


BMJ Open Evidence of neglect of the elderly in sub-Saharan Africa: a scoping review protocol

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ABSTRACT

Introduction The elderly constitute a significant demographic in society, relying on social and healthcare support of its country. However, despite their vulnerability and dependence, instances of negligence within sub-Saharan Africa (SSA) towards this demographic have been reported anecdotally, yet remain poorly understood and documented. The purpose of this protocol is to outline the systematic approach to investigating the neglect of the elderly population in SSA. The elderly population are the point of focus but they will not be directly involved but through secondary data.

Methods and analysis Search will be conducted in Ovid MEDLINE, PubMed, CINAHL, Embase, Web of Science, Cochrane Library, grey literature, professional society websites and the International Clinical Trials Registry Platform. Only qualitative study designs, clinical practice guidelines, policy documents and professional society recommendations relevant to study objective will be used. The time lapse for this study will be from January 2000 and later. Two authors will independently perform data extraction in duplicate and complete risk of bias and quality assessment using recommended tools. Study appraisal will be conducted using the Joanna Briggs Institute (JBI) critical appraisal tool for qualitative studies.

Trial registration <https://doi.org/10.17605/OSF.IO/PK2VJ>.

Ethics and dissemination This study does not involve patients and animals; therefore, written informed consent will not be required. The findings from the study will be disseminated to stakeholders such as the Ministry of Health, policy implementers at local government level and chiefs for discussion and implementation of the findings. It will also be presented at conferences for the consumption of the global world.

INTRODUCTION

The neglect of the elderly in sub-Saharan Africa (SSA) stands as a critical and pressing issue, mirroring global concerns surrounding ageing populations which are considered to be 65 years or older.¹ In the midst of transformative demographic shifts within the region, characterised by rapid urbanisation, evolving societal structures, economic pressures and shifting family dynamics, the elderly face intricate and multifaceted dimensions of neglect.² Traditionally, SSA has relied on strong

STRENGTHS AND LIMITATIONS OF THIS STUDY

- ⇒ This review will include eight electronic databases with peer-reviewed literature and available grey literature in the Sam Jonah Library of the University of Cape Coast, bibliographies and conference proceedings, at other organisation websites, including WHO.
- ⇒ In this review, only qualitative studies will be considered because the majority of the data identified are all qualitative information.
- ⇒ The study will also inform policymakers on the magnitude of the existing problem for feasible strategies to be formulated.

familial ties to provide care for the ageing population. However, these time-honoured support systems are undergoing erosion due to factors such as migration, urbanisation and globalisation.³

The consequences of these changes are profound and pose a substantial threat to the well-being of the elderly in SSA. As traditional family structures disintegrate, the elderly find themselves increasingly isolated and lonely.⁴ Further, economic vulnerabilities compound the issue, with limited access to financial resources and inadequate social security systems rendering a significant portion of the ageing population economically vulnerable.⁵ The healthcare landscape in SSA adds another layer of complexity, marked by insufficient infrastructure, a shortage of healthcare professionals and a lack of specialised geriatric care.⁶

In many SSA cultures, strong familial ties have traditionally played a pivotal role in caring for the elderly.⁷ However, social neglect often manifests due to evolving societal structures and economic pressures.⁸ Migration patterns, urbanisation and changing family dynamics can lead to isolation and loneliness among the elderly.⁹ Extended families, which were traditionally the primary support system, are breaking down due to factors such as urbanisation and globalisation.¹⁰ Again, the

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erosion of traditional values contributes to the neglect of the elderly, where in some instances traditional norms that once emphasised the care and respect for the elderly are being overshadowed by modern values that prioritise individualism and material success.¹¹ This generated the desire to map evidence on how the elderly have been neglected in the SSA region.

This scoping review aims to map existing evidence, appraise and analyse the multidimensional aspects of neglect experienced by the elderly in SSA. The contextual justification for this scoping review lies in its potential to inform targeted interventions, policies and community initiatives. By investigating, appraising and analysing the multidimensional aspects of neglect, the review aims to fill existing knowledge gaps and lay the groundwork for evidence-based strategies. It is imperative to understand the unique challenges faced by the elderly in SSA to develop nuanced and culturally sensitive interventions that address their diverse needs. The synthesis of existing evidence will not only contribute to a profound understanding of the issue but will also facilitate the development of practical and effective strategies to enhance the well-being of the elderly in the region.

METHODS

This review will be conducted following the guidelines by Arksey and O'Malley¹² for conducting scoping reviews. The six steps in the guideline are as follows: (1) identifying and stating the research questions; (2) identifying relevant studies; (3) study selection; (4) data collection;

(5) data summary and synthesis of results and (6) consultation. The Preferred Reporting Items for Systematic Reviews and Meta-analyses Extension for Scoping Reviews (PRISMA-ScR) checklist will also be used for reporting this review.

Patient and public involvement

Patients and/or the public will not be involved in the design, or search, or reporting, or dissemination plans of this research.

Research questions

The review question is: what are the multidimensional aspects of neglect experienced by the elderly in SSA?

Search methods for the identification of studies

For the review questions to be answered, relevant keywords and search terms as outlined by Aromataris et al.¹³ are Medical Subject Headings terms, and Boolean's AND/OR terms will be used since the process will be iterated and documented during the analysis and write-up. A pilot test will be conducted on the search strategy to assess the suitability of keywords and databases starting with PubMed. The detailed search strategy is delineated in table 1.

Study selection

Duplicates will be removed using the Mendeley software. To minimise selection bias, two independent reviewers (IKA and WA-B) will screen the search outputs for potentially eligible studies from the search engines into pools

Table 1 Search strategy for papers on evidence of neglect of the elderly in sub-Saharan Africa

Items	Search strategy
Database	Ovid Medline, PubMed, CINAHL, Embase, Cochrane Library, Web of Science, Cochrane Library, Joanna Briggs Institute, grey literature, professional society websites and the International Clinical Trials Registry Platform
Language filter	English
Time filter	January 2000 and later
Spatial	Sub-Saharan Africa
Keywords	1. "Older adults" OR "elderly" AND "neglect" OR "forsake" OR 'abandoned' AND "sub-Saharan Africa" will be identified 2. "Social" OR "economic," AND "healthcare," 'physical', OR 'emotional', OR 'political' OR 'marriage', OR 'education' AND 'residential'
Inclusion criteria	The paper should be 1. Studies focusing on individuals aged 60 years and above residing in the sub-Saharan Africa 2. Studies addressing neglect of the elderly 3. Qualitative research studies only 4. Peer-reviewed articles and grey literature such as reports, dissertations and conference proceedings published in English language only
Exclusion criteria	The paper should be 1. Studies focusing on elderly populations outside of the sub-Saharan Africa 2. Studies focusing solely on topics unrelated to neglect of the elderly 3. Quantitative research studies, systematic reviews, meta-analyses and editorials without original qualitative data 4. Non-peer-reviewed materials in languages other than English without available translations

of data according to search engines. These reviewers will independently screen title, abstract and full-text papers for potentially eligible articles that meet the inclusion criteria. A reviewer (MA) will supervise the screening process and resolve disagreements by discussions and draw consensus with the group. The screening process and results will be presented in a PRISMA flow chart¹⁴ outlined in online supplemental sheet 1.

Data extraction

Data extraction will be performed independently by two authors (AA and FOOO) to ensure accuracy and reliability of the data extracted. The following relevant data will be extracted from included studies: year of publication, country of publication, participant group (type of the elderly used), setting (rural/urban, type of health facility), study sample, methodology and methods, and findings intervention (type of neglect). Reviewer (WA-B) will ensure disagreements are resolved and consensus reached during the extraction of the data. It will then be reviewed by IKA and MA to ensure any more discrepancies and inconsistencies are resolved.

Study appraisals of included studies

Study appraisal will be conducted using the Joanna Briggs Institute (JBI) methodology for qualitative research.¹⁵ The adoption of the JBI framework is justified by its comprehensive nature, encompassing key domains such as research design, data collection and analysis, which are essential for evaluating the methodological rigour and relevance of qualitative studies. Within the scope of the review, only qualitative systematic reviews may be incorporated, as well as meta-analyses of existing research. There are 11 questions which will guide the appraisal review, and each question would be answered as 'yes', 'no', 'unclear' and 'not applicable (NA)'. Two independent appraisers (IKA and FOOO) will perform this assessment, ensuring a thorough and unbiased evaluation of the included studies. The use of this standardised appraisal tool will enhance transparency and reproducibility, facilitating evidence-informed decision-making regarding the inclusion of the studies concluded on.

Data summary and reporting

A thematic analysis approach will be employed for this review. However, themes will be refined and validated through cross-study comparison, ensuring the robustness and coherence of the synthesis. Two independent reporters (IKA and WA-B) will code the data systematically, identifying key concepts, patterns and ideas within the data set. The synthesised themes will be integrated with contextual information to provide a nuanced understanding of the phenomenon, considering cultural, social and economic factors, as well as others that will be identified in the existing literature.

Consultation

Consultation enhances the validity and applicability of the review findings. Additionally, consultation allows for the

identification of additional sources of evidence, potentially expanding the breadth and depth of the review. As such consultation will be sought from experts in the field, including medical practitioners and librarians, to enrich the quality and relevance of a scoping review. MA will be the mediator between the team and consultants because of his knowledge and skill in conducting systematic reviews.

ETHICS AND DISSEMINATION

This study does not involve patients and animals; therefore, written informed consent will not be required. The findings from the study will be disseminated to stakeholders such as the Ministry of Health, policy implementers at local government level and chiefs for discussion and implementation of the findings. It will also be presented at conferences for the consumption of the global world.

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Contributors IKA, FOOO and AA substantially contributed to the conception and design of the work and drafted the work by revising it critically for its intellectual content. WA-B and MA read and corrected for its intellectual, technical content and agreed to the final approval of the version of the manuscript and the team agreed to the publication of the protocol. All authors agreed 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 will be appropriately investigated and resolved. IKA is the guarantor. AI was used only in the background to note the type variable the study will be dealing with.

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