ISSN: 2349-2147



Modern Research Studies

Editor-in-Chief Gyanabati Khuraijam

An International Journal of Humanities and Social Sciences

An Indexed & Refereed e-Journal

www.modernresearch.in

Title: Services for Old People in Turkey

Author/s: AYSE BERIVAN BAKAN SENAY KARADAG ARLI

Volume 3, Issue 4 December 2016

pp. 848–856

Disclaimer: The views expressed in the articles/contributions published in the journal are solely the author's. They do not represent the views of the editors.

Email: editor@modernresearch.in mrsejournal@gmail.com

Managing Editor: Yumnam Oken Singh

Services for Old People in Turkey

Dr. AYSE BERIVAN BAKAN* Dr. SENAY KARADAG ARLI

848

Department of Nursing Agri Ibrahim Cecen University School of Health Turkey

* Corresponding author: absavci77@gmail.com

"Old age is like climbing a mountain. You climb from ledge to ledge. The higher you get, the more tired and breathless you become, but your views become more extensive." - Ingmar Bergman

Abstract: Ageing is one of the most unchangeable facts of life. Due to the rapid increase in elderly population based on the population projections, Turkey is estimated to be among the very old societies within the following 30 years. This demographic transformation will lead to an increase in the need of providing health services to the elderly. Therefore, necessary health policies should be produced and job and authorization definitions should be clearly specified with law so that the professionals to provide health services can be sufficient in terms of both quality and quantity. As for institutional care, projects should be conducted about improving the current situation and protecting our cultural structure that supports active ageing naturally, and related policies should be produced about the integration of institutional services

Keywords: ageing, health professionals, health services, Gerontologist, Geriatrist, Turkey.

Modern Research Studies: ISSN 2349-2147

Introduction

Ageing is a process that needs to be evaluated with its physical, psychological, and social aspects. Ageing, with its physical aspect, represents changes happening with chronological age, and with its psychological aspect it represents changes in the adapting capacity of people in terms of perception, learning, problem solving and personal characteristics. As for sociological aspect, it is related with the behaviours expected from a specific age group and the values the society gives to that group (Beğer & Yavuzer 2012). Increase in the life expectancy and low birth and mortality rate paralleled with the developments in the technology and health fields causes the world population to gradually get older (Beğer & Yavuzer 2012). According to 2015 WHO report, there are two key drivers of population ageing. The first is increasing life expectancy: on average, people around the world are living longer. The second reason populations are ageing is because of falling fertility rates (World Report on Ageing and Health – World Health Organization 2015).

The World Health Organization defines age 65 and over as old age and age 85 and over as very old age. As for Gerontologists, they define ages between 65 and 74 as young old, ages between 75 and 84 as medium old, and ages over 85 as advanced old. Especially in developed countries, two groups are added in this classification: centenarian (age 100) and super centenarian (age 110) (Bilir and Erbaydar 2013).

One reason that ageing is emerging as a key policy issue is that both the proportion and absolute number of older people in populations around the world are increasing dramatically. In 2050, as estimated, nearly half of the world's population will live in countries with at least 20 per cent of the population aged 60 or over, and one in four people will live in countries where older persons account for more than 30 per cent of the population (World Population Ageing 2015: Highlights 2015). In 2014, elderly population (65 and over) in Turkey was 6 million 192 thousand 962, and it accounted for 8% of the total population. 43.6 % of the elderly population were male, and 56.4% were female. According to population projections, the proportion of

http://www.modernresearch.in

elderly population is estimated to be 10.2 % in 2023, 20.8 % in 2050, and increase up to 27.7% in 2075 (Turkish Statistical Institute, 2014).

Rapid increase of elderly population in our country and in the world has posed common geriatric syndromes of this group as well as care and treatment process in chronic diseases, which are different phenomena for health professionals (Table 1; Beğer & Yavuzer 2012). Globally, 23% of morbidity and mortality occurs among individuals who are 60 years of age or older. A large proportion of this burden is due to chronic illnesses (Prince et al. 2015). An ageing population makes countries face many kinds of struggle in terms of health care and education. First of all, social support and care offered by elderly people's friends and family members can be inadequate (Hoving et al. 2010; Kececi and Bulduk 2012).

Therefore, need for qualified work force is undeniable in planning, presenting, and improving health care services provided to old people according to the needs of society, based on universal and scientific facts. In this regard, a qualified service provided by health professionals can be realized through the education they receive in relation to elderly health (Akın, Seviğ, & Karataş 2001). This study makes a general evaluation of health professionals and institutional care services providing service in the field of elderly health in Turkey.

Health Professionals

In previous years, in Turkey, there used to be no health professionals who received education specifically in the field of providing care to old people. Like other countries all over the world, our country has begun to need qualified health professionals in this field as a result of the gradually increasing world population. People who provide service in the field of elderly health and care in our country include Elderly Care Members of Profession, Gerontologists, Nurses, and Geriatrists.

Elderly Care Members of Profession: They are the people who graduated from two-year university education programs, which provided education content mainly about elderly care and problems. Fields of work include Geriatrics units of hospitals, Nursing homes,

Elderly Care and Rehabilitation Centers, Elderly Care Centers, Day Care and Special Care Centers. Besides, they can be employed at homes by people who would like to receive care services privately and individually in their homes (Anadolu University 2016).

Gerontologist: Gerontologists are people who graduate from four-year departments with the content mainly about the management of the institutional process of elderly care. Their working fields are universities, hospitals, rehabilitation centres, social service institutions, insurance companies or tourism sector. They generally work as managers. This department has post-graduate program in Turkey (Akdeniz University Department of Gerontology 2016).

Nurse: Nurses are people who graduate from the four-year nursing departments of universities. Content of the education includes maintaining and improving health, preventing illnesses, managing the care process in the situations of lack of self-care, and gaining functions that help individuals become self-sufficient (Akın 2001). Therefore, nursing education has been undergoing some changes for meeting the changing health problems and human needs in the best way possible. With this approach, field of Gerontology has become a current issue as a result of the increase in elderly population and innovations in the health services to be provided to this group.

Gerontology nursing represents the care that encompasses activities aiming to regain functional level or solving any pathological process provided by nurses who understand unique needs of old people and are competent in geriatric care (Akın, Seviğ, & Karataş 2001).

Education given in nursing departments is not adequate to meet the increasing service needs of elderly care field because it is covered as a topic in Public Health and Internal Diseases Nursing courses in undergraduate level. As to post graduate education, some universities provide "Gerontology Nursing" course as a 2 or 3 hours theoretical course in a week in the Departments of Internal Diseases Nursing and Public Health. A few universities have Geriatrics Nursing post-graduate program in Turkey.

Geriatrist: Geriatrists are people who receive three-year Geriatrics subbranch education after five-year internal diseases career education in medical faculties. They work as specialists in Geriatric polyclinics and clinics in hospitals (Ankara University Medical Faculty Geriatric Department 2016).

Institutional Care Services

In the extended family model in previous years in Turkey, providing care to old people at home was possible due to the care provider roles of women at home. However, urbanization and industrialization have caused important changes in family structures, especially in big cities. Old people were also affected by the changes in the roles of women who participated in work life. Women's working outside home diminished their care provider role, which brought the need for old people's institutional care.

Institutional care is a kind of care that uses old people's wellbeing and happiness as base. Health, socio-economic and psychological needs of old people in need of protection and care are met by those who are educated on this issue.

Institutional care in Turkey is carried out with the cooperation of official institutions, local authorities, volunteer people and institutions connected to Ministry of Family and Social Policies. Institutional elderly care services are provided by Homes for the Aged, Nursing home Elderly Care and Rehabilitation Centers, Elderly Service Centers and Elderly Cooperation Centers. Services for elderly people provided by the Ministry are carried out as night care and day care services (Genç, and Barış 2015a; Genç, and Barış 2015b).

Homes for the Aged

Homes for the aged are social service institutions that provide care for 24-hour service. These centers were established for people who are aged 60 and over, who are conscious, and who do not have any contagious diseases so that they can be protected in a peaceful environment, provided care, and their social and psychological needs are met. Institutions nationwide provide old people who have or do not have social security with protection and care, and meet their social and psychological needs (Genç and Barış 2015b).

Nursing Homes Elderly Care and Rehabilitation Centers

Nursing Homes Elderly Care and Rehabilitation Centers enable rehabilitation of people who are aged 60 and over, who are conscious, who do not have any contagious diseases, who are bedridden, and who require special care, support and protection so that they can maintain their lives on their own and with health, peace, and safety. The institution provides continuous special care for those who are untreatable as well (Genç & Barış 2015b).

Elderly Service Centers

Elderly care centers founded for providing day care and home care services aim to increase quality of life of old people. These centers help old people living at home to increase their quality of life and maintain their lives without being isolated from their social environments by enabling them to spend their spare time with various activities, increasing their social relationships, and improving daily life activities. These centers which are limited in number in our country serve very functionally in Europe (Genç and Barış 2015b).

Elderly Cooperation Centers

Elderly Cooperation Centers are day care centers that provide people aged 60 and over who live alone or with their family with support services meeting their social and psychological needs. Old people enrolled in elderly consultation centers are provided such services as psychological counselling, guidance in various topics, handcraft activities, and simple health assistance. These centers also organize meetings for chat and fun. The centers enable old people to come together and chat, share common issues and problems, look for solutions to the problems together, spend their free time in a productive way, prepare an environment that will help them not to feel lonely, and make their socialization easy (Genç and Barış 2015a).

Conclusion

In parallel with the developments particularly in health and technology, ageing ratio of population has been increasing with the ageing world. Despite the developments in health and technology, no exact solutions have been found for preventing ageing yet. Therefore, ageing proportion based on the increase in welfare level especially in

http://www.modernresearch.in

developed and developing countries has been increasing day by day. Increase in the ageing proportion poses various needs and thus forces people to be better at elderly care. Innovations and developments in history have always happened as a result of needs. Assuming that we will also be old someday in our life journey, for certain we will see that we have a desire for a quality care. Therefore, each individual in society has to do his best for the issue of elderly health. Proportion of elderly people has been increasing for various reasons in Turkey, which is a developing country, and this makes elderly care more and more difficult day by day. Hence, institutions providing service about elderly health in Turkey need to be improved. Besides, health professionals to work in these institutions should have the best knowledge regarding elderly health/care and follow contemporary approaches. We should keep in mind that all of us will be old someday and need the best care.

References:

- Akdeniz Üniversitesi Gerontoloji Bölümü. 2016. Web. Accessed on May 02, 2016. http://gerontoloji.edebiyat.akdeniz.edu.tr/tr
- Akın, B., Ü. Seviğ, & N. Karataş. 2001. "Türkiye'de Gerontoloji Hemşireliği Eğitimi (I): Bir Sertifika Eğitim Programı Geliştirme Çalışması Programın Dayandığı Temeller, Deneyimler ve Eğitim Programı Önerisi. Gerontological nursing education in Turkey (I): an education programme development study for certificate-the foundations of programme." *C.Ü. Hemşirelik Yüksekokulu Dergisi*, 5(1): 33-39.
- Anadolu Üniversitesi. 2016. Yaşlı Bakım Programı. Web. Accessed on May 02, 2016. https://www.anadolu.edu.tr/acikogretim/turkiye-programlari/acikogretim-fakultesi-onlisans-programlari-2-yillik/yasli-bakimi
- Ankara Üniversitesi Tıp Fakültesi Geriatri Bilim Dalı. 2016. Web. <u>Accessed on May 02, 2016.</u> http://ichastaliklarigeriatri.medicine.ankara.edu.tr/?page_id=39

- Beğer, T., & H. Yavuzer. 2012. "Yaşlılık ve Yaşlılık Epidemiyolojisi." *Klinik Gelişim Dergisi, 25*: 1-3.
- Bilir, N, & N. Erbaydar. 2012. Halk Sağlığı Temel Bilgiler, 2. Baskı, Ankara, Hacettepe Üniversitesi Yayınları, 1528-57.
- Genç Y, Barış İ. 2015a. "Yaşlı Bakım Hizmetlerinde Çağdaş Yaklaşım: Kurumsal Bakım Yerine Evde Bakım Hizmetlerinin Güçlendirilmesi." *Akademik Sosyal Araştırmalar Dergisi, 3(10)*: 36-57.
- Genç Y, Barış İ. 2015b. "The Functionality of Decentralized Management in The Reconstruction of Social Services." *International Journal of Social Science*, 32: 95-117.
- Hoving C, A. Visser, PD Mullen, & B. Borne. 2010. "A History of Patient Education by Health Professionals in Europe and North America: From Authority to Shared Decision Making Education." *Patient Education and Counseling, Vol.* 78: 275–281.
- Kececi A, & Serap Bulduk. 2012. "Health Education for the Elderly." In *Geriatrics*, edited by Craig S. Atwood, 153-176. Rijeka, Croatia: InTech. Web. Accessed on May 02, 2016. http://www.intechopen.com/books/geriatrics/health-education-for-elderly-people
- Prince, M.J., F. Wu, Y. Guo, L.M. Gutierrez Robledo, M. O'Donnell, R. Sullivan, & S. Yusuf. 2014. "The burden of disease in older people and implications for health policy and practice." *Lancet*, 385: 549–562.
- Turkish Statistical Institute. 2015. Web. Accessed on May 02, 2016. http://www.turkstat.gov.tr/PreHaberBultenleri.do?id=18620
- World Population Ageing. 2015: Highlights, 2015. Web. Accessed on May 02, 2016. http://www.un.org/en/development/desa/population/publications/pdf/ageing/WPA2015_Report.pdf

World Report on Ageing and Health - World Health Organization, 2015. Web. Accessed on May 02, 2016. http://apps.who.int/iris/bitstream/10665/186463/1/97892406948 11_eng.pdf?ua=1

Table 1: Geriatric Syndromes and Chronic Diseases frequently seen in Old People (Beğer & Yavuzer 2012)

GERIATRIC	CHRONIC DISEASES	
SYNDROMS	Diseases related with physical health	Diseases related with psychological health
 ✓ Dementia ✓ Depression ✓ Spontaneous bone fractures connected with osteoporosis ✓ Vertigo ✓ Neglect ✓ Abuse 	 ✓ Hypertension ✓ Osteoarthritis, Osteoporosis ✓ Chronic heart failure ✓ Diabetes mellitus ✓ Coronary artery disease ✓ Cancer 	✓ Dementia ✓ Depression ✓ Use of alcohol ✓ Suicide attempt