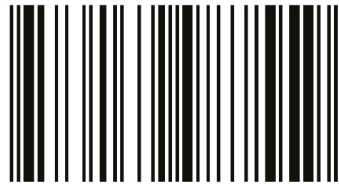


Social science is a very comprehensive term including many disciplines such as economics, tourism, history, and geography. The current book covers fourteen different studies on different aspects of social sciences. These studies are meant to exemplify the recent research in Turkey. Wishing the readers have an idea on social sciences.

Current Research Examples on Social Sciences in Turkey



Sinasi Akdemir is a scientist working on agricultural economics at Cukurova University. Having been a professor for more than twenty years, he is a well-known scientist, who has published more than one hundred papers and notices, and written a lot of books. Thanks to this book, he wants to share his experience with other scientists and guide them and to provide samples for scientists in social sciences.



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Akdemir (Ed.)



Şinasi Akdemir (Ed.)

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in Turkey**

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Current Research Examples on Social Sciences in Turkey



PREFACE

I have been conducting academic studies for approximately forty years regarding the significant socio-economic issues of Turkey. I have accomplished more than one hundred international articles, books and papers especially regarding agriculture and its economy. With this experience, I wanted to set an example for the friends working on social sciences, assess their studies and support them by preparing an anthology. The book at your hand is a result of this wish. In this book, there are fourteen studies with social sciences content produced in Turkey in 2019. These studies in which the subjects such as economy, tourism, social media and identity presents a wide range of social sciences.

Each article in this book prepared with the name of Current Research Examples on Social Sciences in Turkey has been approved by the arbitrator and language editor. Firstly the language editors have read the articles during the selection process of the studies and examined them in terms of grammar and expression. Afterwards, these studies have been sent to two arbitrators. Those taking positive feedback from only two arbitrators have been published in the book. Those taking one or two negative reports from the arbitrators have been returned to their writers. I am grateful to the writers for their efforts and understanding and editors and arbitrators for their knowledge, help and time they have spent for us. I present my thanks both to the writers, language editors and arbitrators.

These studies decided to be published after a meticulous and delicate assessment process are expected to set an example for those conducting studies regarding social sciences and shed light on those conducting research on these issues. I pay my respects to the readers and researchers with the wish that

this step is taken to next stages and more comprehensive resources are produced.

Editor

Prof. Dr. Şinasi Akdemir

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A QUALITATIVE RESEARCH ON MIGRANT CARE WORKERS IN HOME-BASED LONG-TERM ELDERLY CARE

Hamza Kurtkapan - Nevşehir Hacı Bektaş Veli University

INTRODUCTION

Due to demographic transformation, the world population is aging at a rapid rate. The share of older people in the total population is growing faster than other age groups. In many countries, the population of elderly people with multiple diseases, high levels of frailty and needs for care is also growing in number (Klie, 2018: 91). Frailty is the most problematic condition for elderly people as compared to

other age groups. To address the needs of those people, whose numbers are increasing rapidly in Turkey, is among the main issues of social policy. The most important problem of this population is by whom they should be taken care in case of need. Because aging increases the need for protection (Klie, 2018: 90), their basic needs must be met in order for them to survive in safe environments. Which state institute will be responsible for providing care, if the family take care of aging parents which family members will help them, are some of the most important issues? Will be the care arranged in the home by the family or in an institution? This is an essential question that is not answered easily.

In the Turkish language institution dictionary, care is defined as the fulfillment of the special needs and requirements of someone like eating, dressing, etc. In this context, the term care encompasses such services as providing support and assistance to individuals who need assistance with activities of daily living. There are various types of care. One of them is long-term care. It involves a variety of services designed to meet someone's six months or longer daily routine needs. This care is aimed at individuals who have lost physical, psychological and mental competence or have impaired health (Reichert and Naegele, 2018: 116). One of the most common long-term care is the care service intended for the elderly. It should be noted that elderly people who experience a decline in many areas with advancing age need others to meet their needs at full and adequate levels. Canatan (2018) defines long-term care as social, economic, physical and other supports that people aged 65 years and older need in the remaining periods of their lives (189-190).

There are two basic models of service provision in order to meet the needs of the elderly that are increased in proportion with increasing age. The first is the elderly care model in the home and the second is in the institution. Home-based care

model, which is also known as home care model, also varies in itself. The first is the service attended by unpaid family members while the second by the paid care workers. Paid care service is sometimes given by professional care workers, but is sometimes provided by uneducated and unskilled individuals. In the elderly care service model, which is commonly provided by unqualified individuals, more migrant women are used.

It is one of the most desirable situations for people to age in place and to live the rest of their lives without changing where they belong (Klie, 2018: 90). Researches show that elderly people in Turkey prefer to be cared in their homes rather than in institutional care (Kurtkapan, 2018; Kalınkara, 2012; Şentürk and Altan, 2015). Reducing the uncertainties in life, home-based care and aging in place help them to grow older with confidence. However, in order to spend the old age period at home, the elderly need to be given full care. Home-based care is a complex issue with both health and social dimensions (Güven, Seval, 2016: 295). It is usually a service delivered in the daily life of the household without any additional features and professionalism. However, when the woman started working outside the home, this service was started to be provided by the paid care workers at home (Canatan, 2018: 200).

Family members need support for long-term care at home for economic and social reasons. In some families, elderly care is provided to third parties for a fee. While some of these care workers are indigenous, a significant number are composed of immigrants. In this study, the subject of migrant care workers, one of the important actors of elderly care at home, is reviewed in detail.

In this study, experiences of migrant care workers are examined. It is aimed to keep track of the migrant care model that has or does not have a work permit. With the growing

elderly population in Turkey, we cannot think the elderly care without a migrant care worker. Studies on the current situation are needed to make this profession more professional. In this study, it is aimed to determine this model. To this end, the focus is on the reasons and problems of preferring the migrant care model and several suggestions accordingly have been made.

METHOD

Research Model

Instead of testing hypotheses, the phenomenology that allows to reach the hypotheses of social reality in the field and to gather in-depth information about real-life through multiple sources of information is the pattern of this qualitative research. This is because the phenomenology pattern focuses on the facts that we are aware of but do not have an in-depth understanding (Yıldırım & Şimşek, 2008: 75). Experiences of migrant care workers giving long-term care for the elderly, which are known to exist in the social sphere but needed deep insight, are examined through phenomenological qualitative research design. The result of the study can include both a description and the themes of the researcher (Creswell, 2015: p. 98). In this research, the findings were described and discussed within specific themes.

Working Group

Research data were collected from the care workers of Uzbekistan and Turkmenistan who provided services to a group of elderly people in Istanbul and from the first-degree relatives of the elderly who received care. The study focused on migrant carer workers in elderly care. In accordance with the purpose of the research, information is obtained from the first-degree relatives of the elderly. In this context, the daughters, daughters-in-law, and grandchildren of the elderly are also used as sources of data.

The study included seven migrant care workers serving the elderly and seven first-degree relatives of the elderly who received long-term care services. The researcher assumed that these participants had sufficient knowledge and experience on the subject researched. In addition, these participants are thought to have responded to the questions sincerely. Interviews were conducted with those who agreed to meet in local government centers and related social life units. Snowball sampling method was used for sampling. All interviewees consist of women. The citations to the participants were given in the text in parentheses and by using code names.

Data Collection Tools

Interview, one of the data collection techniques, was used in the research. The interview technique was decided to be used as it gave flexibility to the researcher. A semi-structured interview form was developed to be used in these interviews. In the preparation of the form, the literature was used besides the preliminary field research and observations.

Data Collection

It was observed that all of the participants except one care worker were not willing to attend the interview because they did not have a work permit. Data collection process, started with the assurance that information security would be provided to the participants, was completed between August and September 2018. Participants were informed about the study and their approval was obtained before the interview was started to gain the trust of participants and to ensure that the study could be conducted within ethical rules. All the interviews were conducted with the interview form and recorded with a voice recorder. Interviews were made in the homes and residences where elderly care services were provided. In particular, in order not to disturb the elderly and

the family who were given care, the interviews included a limited period of time that would not exceed 15-20 minutes.

Data Analysis

The data were analyzed with categorical content analysis based on interpretation analysis approach. In the analysis, categories and themes were reached by analyzing and coding the interviews one by one. In this context, first of all, audio recordings were deciphered and prepared by the researcher for analysis. Then, the data was read again and the themes were developed by dividing the data into word, sentence or paragraph levels at the coding stage. During the data analysis stage, the researcher first analyzed the themes emerging after revealing the context of the situation (Creswell, 2015: p. 101). The participants were given a pseudonym to disguise their identities.

FINDINGS

1. Migrant Care Worker Model for Long-Term Home-Based Elderly Care

A considerable part of the research participants accepts the principal role of the parent in elderly care. However, family members assert that they are inadequate in elderly care as a result of the changing conditions in cities. Therefore, they say they had to head over to the migrant care worker model for long-term care:

“Our expectation is to receive help from care workers. In fact, we should take on the caregiving role as a daughter-in-law, but we are not always available for long-term care. So, we see them as companions who are on a mission to make elderly people’s life easier, more comfortable and confident 7/24.”
(Miss Hatice, 48 years old)

According to the participants, in the migrant model, family members purchase support services for long-term elderly care. Migrant care workers serving the family are constantly controlled by other members of the family:

“(Migrant care worker) psychologically relaxes us. We appreciate if there are any pluses and warn if there is a deficiency. (The care worker) is constantly being observed.”
(Miss Hatice, 48 years old)

It has been observed in all participants that the elderly who have received care are either living in the same house or in the same apartment/site with their first-degree relatives. This is consistent with the findings of Kalacioğlu and his friends (2003). In that study, it was stated that the elderly lived close to their relatives in the cities. However, close to the elderly, it can be sometimes difficult to provide the full care of the elderly. In this sense, there is a transition from a traditional elderly care model which is a model that girls or daughters-in-law take care of in the family to a new model. There are several reasons for the transition from the traditional elderly care model to the migrant care model. Among these are the difficulties of urban life and the lack of suitable housing architecture for elderly care. In addition, the changing position of women in the family and daily life practices and improvements in economic and welfare conditions can also be listed.

The change in family structure with urbanization also affects traditional long-term care. In this sense, the paid care worker model is increasingly becoming preferred. In this context, women who are in migrant status and take part in elderly care come to the fore. In families embracing this model, environmental pressure is felt in the first place. Some participants have stated that they had the first difficulty in handing over the elderly relatives who needed care to the migrant care worker.

“In fact, when I first heard this, I was a bit nervous, as if all these children, grandchildren, handing them into other hands, at first touched me and made me think. I felt the conscientious responsibility of their children and grandchildren not being able to take care of them and I was very sorry.” (Miss Sahih, 38 years old)

Some participants, who are aware that the responsibility of the family in elder care has changed, have stated that as a necessary consequence of this change there is a need for a long-term home-based elderly care. They have also indicated that especially in older ages when the level of fragility and dependence in the self-care and health care needs to increase, it is inevitable that long-term home-based elderly care should be employed for taking care of elderly:

“Then, of course, everyone has their own path and they cannot come to the children or the grandchildren, or they cannot come to care for him or her, cannot stay constant. It would be better if someone from outside looked after them” (Miss Sahih, 38 years old)

Some participants have stated that the first reaction of the elderly people to the caregiver was not to accept and refuse this situation. They have seemed to resent the choice of their children to receive care from outside. But in time they accept this by thinking that the migrant is a friend, companion at home: *“When my grandmother first heard about the migrant care worker, she resented it as I did. But in time he realized that it was better to have a friend who stayed with her.”* (Miss Sahih, 38 years old). It has been also discussed that these carers are adopted by the elderly who receive care and are seen as family members: *“Now she sees her as her daughter, as one of us, and wants us to reserve some for her when the meal is near to finish.”* (Miss Sahih, 38 years old).

“Mother (the elderly receiving care service) and everyone see me like relatives, and invite me for social organizations like wedding, etc. Sometimes I go, but sometimes I can't.” (Miss Mayıs, 49 years old).

In long-term home-based elderly care model, the emotional connection between the care worker and elderly get stronger and deeper with time. Nearly all participants have reported that the immigrant care workers who provide care have developed emotional ties with the elderly they provide care. All the migrant care participants have also stated that they call them as mothers: *“For the sake of respect for being old, they should be called mothers’* (Miss Şahika, 32 years old). To some participants, calling them like this helps the elderly to feel more valuable: *“I call her mother, darling, honey and sweetie. Calling as darling appeals to her much more.”* (Miss Nagihan, 27 years old). A participant, who is the daughter-in-law, have told me en passant that the immigrant care worker is more warm and friendly than his own children.

2. Reasons Why the Immigrant Carer Model Is Preferred in Long-Term Elderly Care

In the study, when the participants were asked why they preferred the migrants instead of the domestic and professional care workers to take care of the elderly for long periods of time, they listed various reasons. Among these reasons, migrant care workers’ sensitivity to the elderly, emotional bond with the elderly, hot and sympathetic to the elderly are among the foremost. In addition, the fact that migrant care workers are compassionate towards the elderly and respectful of their attitudes and behavior is considered to be the reason for preference. To them, cleanliness and, of course, their being more economical are also among the other reasons. Some participants have indicated that they are more sensitive with the feeling that migrant female care workers

live far from their countries and especially their families, making them more effective in their elderly care:

“Everyone has good relations with the foreign (migrant care worker). We prefer (the migrant care worker) because they are away from their homes, children, and parents and live separately (more in the migrant care worker) as a result of which they are sensitive towards others’ feelings.” (Miss Sahih, 38 years old)

Some participants have emphasized that people who work in this area, regardless of whether they are migrants or indigenous, should establish an emotional connection to their elderly as well as professionalism. This is also important for the elderly to feel comfortable and safe and for the care workers to cope with the difficulties of this work 7/24.

“When some sentimentality comes into being, it's better to be healthier, that's a necessary thing. It becomes an individual at home, an emotional attachment is formed between the elderly and relatives.” (Miss Hatice, 48 years old)

Some participants have stated that the care workers’ being confident, the style and the understanding of cleanliness were effective in the choice of the care worker. To some participants, migrant care workers are more likely to help the elderly in cleaning the house than domestic care workers. Migrant care workers are considered to be preferred because of their style towards the elderly and cleanliness: *“I opt for confidence, style, and cleanliness rather than being a native and educated.”* (Miss Sahih, 38 years old). Another participant attributes their preference to be warm, sympathetic and more compassionate.

“As (migrant care workers) often consider providing care for a patient and elderly as a job, they can be warmer, more sympathetic and compassionate to the elderly than the relatives of the elderly.” (Miss Hatice, 48 years old)

The choice of migrant care workers in long-term home-based elderly care affects economic, social and psychological factors. Personal characteristics of migrant and their status of the migrant in some cases make them advantageous to other local and trained care workers. Based on the fact that care is a whole, it should be noted that elderly care does not only relate to health but also covers personal care, home cleaning, and domestic work. Elderly care also includes psychological and social support. This framework makes the social and economic conditions of migrant care workers more advantageous than domestic care workers in elderly care.

3. Some Problems in Migrant Home-Based Care Model

In the study, in addition to the advantages of the long-term home-based elderly care model, problematic areas of this model were investigated. Participants talk about a number of disadvantages of this model. These problems are listed respectively as being uneducated and unskilled in elderly care, lack of experience and considering this job as temporary work.

All of the seven migrant participants, who take care of the elderly at home, have stated that they didn't receive any education on elderly care: *"I haven't had any education on elderly care."* (Miss Mayıs, 49 years old). Most of the participants have stated that they lack the necessary care training, especially in the field of health: *"We need more training on those issues like elderly diseases, etc."* (Miss Feride, 45 years old). One participant on this issue has said that the elderly, who had developed lung dementia disease infected due to the lack of adequate intervention by the untrained migrant care worker. Some participants have indicated that they can participate in elderly care courses provided by various institutions. A significant part of the

participants has stated that they can provide more efficient elderly care through education in care and health.

Most of the participants also have stated that they do this in traditional ways as they learned from their parents and that they don't have enough experience in elderly care: *"I have been working (in elderly care) for 7 months and I have never had any experience."* (Miss Şahika, 32 years old). Similarly, another participant has stated that he does not know the basic principles of elderly care: *"I have worked (at mother care). I don't know exactly what to do with mom's (elderly) care."* (Miss Feride, 45 years old). In addition, all the participants have indicated that migrant care workers consider elderly care as a temporary work, which is the main problem on this issue. All of the migrant participants, who provide long-term elderly care, have stated that they do the elderly care for a temporary period of time.

Education, in particular, could be given for the solutions of some of these problems, but they have indicated that the infrastructure is not ready. They also have stated that the time and conditions required for health and basic education in elder care are not appropriate. Because during the course of education and training, there is a need for someone who can take care of the elderly. It is also an important problem of how to create the time required for elderly care training.

"I need time for the course if the time is appropriate, why not. There's no time for training, health, etc. We can't leave the old lady alone, because she'd scared. That's why we can't go." (Miss Mayıs, 49 years old)

Table 1: The Reasons and Problems of Choosing Migrant Care Worker in Long-Term Home-Based Elderly Care

	Reasons Why the Migrant Care Worker Is Preferred:	Basic Problems in Migrant Care Worker Model:
1	Being sensitive to the elderly,	Being uneducated and unskilled in this job,

2	Giving confidence to the elderly and his family,	Not having sufficient job experience,
3	Being respectful to their attitudes and behaviors towards the elderly,	Considering this as a temporary work,
4	Caring for the personal care and cleanliness of the elderly,	Lack of work permit,
5	Being warm and sympathetic towards the elderly,	
6	Having high levels of compassion feelings,	
7	Developing emotional ties with the elderly,	
8	Of course, the fact that it is economic makes the migrant care worker model preferable.	

Source: It was obtained from interviews by the researcher.

The migrant care model is open to development in long-term home-based elderly care. It is thought that the results and suggestions made in the light of the above findings will provide a modest contribution to the field of sociology of aging.

CONCLUSION AND RECOMMENDATIONS

The family continues to play a leading role in long-term care. However, in some cases where family members have a lot to catch up on, migrant care workers become involved as intermediaries. That is because long-term elderly care cannot be resolved with the understanding of home-based care for some families (Klie, 2018: 91). For this, various application models are being developed. One of the long-term elderly care models at home is the long-term home-based elderly care.

In elderly care, the migrant care worker model acts as a kind of buffer mechanism. Since the family cannot fully fulfill its responsibilities towards the elderly in the changing family structure, this model serves as a supporting mechanism in

elderly care. In addition, this model serves as an intermediate formula for the transition from traditional elderly care to a professional/modern elderly care model. In Turkey, the migrant elderly care model seems to maintain its importance in the future vision of elderly care.

Elderly care in Turkey will become more professional in the future and experts in this business will increase. Until then, however, unqualified migrant care workers will continue to function as intermediaries. Bearing in mind this situation, migrant care workers need to be included in the formal elderly care system. In this context, these care workers must be included in the necessary training and certification programs. This is necessary to improve the quality of the elderly care service. This is because the older migrant elderly care model that is widely preferred is already having a variety of problems. Therefore, various improvements are needed in this regard. First of all, legal regulations related to the migrant care system should be made and the illegal working should be prevented. In addition, it may be advisable to employ mechanisms to assist elderly care during the day so that migrant care workers can participate in social activities and training courses.

The aim of this study is to provide a source of information for the elderly and their families who want to use this model and to introduce the care model in which migrant care workers are actively involved in the long-term home-based elderly care. More qualitative research is needed on the problems of migrant care workers and on the characteristics of which care workers must-have.

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