHO) World Report suggests that, for healthy aging, combating age-based stereotypes must be at the heart of any public health response to population aging<sup>18</sup>. In this line of thought, in the year 2022, the body launched a global campaign to combat ageism, which occurs when age is used to categorize and divide people by attributes that cause harm, disadvantage or injustice, and undermine intergenerational solidarity<sup>19</sup>.

Aging entails some fragilities, and, regarding elderly women, this theme is discussed in different studies in which it is evidenced that these women are in two groups of social vulnerability: women and elderly people; thus, violence is based on patriarchal and sexist aspects<sup>20</sup>. There is, therefore, an important inequality of power, which favors, from the social point of view, the even greater fragility of the elderly woman compared to the elderly man.

Among the suggestions presented by the women interviewed to avoid violence are those related to education, respect and patience; care for the elderly woman such as avoiding relationships, avoiding leaving the house at night, not approaching anyone, in addition to obeying and separating when the partner is aggressive; having a caregiver, which can be both professional and support network; the relevance of awareness campaigns; legislation, punishment; and interventions in the areas of social assistance would also be necessary.

Suggestions related to themes such as education, respect, patience, are some of the actions revealed by the discourse of the elderly and in the sense of preventing this problem. In the literature, a study suggests that through education it would be possible to create a preventive environment against various types of violence, including various

actions that would encourage openness to the other and the different<sup>21</sup>.

Thus, education to prevent violence revealed in the interviewees' statements should also be understood in the context of health. In this sense, education should be included in training and maintained on an ongoing basis, with a view to preparing professionals<sup>8</sup>.

It is important to emphasize that there is no legislation or awareness-raising campaigns specific to this public regarding the fight against violence against the elderly woman. However, it is true that when we broaden the search to "the elderly", there is legislation, such as the Action Plan for Combating Violence Against the Elderly<sup>22</sup> and the Statute of the Elderly<sup>15</sup>, in addition to an awareness-raising action that is the World Day of Awareness of Violence Against the Elderly<sup>23</sup>.

Another fundamental point perceived in the discourse of the participants is that they convey the responsibility of violence to older women. If she did not leave the house, for example, she could avoid it. This context reflects the cultural construction experienced by society in which older women are subjected, experiencing cumulative inequalities. The concept that the man is superior, should subjugate the woman and not allow her to decide on her own life was built and solidified over the centuries and remains today, permeating the whole society<sup>24</sup>.

As for the resources that women indicated can be sought in case of violence, there is the police report; social assistance; help from known people, such as family, friend, or neighbor; services or professionals in the health area; Human Rights; and, those who report not having a place of help. The police was a widely cited body, demonstrating that older women are aware of such a relevant and present resource in society.

It is essential that the elderly women know the legal instruments for protecting victims of violence so that, in case of need, they can activate them and count on the respective interventions. In the participants' discourse, the police was a widely cited body within the variety of locations. However, both victims and any whistleblower can turn to different places, such as: Dial 100 - Human Rights Dial, Dial 190 - Military Police, Specialized Police Stations for the Protection of the Elderly Person and Civil Police Stations, Public Defender's Office, Public Prosecutor's Office, Specialized Reference Center for Social Assistance (CREAS, in Portuguese), Basic Health Units (BHU), Municipal, State or National Councils for The Elderly Person<sup>15</sup>.

It is important to note that according to Art. 6th of the Statute of the Elderly Person: "Every citizen has the duty to report to the competent authority any form of violation of this Law that they have witnessed or of which they are aware". Health professionals in public or private institutions are also required by law to report all suspected or confirmed cases of violence against the elderly people<sup>15</sup>.

It is noteworthy that recently there has been an increase in the use of legal instruments to protect elderly women victims of violence, mainly with the aim of stopping the aggressions suffered, although it has often not met the expectations of the victims, in terms of punishment<sup>25</sup>.

This analytical category evidenced important discontent of the participants with situations of violence against the elderly women, with a discourse of non-acceptance of the problem. By using in their words or expressions such as absurd, "the height", unacceptable, bad, wrong, worse, among others, it is demonstrated how talking about the subject causes discomfort to the participants.

The complexity of this phenomenon is portrayed when, for example, it is verified that in 2023 the bill PL 2325/2021 is still being discussed, which prohibits the use of the thesis of "legitimate defense of honor" as an argument for the acquittal of accused of femicide, in addition to excluding the mitigating and reducing penalties related to violent emotion and the defense of moral or social value in crimes of domestic and family violence<sup>26</sup>.

Despite being considered outdated, contributing to the objectification of women and even though such a thesis is no longer considered valid by the Justice, according to the rapporteur of the project it is common that the defense of the accused of femicide seeks to lead the jury court to disregard the victim, vilifying her behavior, and use the argument of "violent emotion" to reduce the murderer's sentence<sup>27</sup>.

The narrative of nonconformity is justified as violence compromises the right of older women to a life with dignity. The elderly woman remains a victim of gender violence and suffers from the same consequences as the young or adult woman living in a patriarchal society<sup>28</sup>. Considering this, the complexity of the problem of violence against the elderly woman makes it imperative that it be discussed in the different spaces of society.

The analysis of meanings in the light of Dialectical Hermeneutics enabled a critical and comprehensive process of studying the social reality of the interviews, culminating in the apprehension of the results presented - the five analytical categories discussed<sup>12</sup>.

Hermeneutic-Dialectics facilitated the understanding of what the elderly women understand by violence against older women, making evident a definition based on the types of violence. It allowed reflection on the fragility of older women and about the vulnerability they are exposed to as a triggering factor for violence.

Still from the perspective of Hermeneutics-Dialectics and relating the interviewees' statements, although there are resources that the elderly woman who are victims of violence can access, it was evident that there is a need to create strategies that favor actions to prevent the occurrence of violence, since the existence of this phenomenon is a repudiator.

Regarding limitations, the search for data in a specific context, restricted to the elderly women served in the Primary Health Care (PHC) network, stands out.

## FINAL CONSIDERATIONS

Considering the objectives of the research and the theoretical foundation supported by Hermeneutics-Dialectics, it was possible to interpret the understanding of the elderly women and welcome the different positions. A series of perceived violence against the elderly woman in society was evidenced, especially physical violence, disrespect, and financial abuse.

The elderly women pointed out that violence would be related to issues such as education and respect and, on the other hand, the fragility of the elderly women would also contribute to the state of vulnerability. They can identify resources to call in case of violence, especially the police, and the main suggestions for preventing the problem focus on areas such as education, patience, and respect.

The theme of sexism is evidenced when they suggest that older women avoid certain behaviors to prevent violence from happening and when they attribute to sexism a triggering factor of violence against the elderly woman.

Considering the results of this research, it is therefore suggested to promote scientific studies that investigate and bring breadth to the subject. Violence against the elderly woman needs to gain more space in the field of research. Such a public health problem needs to break taboos and have spaces that favor the recognition of victims and their protection.

It is believed that the results of this research can contribute to reflections on violence against the elderly woman and the importance of deepening this theme to improve health care.

## ACKNOWLEDGMENTS

This work was carried out with the support of the Coordination for the Improvement of Higher Education Personnel - Brazil (CAPES, in Portuguese) - Funding Code 001, which we thank.

## REFERENCES

- Oliveira AS. Transição demográfica, transição epidemiológica e envelhecimento populacional no Brasil. *Hygeia*. [Internet]. 2019 [cited in 2022 Nov. 22]; 15(32):69-7. Available in: <https://doi.org/10.14393/Hygeia153248614>.
- Instituto Brasileiro de Geografia e Estatística (IBGE). Pesquisa nacional por amostra de domicílios contínua (PNAD): características gerais dos domicílios e dos moradores. [Internet]. Rio de Janeiro: IBGE; 2019 [cited in 2021 May. 15]. Available in: <https://www.ibge.gov.br/estatisticas/sociais/populacao/17270-pnad-continua.html?edicao=24437&t=resultados>.
- Ouidoria Nacional dos Direitos Humanos (BR). Balanço anual Disque Direitos Humanos. [Internet]. Brasília: Ministério da Mulher, da Família e dos Direitos Humanos; 2019 [cited in 2023 Jan. 11]. Available in: [https://www.gov.br/mdh/pt-br/centrais-de-conteudo/disque-100/relatorio-2019\\_disque-100.pdf](https://www.gov.br/mdh/pt-br/centrais-de-conteudo/disque-100/relatorio-2019_disque-100.pdf).
- Ministério da Mulher, da Família e dos Direitos Humanos (BR). Violência contra a pessoa idosa: vamos falar sobre isso? Perguntas mais frequentes sobre direitos das pessoas idosas. [Internet]. Brasília: Ministério da Mulher, da Família e dos Direitos Humanos; 2020 [Cited in 2023 Jan. 07] Available in: <https://www.gov.br/mdh/pt-br/assuntos/noticias/2020-2/junho/cartilhacombateviolenciapessoaidosa.pdf>.
- Sousa RCR de, Araújo GKN de, Souto RQ, Santos RC dos, Santos R da C, Almeida LR de. Factors associated with the risk of violence against older adult women: a cross-sectional study. *Rev Latinoam Enferm*. [Internet]. 2021 [cited in 2022 Nov. 22]; 29:e3394. Available in: <https://doi.org/10.1590/1518-8345.4039.3394>.
- Brasil. Lei nº 14.423, de 22 de julho de 2022. Altera a Lei nº 10.741, de 1º de outubro de 2003, para substituir, em toda a Lei, as expressões “idoso” e “idosos” pelas expressões “pessoa idosa” e “pessoas idosas”, respectivamente. [Internet]. Diário Oficial da União, Brasília, 2022 July 25. Seção 1 [cited in 2022 Dec. 15]. Available in: [https://www.planalto.gov.br/ccivil\\_03/\\_Ato2019-2022/2022/Lei/L14423.htm](https://www.planalto.gov.br/ccivil_03/_Ato2019-2022/2022/Lei/L14423.htm).
- Ministério da Saúde (BR). Portaria GM/MS Nº 737 de 16 de maio de 2001. Política Nacional de Redução de Morbimortalidade por Acidentes e Violência (PNRMAV). [Internet]. Diário Oficial da União, Brasília, 2001 May 18. Seção 1e. [cited in 2023 Jan. 11]. Available in: <https://bvsmms.saude.gov.br/bvs/publicacoes/acidentes.pdf>.
- Minayo MC de S, Souza ER de, Silva MMA da, Assis SG de. Institutionalizing the theme of violence within Brazil's national health system: progress and challenges. *Cien Saude Colet*. [Internet]. 2018 [cited in 2022 Dec. 15]; 23(6):2007-16. Available in: <https://doi.org/10.1590/1413-81232018236.04962018>.
- Macinko J, Andrade FB de, Souza Junior PRB de, Lima-Costa MF. Primary care and healthcare utilization among older Brazilians (ELSI-Brazil). *Rev Saude Publica*. [Internet]. 2019 [cited in 2023 Jan. 22]; 52(Suppl 2):6s. Available in: <https://doi.org/10.11606/S1518-8787.2018052000595>.
- Gil A. “Amostragem na pesquisa social”. Métodos e técnicas de pesquisa social. 5. ed. São Paulo (SP): Atlas; 1999. 11 p.
- Brucki SMD, Nitrini R, Caramelli P, Bertolucci PHF, Okamoto IH. Sugestões para o uso do mini-exame do estado mental no Brasil. *Arq Neuro-Psiquiatr*. [Internet]. 2003 [cited in 2022 Dec. 22]; 61(3B):777–81. Available in: <https://doi.org/10.1590/s0004-282x2003000500014>.
- Souza ER, Minayo MCS, Malaquias JV, Silva CFR. Organização, processamento, análise e interpretação

de dados: o desafio da triangulação. In: Minayo MC, Assis SG, Souza ER, organizadores. Avaliação por triangulação de métodos: abordagem de programas sociais. Rio de Janeiro: Fiocruz; 2005. p. 179-20.

13. Pampolim G, Pedroso MR de O, Leite FMC. Análise dos casos notificados de violência física contra a pessoa idosa em Espírito Santo. *Estud Interdiscip Envelhec*. [Internet]. 2021 [cited in 2023 Jan. 15]; 25(2):197-217. Available in: <https://doi.org/10.22456/2316-2171.99133>.

14. Rodrigues RAP, Giacomini SBL, Silva LM, Silva Fhon JRS, Almeida VC, Seredynskyj FL. Violência contra mulheres idosas segundo o modelo ecológico da violência. *Av Enferm*. [Internet]. 2019 [cited in 2023 Jan. 10]; 37(3):275-83. Available in: <https://doi.org/10.15446/av.enferm.v37n3.73702>.

15. Brasil. Lei no 10.741, de 1º de outubro de 2003. Dispõe sobre o Estatuto da Pessoa Idosa e dá outras providências. *Diário Oficial da União*, [Internet]. 2003 Oct. 03. Seção 1. [cited in 2023 Dec. 25]. Available in: [http://www.planalto.gov.br/ccivil\\_03/leis/2003/110.741.htm](http://www.planalto.gov.br/ccivil_03/leis/2003/110.741.htm).

16. Alarcon MFS, Paes VPP, Damaceno DG, Sponchiado VBY, Marin MJS. Financial abuse: circumstances of occurrences against older adults. *Rev Bras Geriatr Gerontol*. [Internet]. 2019 [cited in 2023 Dec. 12]; 22(6):e190182. Available in: <https://doi.org/10.1590/1981-22562019022.190182>.

17. Dias M de JS, Azevedo LMN, Silva LCN da, Sousa FTL de. Violência simbólica contra mulher idosa nas relações de gênero. *Rev Interdiscip Cult Soc*. [Internet]. 2019 [cited in 2023 Jan. 16]; 4(Espec):481-9. Available in: <https://periodicoseletronicos.ufma.br/index.php/ricultsociedade/article/view/10545>.

18. World Health Organization (WHO). World report on ageing and health. [Internet]. Geneva: WHO; 2015 [cited in 2023 Jan. 12]. Available in: <https://apps.who.int/iris/handle/10665/186463>.

19. World Health Organization (WHO). Global report on ageism. [Internet]. Geneva: WHO; 2021 [cited in 2023 Jan. 12]. Available in: <https://apps.who.int/iris/handle/10665/340208>.

20. Morilla JL, Manso MEG. A violência contra a mulher idosa no Brasil e os fatores relacionados ao tema: uma revisão integrativa. *VITTALLE Rev Ciênc Saúde* [cited in 2023 Dec. 10]; 2021;33(2):66-82. Available in: <https://doi.org/10.14295/vittalle.v33i2.12328>.

21. Corona GF. Educação como prevenção da violência. *Cad Fucamp* [Internet]. 2019 [cited in 2023 Jan 16]; 18(36):94-108. Available in: <https://revistas.fucamp.edu.br/index.php/cadernos/article/view/2071/1293>.

22. Brasil. Presidência da República. Subsecretaria de Direitos Humanos. Plano de ação para o enfrentamento da violência contra a pessoa idosa. Subsecretaria de Direitos Humanos, [Internet]. 2005 [cited in 2021 May 16]. Available in: [https://bvsmms.saude.gov.br/bvs/publicacoes/plano\\_acao\\_enfrentamento\\_violencia\\_idoso.pdf](https://bvsmms.saude.gov.br/bvs/publicacoes/plano_acao_enfrentamento_violencia_idoso.pdf).

23. United Nations (UN). Ageing: world elder abuse awareness Day [Internet]. New York: UN; 2021 [cited in 2022 Nov. 24]. Available in: <https://www.un.org/en/observances/elder-abuse-awareness-day/>.

24. Manso MEG, Lopes RG da C. Violência contra a mulher idosa: estado da arte. *Rev Kairós*. 2020 [cited in 2023 Jan. 10]; 23(4):65-80. Available in: <https://revistas.pucsp.br/kairos/article/view/51979>.

25. Pereira RCB, Loreto MDS. A violência doméstica contra a mulher idosa: a busca pelos aparatos sociais de proteção. *Poisson*. [Internet]. 2019 [cited in 2023 Jan. 17]; 18:70-7. Available in: [https://www.poisson.com.br/livros/saude/volume9/Saude\\_vol9.pdf](https://www.poisson.com.br/livros/saude/volume9/Saude_vol9.pdf).

26. Brasil. Projeto de Lei nº 2325, de 2021. Altera o Decreto-Lei nº 2.848, de 7 de dezembro de 1940 (Código Penal), e o Decreto-Lei nº 3.689, de 3 de outubro de 1941 (Código de Processo Penal). Senado Federal [Internet]. 2021 [cited in 2023 Jan. 15]. Available in: <https://legis.senado.leg.br/sdleg-getter/documento?dm=8983381&ts=1659641375617&disposition=inline>.

27. Senado Federal (BR). Femicídio: aprovado projeto que proíbe tese da 'legítima defesa da honra' [Internet]. 2022 [cited in 2023 Jan. 15]. Available in: <https://www12.senado.leg.br/noticias/materias/2022/07/06/femicidio-aprovado-projeto-que-proibe-tese-da-legitima-defesa-da-honra>.

28. Brito KM dos SM, Grossi PK, Grossi ML. Violência contra mulheres idosas em Manaus: do silêncio ao enfrentamento. Textos Contextos (Porto Alegre). [Internet]. 2020 [cited in 2023 Jan. 22]; 19(1):e37325. Available in: <http://dx.doi.org/10.15448/1677-9509.2020.1.37325>.

\*Article extracted from the master's/PhD thesis "Violência contra a Mulher Idosa", Faculdade de Medicina de Marília, Marília, SP, Brasil, 2023.

Received: 14/04/2023

Approved: 31/05/2023

Associate editor: Dra. Susanne Betioli

**Corresponding author:**

Ademara Aparecida de Oliveira  
Faculdade de Medicina de Marília  
Rua Delphina Lopes de Mello, 194, Jardim Parati, Marília-SP  
E-mail: ademara85@hotmail.com

**Role of Authors:**

Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work - **Oliveira AA de, Lazarini CA, Marin MJS, Alarcon MFS, Moraes MAA de, Higa E de FR**. Drafting the work or revising it critically for important intellectual content - **Oliveira AA de, Lazarini CA, Marin MJS, Alarcon MFS, Moraes MAA de, Higa E de FR**. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved - **Oliveira AA de, Lazarini CA, Marin MJS, Alarcon MFS, Moraes MAA de, Higa E de FR**. All authors approved the final version of the text.

ISSN 2176-9133



This work is licensed under a [Creative Commons Attribution 4.0 International License](https://creativecommons.org/licenses/by/4.0/).