Social Representation of Financial, Neglect, and Sexual Violence from the Perspective of the Elderly Person

Representação Social da Violência Financeira, Negligência e Sexual na Perspectiva da Pessoa Idosa
Representación Social de la Violencia Financiera, por Negligencia y Sexual Desde la Perspectiva de las Personas Mayores

RESUMO
Objetivo: compreender a representação social das violências financeira, negligência e sexual na perspectiva da pessoa idosa. **Método:** estudo analítico qualitativo, fundamentado na Teoria das Representações Sociais, realizado com 14 usuários de uma Unidade Básica de Saúde em Campina Grande, Paraíba, em abril de 2022, mediante questionário sociodemográfico e entrevista semiestruturada. Os dados foram gravados, transcritos e analisados pelo software IRAMUTEQ. **Resultados:** emergiram seis classes, organizadas em quatro categorias temáticas: "A violência representada através do sofrimento, tristeza e medo"; "Negligenciar é não ter zelo"; "O preço da velhice: as faces da violência financeira"; e "Sexo: Foi forçado é violência". **Conclusão:** compreender as representações sociais da violência na perspectiva das pessoas idosas possibilita direcionar ações de educação, prevenção e assistência em saúde, contribuindo para uma atuação de enfermagem mais resolutiva na identificação e enfrentamento das diferentes formas de violência.
DESCRITORES: Idoso; Abuso de idoso; Representação social.

ABSTRACT
Objective: To understand the social representation of financial, neglect, and sexual violence from the perspective of older adults. **Method:** A qualitative analytical study, grounded in Social Representation Theory, was conducted with 14 patients at a Basic Health Unit in Campina Grande, Paraíba, in April 2022, using a sociodemographic questionnaire and semi-structured interviews. The data were recorded, transcribed, and analyzed using IRAMUTEQ software. **Results:** Six classes emerged, organized into four thematic categories: "Violence represented through suffering, sadness, and fear"; "Neglect is a lack of care"; "The price of old age: the faces of financial violence"; and "Sex: If it was forced, it is violence." **Conclusion:** Understanding social representations of violence from the perspective of older adults makes it possible to direct education, prevention, and health care initiatives, contributing to more effective nursing practice in identifying and addressing different forms of violence.
DESCRIPTORS: Older adults; Elder abuse; Social representation.

RESUMEN
Objetivo: comprender la representación social de la violencia financiera, la negligencia y la violencia sexual desde la perspectiva de las personas mayores. **Método:** estudio analítico cualitativo, basado en la Teoría de las Representaciones Sociales, realizado con 14 usuarios de un centro de atención primaria de salud en Campina Grande, Paraíba, en abril de 2022, mediante un cuestionario sociodemográfico y una entrevista semiestructurada. Los datos se grabaron, transcribieron y analizaron mediante el software IRAMUTEQ. **Resultados:** surgieron seis clases, organizadas en cuatro categorías temáticas: «La violencia representada a través del sufrimiento, la tristeza y el miedo»; «La negligencia es la falta de esmero»; «El precio de la vejez: las caras de la violencia financiera»; y «Sexo: si fue forzado, es violencia». **Conclusión:** comprender las representaciones sociales de la violencia desde la perspectiva de las personas mayores permite orientar las acciones de educación, prevención y asistencia sanitaria, lo que contribuye a una actuación de enfermería más eficaz a la hora de identificar y hacer frente a las diferentes formas de violencia.
DESCRIPTORES: Personas mayores; Maltrato a las personas mayores; Representación social.

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INTRODUCTION

Violence Against Older Adults (VCPI) is defined as any act or omission committed in a public or private setting that causes death, harm, or physical or psychological suffering, categorized into the following forms: physical, psychological, abandonment, financial, sexual, neglect, and self-neglect. It currently constitutes a social problem that impacts global health [1] .

As mentioned, VCPI can take various forms; among these, financial abuse, neglect, and sexual abuse—which are the primary focus of this study—have distinguishing characteristics. Financial abuse is characterized by any and all forms of exploitation of an older adult's financial assets and property, whether illegal or not; neglectful violence refers to the failure of family members or institutions to provide essential care; it is typically linked to other types of violence that lead to injuries and/or trauma; and finally, sexual violence, which consists of heterosexual or homosexual acts that exploit older adults to obtain sexual arousal, sexual intercourse, or erotic practices through physical violence, threats, or enticement[2] .

The Disease and Injury Information System (SINAN) governs the reporting of suspected or confirmed cases of violence in various contexts, including mandatory reporting of violence against older adults[3] .

A study showed that following this measure, the number of reports has increased, with psychological violence being the most prevalent (11.6%), followed by financial violence (6.8%)[1] ; another study that quantified reports of elder abuse found that neglect (13.8%) is the most prevalent form, followed by financial abuse (7.5%) and, finally, sexual abuse (6.1%)[4] . Female gender can be considered a risk factor for the occurrence of violence through neglect; this factor may be explained by the fact that women have a longer life expectancy compared to men, or by an imbalance in caregiving relationships[4] .

Sometimes, the violence goes unnoticed or is even denied by the older adults themselves due to the dependence resulting from the loss of autonomy or because of the blood ties or emotional bonds with the perpetrator[5], since the perpetrators are almost always family members and/or close acquaintances; given that, in most cases, caregivers are relatives, older adults end up using justifications such as bad influences, alcohol and/or drug use, or even mental illness[6] , which hinders reporting and, consequently, the necessary interventions[5] .

Therefore, given the need to understand how older adults process and justify the phenomena surrounding them and how violence is represented in the aging process, Social Representation Theory (SRT) serves as the theoretical framework for this study, as it has proven suitable for understanding through the individual's experiences and perceptions in the face of a specific event[7] .

In light of the above, the present study aims to understand the social representation of financial, neglect, and sexual violence from the perspective of older adults.

METHOD

This is an analytical study with a qualitative approach grounded in Social Representation Theory (SRT). This approach allows us to understand the diversity of meanings and interpretations that individuals attribute to their social relationships, making it possible to visualize the results through means other than quantification[8] . SRT, developed by Serge Moscovici (1961), suggests that an individual's experiences and beliefs throughout daily life give rise to social thought. It is understood in a dynamic way that there are different ways of knowing and communicating; within society, there is a subdivision into two categories: the consensual, which pertains to everyday life, and the scientific, which involves specialized language and hierarchy. Despite their different purposes, both are of great value to human life; applying this theory allows us to perceive how social exchanges promote the human values that underpin life in society[9] .

Social representation uses two tools to construct the meanings of everyday elements: the first, called "anchoring," involves the transformation of new knowledge based on pre-existing knowledge—or, more simply, the ability to name something and make it an object in the real world—and "objectification," which is the process of transforming an abstract concept into something concrete, that is, creating an image, example, or representation of the phenomenon[10] .

The study was conducted within a Family Health Strategy (ESF) program in Health District V of the municipality of Campina Grande, Paraíba. For the researchers' convenience, sampling was based on theoretical saturation—that is, when the data collected began to show, in the researcher's assessment, a certain

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degree of redundancy or repetition, and it was deemed irrelevant to continue collecting data[11]. The use of theoretical saturation eliminated the need to calculate the required number of participants.

The study included individuals aged 60 years or older, born in Brazil, of both sexes. Those excluded were individuals lacking the cognitive capacity to answer the questionnaire and those unable to travel to the UBS.

The researcher visited the clinic on regular days when the target population was in attendance, inviting the older adults to participate in the study on a voluntary and unpaid basis, explaining the purpose of the research and clarifying the confidentiality of the information provided, as well as their right to anonymity.

Data collection took place in April 2022 in a private room without third-party interference, using a sociodemographic questionnaire to characterize the sample based on the following variables: gender, age, marital status, and family structure. Subsequently, three public-domain images available on Google Images were used as discussion prompts; The photos were selected to represent situations of financial, neglect, and sexual violence and were presented in printed form. This type of data collection for analysis is used in qualitative social research, where the image serves as a stimulus capable of eliciting data relevant to the study from the participant[12] .

Finally, a semi-structured interview was conducted, guided by the researcher, which included pre-established questions related to the forms of violence investigated in this study. The elderly participants were asked to verbally answer the following questions: "What do you understand by neglect?", "What do you understand by financial abuse?", and "What do you understand by sexual abuse?".

To ensure the integrity of the research and avoid bias, the entire data collection process was recorded using an MP3 player for subsequent transcription and coding. The statements obtained were organized and numbered from 1 to 14 and coded with the keyword "ELDERLY."

The data were transcribed in their entirety, converted into a textual corpus, and processed using the IRAMUTEQ software (Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires), version 0.7 alpha 2, which runs in the Python programming language and allows for the processing of qualitative data through various forms of analysis, such as text statistics derived from interviews or documents[13] .

We used Descending Hierarchical Classification (DHC) analysis, which generates word classes from the textual corpus, allowing these classes to be subdivided into categories formed from Text Segments (TSs) based on vocabulary, while also presenting the cross-tabulation (x^2) and respective frequencies (f) for each term[14]. The classes derived from HDA enabled content analysis through the formation of categories in accordance with Bardin's proposal, and these were analyzed in light of TRS.

This research complies with Resolution No. 466/2012 of the National Health Council of the Ministry of Health, which sets forth the guidelines that regulate research involving human subjects and was submitted to the Research Ethics Committee (CEP) of the UNIFACISA University Center, where the study was approved following favorable opinion No. 5,250,638. All participants were instructed to read and sign the Informed Consent Form (ICF).

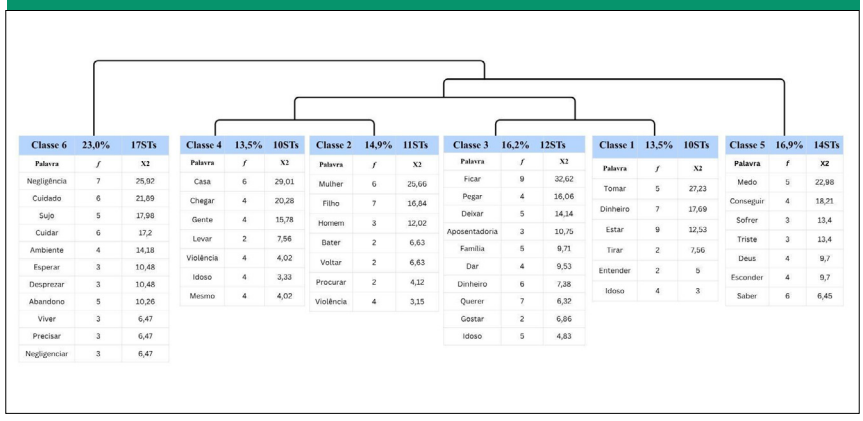
RESULTS

The sample consisted of 14 older adults, of whom 12 were women (85.7%), with the most common age group being 60–69 (58.3%), followed by those aged 70–79 (25%), and those aged 80 or older (16.7%); regarding marital status, the majority were widows (33.3%) and divorced women (33.3%); and regarding living arrangements, 65.4% live with their children and/or grandchildren.

Based on the empirical data collected and using TRS, we sought—within the context of the testimonies—to identify significant aspects of the theme and to define the dimensions that enabled us to grasp the representations of the study's respondents as a whole.

The textual corpus derived from the empirical data consisted of 41 texts, organized into 97 text segments (TS), with a retention rate of 76.29%, 3,178 occurrences, and 509 active forms. The lexical content was organized into six classes using the dendrogram shown in Figure 1 below:

Figure 1 – Dendrogram of the Descending Hierarchical Classification regarding the social representation of violence against older adults. Campina Grande, PB, 2022.



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The dendrogram illustrates the formation of the study's thematic classes, from which four main categories emerged: Category I, referring to the manifestations of VCPI from the perspective of older adults, titled "Violence represented through suffering, sadness, and fear," consisting of class 5 (16.9%); Category II, "Neglect is a lack of care," comprising class 6 (23.0%); Category III, "The price of old age: the faces of financial violence," comprising classes 3 (16.2%) and 1 (13.5%); and finally, Class IV, titled "Sex: Forced sex is violence," comprising class 4 (13.5%) and class 2 (14.9%).

Table 1—Thematic categories and their respective findings in light of the Theory of Social Representations, Campina Grande, 2026.

Category	Anchor	Objectification
Violence represented through suffering, sadness, and fear	Vulnerability in old age, fear of dependence, and the value placed on dignity.	Violence manifested as suffering, sadness, fear, and loss of autonomy.
Neglect is a lack of care	Values of care, family protection, and responsibility toward the elderly.	Violence represented by abandonment, lack of care, and contempt.
The price of old age: the faces of financial abuse	The right to financial autonomy, preservation of assets, and family conflicts.	Misappropriation of retirement savings, control over money, and financial exploitation.

Source: Authored by the author, 2026.

Category I—Violence as reflected through suffering, sadness, and fear

Category I, comprising Class 5, contains general aspects of older adults' perspectives on violence; participants' comments emerged when they were shown images representing violence and asked what those images meant to them. The highlighted words "fear," "sad," and "suffer" make it clear that, from the older adult's perspective, the social representation of violence centers on suffering, sadness, fear, and loss of autonomy, and this is anchored in the vulnerability of old age, fear of dependence, and the value placed on dignity, as seen in the following statements:

> *Oh my God, I don't know, it's so sad—he's suffering so much, the poor thing, it's pitiful, it's so sad. I think he's suffering; he's a person who's been through a lot. If I see someone like that, I start crying.* (ELDERLY PERSON 05)
>
> *Fear—a lot of fear of I don't know who, but a lot of fear of that.* (ELDERLY PERSON 14)
>
> *I'll just tell you one thing: I'm only afraid of the day when I can no longer control my own steps […].* (ELDERLY PERSON 03)

Category II – Negligence is a lack of diligence

The content of the words and text segments from Class 6 (23.0%) consisted predominantly of content related to neglect. From the perspective of the elderly person, neglect can be understood as a form of abandonment, lack of care, and disregard, as evidenced by the words "care," "dirty," "environment," "abandonment," and "disregard" generated in the dendrogram and observed in the following statements that reflect this premise:

> *He doesn't bother to visit for a month or two and only calls if there's something bothering him, and that's the worst kind of neglect—it's that person who doesn't take care of the other.* (ELDERLY PERSON 01)
>
> *Neglect is to neglect… it's a kind of abandonment […] it's living in a dirty, neglected environment with no hope for a good life—you've given up, you have nothing left to expect from life, you've surrendered—only God remains.* (ELDERLY PERSON 05)
>
> *Abandoned, mistreated—I think that's when the family abandons you, despises you, and doesn't take care of you; sometimes you even have family, but they don't take care of you and don't care.* (ELDERLY PERSON 10)
>
> *Neglect is also abandonment; it's not just a person failing to show care or failing to keep things clean in the first place […]* (ELDERLY PERSON 12)

In this category, the values of care, family protection, and responsibilities anchor the older adults' perceptions of neglect, which are shaped by situations characterized by contempt, abandonment, and lack of care.

Category III—The Price of Old Age: Facets of Financial Abuse

The social representation of financial violence from the perspective of older adults comprises this category, which, in turn, was formed by classes 1 (13.5%) and 3 (16.2%). Class 1 features the terms "take," "money," and "take away," while class 3 highlights the terms "grab," "retirement," "money," and "keep." These words characterize how older adults perceive this phenomenon, as they relate it to the right to financial autonomy, the existence of family conflicts, and the preservation of their assets. The following statements reinforce the highlighted words:

> *Family members take money and leave the elderly with no income at all; people are left wait-*

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ing to receive their retirement benefits or to manage the and keep it for their own use, leaving the person in need—often even of food. (ELDERLY PERSON 06)

It's about taking his money—not providing the care he needs. They keep the money; there are families who fight over who gets to take care of him, but it's not to care for the elderly person—it's just because they want his money. And this happens in all social classes—it's not just with the poor. (ELDERLY PERSON 11)

The family wants to control him financially, control his money, spend his money however they want, and leave him to fend for himself—they even run up debts in the elderly person's name. (ELDERLY PERSON 14)

It's also important to highlight two specific statements that underscore experiences of financial abuse: Elderly Person 13, regarding the family's appropriation of his retirement benefits, and Elderly Person 14, regarding a loan taken out in his name without his authorization—situations that exemplify the objectification of this phenomenon, as seen in the following excerpts:

I'm retired; my son doesn't work, my grandson doesn't work, so they want me to give them my entire retirement check for their luxury lifestyle—which happens a lot. I get my retirement check, go to the grocery store, fill the house with food, and end up with nothing. (ELDERLY PERSON 13)

[...] they run up debts in the elderly's names—I've been through this myself. I discovered a debt—I don't know who it was—but it's there on my payroll loan, and I just found out it's being deducted from my money. (ELDERLY PERSON 14)

Category IV—Sex: It was forced; it's violence

The extraction of social representations of sexual violence against older adults was the most diffuse among participants; this category consisted of classes 4 and 2, with low percentages of text segments—13.5% and 14.9%, respectively. However, it is still possible to see from the statements below that sexual violence is rooted in experiences of gender-based violence, in respect for bodily autonomy, and in the rights guaranteed to older adults. The highlighted terms "hit," "pursue," "violence," and "older adult" evident in the following excerpts confirm this reality:

There's another thing I don't agree with either, because when a person doesn't want it, there's no point in chasing after her—if the woman doesn't want it, why resort to violence? (ELDERLY PERSON 01)

[...] if you're forced to do something you don't want to do, that's violence. (ELDERLY PERSON 04)

It's harassing an older person—a defenseless person who was forced—that's violence. (ELDERLY PERSON 11)

From this perspective, sexual violence against older adults takes the form of harassment, coercion, and the absence of consent, and is expressed within the context of violence against women and gender-based violence. Throughout the interview, two older women reported experiences they had lived through in this context, as seen in the statements below:

I think I've been through it—not so much in that sense, but if you're forced to do something you don't want to do, that's violence, isn't it? So, in the past, I went through that with my own husband. (ELDERLY PERSON 04)

It's sad—I suffered a lot of violence when I was married. My husband was very violent, and that caused trauma for my children that lasts to this day, but thank God, Jesus has always walked by my side, [...] He committed every kind of violence against me and my children—he'd hit the boys so hard their palms would swell. I took my children away from Maranhão and brought them here to my parents' house, saying we were going to spend the holidays there, and I never took them back. When the day came for them to return, he beat me so badly, over and over... Another day—it was Sunday—and I had to go to morning Mass, I went anyway—I was the center of attention at church that day; everyone was talking about it. Another week went by, and with Jesus helping me, I finally managed to escape too. (ELDERLY 13)

DISCUSSION

In light of TRS, it is possible to analyze how an individual's social interactions influence the interpretations and meanings they attribute to a given phenomenon, thereby understanding the social representation of that event for the individual or for a specific group to which they belong. However, although representations are composed of ideas, beliefs, or experiences, they can be influenced by prejudices or ideologies[11].

Thus, this study captures how the experiences of older adults shape the concepts and distinctions they attribute to different forms of violence, revealing that in some cases the issue is mitigated by factors such as family ties, emotional or financial dependence, or feelings of guilt and abandonment.

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The characteristics of the sample in this study are consistent with those of another study on the same topic, which also found similarities in the female population and age group[14] . This predominantly female profile may be related to the occurrence of violence against women during their youth, which increases the risk of this dynamic persisting throughout the aging process; the age group of 60–69 years of age is also prevalent across the studies reviewed, demonstrating that the older the individual, the greater the likelihood of violence occurring[15] .

The highlighted terms—"care," "abandonment," and "disregard"—in Category II of the dendrogram refer to forms of neglect experienced by older adults, characterized primarily by situations of abandonment; the process of isolation, in turn, encompasses the lack of companionship and attention that can be observed in the participants' accounts in this study. Neglect causes harm to the mental health of older adults by inducing feelings of not belonging or of being a burden to family members; these findings are consistent with a previous study[16], which highlights that even when living with other family members, older adults feel lonely, without companionship, uncomfortable, and distrustful of those in their family circle, in addition to feeling trapped within their own homes.

In addition to the factors mentioned, the lack of family and social support, access to health services, and the degree of functional dependence among older adults are also significant risk factors for the occurrence of neglect[17] .

Analysis of the dendrogram also highlights the words "take," "money," and "remove" as the terms emphasized in the participants' discussion of financial abuse, as it reveals how older adults' experiences of a particular phenomenon shape their process of objectifying or concretizing the concept. Financial abuse perpetrated against older adults is one of the most frequently reported types of abuse, as evidenced by a population-based epidemiological study conducted in six urban areas of the city of Manaus (AM), where 98.4% of cases between November 2019 and April 2021 fell into this category[14] .

It is understood that the vulnerabilities associated with aging can lead to violent situations; reports of experiences of financial violence occur primarily within the family context, as can be observed in the statements of some participants, where the root of this violence for older adults is linked to the right to financial autonomy, the preservation of their assets or property, and family disputes; the objectification aspect relates to negative experiences regarding the control of their income or assets by third parties. However, the literature shows that in most cases, although they recognize that they suffer from such forms of violence, they choose to justify it or refrain from reporting it out of fear of misunderstanding, retaliation, or abandonment[18] .

Class I highlights the terms "fear," "sad," and "suffer" in relation to the concepts attributed to violence, illustrating how the feelings and emotions experienced by older adults in violent contexts shape the construction of meaning.

In a study conducted in the interior of São Paulo, the authors analyzed the social relationships, experiences, and practices of a multidisciplinary team providing care to older adults who are victims of violence, with the aim of identifying intervention strategies for the patients' families; the results indicate that the occurrence of behavioral disturbances may increase in old age due to high levels of stress, irritability, and the possible onset of dementia or mental illness that is not understood by family members[19] .

As for sexual violence, the topic is rarely discussed when it comes to the elderly, both because it is a taboo among older adults and because of a lack of understanding about what sexual violence is. From this perspective, it is evident from the participants' statements that sexual violence is not limited to the sexual act itself, but also includes sexual harassment without physical contact, sexual abuse with physical contact but without penetration, attempted rape, and rape[20] .

Compounding this situation are factors related to patriarchal culture and gender-based violence, which reinforce the idea of female submission to one's partner, leading many women to comply with their partners' wishes at the expense of their own desires and needs. This dynamic, often sustained by the attempt to preserve the marriage and the appearance of a stable family unit, perpetuates relationships marked by control, coercion, and various forms of violence[21] . Furthermore, given the barriers that arise as people age, sexuality is a neglected topic—a gap resulting from social projections that label this subject as inappropriate for this age group, based on the false notion that sexual life is related only to youth and that the body's aging eliminates the need for desire. However, if sexuality is understood as a fundamental part of the development and maintenance of an individual's relationships, it constitutes a human need

basic care that should be maintained until the individual deems it appropriate[22] .

Therefore, guidance regarding preventive methods, intimate partners, and sexual violence should be part of routine nursing care and interventions, as keeping this topic silent among the target population creates vulnerabilities that impact the quality of aging[23] .

With regard to care provided to the elderly population, Primary Care (PC) plays a key role as the population's initial point of contact with health services, with an emphasis on preventive measures and continuity of care, as it

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carries out activities within its designated service area. Notably, nursing interventions involve disseminating information and facilitating discussions about the issue, paying close attention to behaviors that enable the early identification of cases of violence[19] .

It is evident that the older adult's life course and personal history directly influence their understanding of violence and how they perceive it in today's society, sometimes leading them to normalize violent behaviors or fail to recognize when such violence occurs. Finally, understanding the social mindset of older adults—based on their experiences and the potential vulnerabilities to which they are exposed—enables us to effectively direct improvements in professional training and preventive measures.

The limitations of this study relate to the number of older adults interviewed and the limited number of facilities selected for data collection; however, the findings presented raise issues that warrant further exploration, offering other older adults who are victims of violence a humane opportunity to live in a society that welcomes and listens to its older adults, while also preventing new cases of violence.

CONCLUSION

Understanding the experiences and meanings that older adults attribute to the events surrounding them allows us to identify some key points for older adults' health from a nursing perspective, such as the need for multidisciplinary interventions that address older adults' mental health, strengthening their rights regarding autonomy and financial matters, and carrying out activities that encourage older adults to break down taboos related to sexuality in the aging process.

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