

## **PROBLEMS OF THE ELDERLY LIVING IN RURAL DISTRICTS IN TURKIYE AND ACTIONS TO BE TAKEN**

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### **Abstract**

Lifespan in the world has risen up with the upturn in health care services and the increase in people's consciousness in healthy lifestyle. On the other hand, decrease in fertility has led the governments to be prepared for the ageing of the population and social policies towards the elders and the services became diversified. Elderly population is accepted as one of the social values. Developing social policies where social inclusion is provided became one of the common aims of both developed and developing countries. Developed countries could produce more qualified and integrated elderly policies and put them into practice due to the sources they have. However, developing countries with limited sources follow policies prioritizing developed regions and big cities in order to reach their growth targets. These policies can prioritize active population. This condition can be seen in Türkiye which is a developing country. Urban affairs caused by rapid urbanization continue, investments toward agriculture and livestock are insufficient and meeting new technologies and developments are retarded in rural areas. Repulsive factors of the rural areas and the attractive factors of the urban areas direct particularly the young population into the cities while it increases the number of elders living in rural areas. On the other end of the scale, there are numerous problems elders face including physical, economic, social and technological ones. Accessibility obstacles in the first place, inadequacy of the health maintenance organizations, economic problems, accessibility issues to the charitable organizations are prominent problems. Within this study, information regarding social policies presented towards elders in Türkiye is given, the condition of the elders in Türkiye is scrutinized and the problems elders living in the rural areas face are mentioned. Within this scope, in the study which will be created with literature review, solutions to increase the elders' quality of life in rural areas. In this process, researches conducted in Türkiye are benefited form. The ultimate aim of the research is to overemphasize the importance of governments' concentrating on elderly policies and to increase the academic interest towards the problems of the elders living in rural areas.

**Key words:** elders, elderly policies, rural, urban, Türkiye

### **Introduction**

Decrease in fertility, increase in average life expectancy and improvements in healthcare services caused the ageing of the population in the world. This is because about 1 billion of the world's population is composed of the ones with 60 years old and above. Besides, the rate of increase in elderly population in the world is more than the general population growth which is around 2,1% and 1,2% (Mandıralıoğlu, 2010, s. 39). Moreover, it is estimated that estimated life expectancy of humans which is 75 years will increase to 81 in 2050 and within the underdeveloped countries, this number will increase from 64 to 76 (Gökçe, 2013, s. 87-

88). "For the elderly population rate within European Community (EU-28), an increase parallel to the world population is expected. It is anticipated to constitute 30% of the population in the year 2050" (Tutal, 2018: 491). In many countries like England, Germany and Italy, the population is ageing rapidly (Sengir, 1994, s. 22). The condition is similar among many developing countries. According to TÜİK Active Ageing Index 2024, the elderly population with the age of 65 and more which is 9,1% within the total population in 2019 increased to 10,6% in 2024. According to the estimations, this rate will be 13,5% in 2030, 17,9% in 2040, 27,0% in 2060, 33,4% in 2080 and 33,6% in 2100 (TÜİK, 2024). This situation forced the governments to diversify and develop the elderly policies.

Developing social policies aimed at elderly depends on many reasons. Economic factors other than demographic causes also diversify the elderly policies. Likewise, the transformation within the family structure are the social causes shaping elderly policies. 'Social state' principle of the government providing legitimacy on political and legal ground is also effective in the importance of elderly policies (Taşçı, 2010: 177). Variety and sufficiency of the services provided for the elder individuals show the level of development and recovery of the governments. Developed countries could produce more qualified and holistic elderly policies and implement them regarding the sources they have. Implications like caring services, social aids and various retirement systems are the ones seen frequently. This variety prevents the elders to live a passive life but provide them to experience a happier old age (Baran, 2011: 161; Ergin, 2016: 13-14).

Developing countries with limited means on the other hand pursue a policy prioritizing developed areas and big cities in order to reach their growth target. These policies might prioritize active population. In Türkiye, as a developing country, urbanisation continues rapidly. According to 2024 TÜİK Address Based Census results, the percentage of the people living in city or town centers increases to 93,4% while the percentage of people living in villages decreased from 7% to 6,6%. This condition is also caused by the insufficient investments towards agriculture and livestock and delayed introduction of new technologies and developments in rural areas. Domestic migrations head for cities and there occurs an urbanisation getting ahead of industrialisation. Problems in cities increase while more sources are required to solve those problems. On the other hand, the repulsive factors of the rural areas and attractive factors of the cities lead particularly the young population to live in the cities. According to the TÜİK 2024 Immigration Statistics results, the biggest immigration movement in size in Türkiye in 2024 occurred among the age group of 20-25 with 549 thousand 43 people (TÜİK, 2024). The number of elder people living in rural areas increase. In rural areas, there are many problems elderly people face including physical, economic, social and technological issues. Accessibility obstacles being in the first place, the insufficiency of the medical institutions, economic problems, being unable to reach medical institutions are among the prominent problems. With this study, information regarding social policies presented for the elderly in Türkiye is given, the situation of the elderly is examined and problems elderly face while living in rural areas are addressed. Within this scope, in this study which is formed by a wide literature research, solutions to increase the life quality of the elderly living in rural areas are developed.

### **Social Policies for the Elderly in Türkiye**

Türkiye has the characteristics protecting and valuing the elderly due to its historical and cultural background. At this point, the biggest responsibility is held by the family. However, the change in the family structure due to the urbanisation transformed the point of view

towards the elderly and the institutions and actors presenting service for the elderly increased.

When the issue is taken from a legal perspective, there are many regulations in the legislation of the country, particularly the Constitution, that shape the policies for the elderly. In the Article 10 of the 1982 Constitution, elders are involved within the other disadvantaged groups that require positive discrimination. Again, the government is held responsible for the protection of the elderly in Article 61 of the Constitution and legal regulations regulating the rights of the elderly are pointed out (1982 Constitution). With the ageing of the population and the increasing importance of the issue, legislation for the elderly has been expanded in Türkiye like many other countries. Civil Law and Turkish Penal Law introduce new laws particular for the elders over the age of 65 (Doğruer, 2015). The Ministry of Family and Social Policies is responsible for the services for the elderly at the central level according to the Decree Law no.633 on the Organisation and Duties of the Ministry of Family and Social Policies. The competent body within this ministry is Directorate general of services for persons with disabilities and the elderly. Directorate general of services for persons with disabilities and the elderly is responsible for all the preparation, application and observation phases of all the social policies (Tuncay, 2019: 3-4; Çolak & Özer, 2015: 119). Local governments also have duties, authority and responsibilities for the elderly. Municipalities are given the responsibility of building and administering domiciliary for the elders with the Municipal Law no 1580 dated 1980 for the first time. With the 2000s, local administration legislation is updated and the responsibilities of the local governments regarding the elders like the other disadvantaged groups are increased. Within the presentation of the Municipality Law no 5393 and Special Provincial Administration Law no 5302 includes the requirement to consider the condition of the elderly in the provision of the services. This provision asserts that significant work should be carried out regarding accessibility and comprehensiveness in local services. Law for Metropolitan Municipalities no 5216 gives duty, authority and responsibility for both the metropolitan municipality and the metropolitan sup-provincial municipality to run the social and cultural services aimed at the elders. Providing interdependence and participation on local level, applying programmes regarding the voluntary participation to increase efficiency, saving and productivity in services are in this context (DPT, 2007: 11; Çolak & Özer, 2015: 121; Yerli, 2017: 1285-1286; Özkan, 2017: 31).

Life satisfaction at every age is closely related with physical and psychological health, success in social relationships, healthy environmental conditions, social-demographic and socio-economic opportunities for everyone (Arun, 2008, s.324). Therefore, social policies towards elderly should have the necessary qualities to provide developments in all these fields. It is possible to classify social policies regarding the elderly in Türkiye as social security services and social services. Old age should be seen as a risk within social security services and the revenue loss of the elder individual should be compensated via the premium paid or aids without social contribution. The elder individual should be supported financially in this system that is applied as the old age insurance. On the social services dimension, Ministry of Family and Social Services is the competent body, and the Directorate General of Services for Persons with Disabilities and the Elderly is the responsible on central level. Institutional care services aimed at the elderly and nursing and rehabilitation services for old persons are provided. The physical, psychological and social needs of the elderly are covered by home care services (Umutlu & Epik, 2019: 38-39). Among the services provided by the local administrations aimed at elderly are building nursing homes for the helpless elders to take shelter, providing free

consultation and medicine, providing food, financial aid, fuel, home cleaning services, providing free or reduced public transportation rights and giving out food to homes. Besides, there are also some local governments providing medical home services and carrying out cinema and theatre activities. Some local authorities organise travel programmes aimed at elderly. However, practices like these generally occur in developed cities and towns and most of the time they are implemented by metropolitan municipalities with better opportunities (Tuncel & Uzun, 2019: 325). Old people residing in rural areas are in a more disadvantaged position. While the services provided are limited, people might face much more obstacles during the process to access these services (Çolak & Özer, 2015: 121).

### **The Situation of the Elderly in Türkiye**

According to the TÜİK 2025 data, Türkiye is a country with a population of 85 million 664 thousand 994 people and the rate of young population is 14,9% which is higher than the average of 27 EU countries, however, its population is ageing (TÜİK, 2025). According to 2024 TÜİK Active Ageing Index, there are 9 million 112 thousand 298 people in the age group of 65 and over and this number constitutes 10,6% of the total population. Active Ageing Index (AAI) which is developed with the contribution of United Nations Economic Commission for Europe (UNECE) is comprised of four components. These measure the levels of the elders to be able to participate the employment, participating in the community, living healthy and safely and to be able to have the capacity and suitable environment for active ageing. It takes a value between 0 and 100. High values of index and compounds show that the elderly in the society live a more active old age. Active Ageing Index in Türkiye is calculated as 29,7 for the year 2024. Employment compound index value is 27,6, community participation component index value is 12,5, independent healthy and safe life compound index is 65 and capacity and suitable environment to age actively compound index is 46,1. Active Ageing Index values by gender in EU member states are 38,5 for men and 35,3 for women. In Türkiye, on the other hand, it is calculated 34,5 for men and 25,3 for women. This data shows that Türkiye Active Ageing Index is lower than EU average. Countries with the highest EU Active Ageing Index values are Sweden, Netherlands and Denmark, the countries with the lowest values are Greece, Croatia and Romania respectively (TUIK, 2024). Information regarding the elderly according to TUIK 2023 Statistics and Elderly Data is as follows;

- It is determined that the elderly dependency ratio expressing the number of elderly people per hundred working age people is 15,0%. It is estimated that Elderly dependency ratio will increase.
- Poverty rate of the elderly people is 21,7%. Poverty rate of the elderly increase by year.
- Participation rate of the elderly to the work force is 12,2%. On the other hand, it is observed that 57,7% of the elderly population take place in agriculture, 32,1% in services, 7,3% in industry and 2,8% in construction. Participation rate in work force is 20,0% for men and 6,1% for women. The unemployment rate in elderly population is calculated as 2,7%.
- Sinop is the city with the highest number of elderly population, whereas Şırnak has the lowest.
- In Türkiye, 1 million 669 thousand 270 elderly people live alone. 74,4% of them are old women and 26,6% of them are old men. The city with the highest number of single houses with young people living in is Balıkesir.

- Educated elderly population increased. However, when the education level of the elderly population is examined, it is seen that there are crucial differences between the genders and that the ratio of the elderly male population is higher than the ratio of female population at all completed education levels.
- The ratio of people using internet among the age group of 65-74 is 40,7%. It is seen that the elderly male using internet (49,8%) is more than elderly women (32,7%).
- The ratio of individuals among the ones at the age of 65 or over doing regular physical activities, exercises or sports is 18,3%. While this ratio is 25,5% for men, it is 12,5% for women. The individuals at the age of 65 or over never doing any physical activities, exercises or sports is 51,1% (TÜİK, 2023);
- The rate of individuals at the age of 65 or more who feel themselves safe when they are home alone is 86,6%. This rate is calculated as 91,3% for men and 82,9% for women. The region where individuals feel themselves safe when home alone the most is Western Marmara Region. The region which this same rate is calculated as the lowest is South-eastern Anatolian Region.
- 85,7% of the elderly are able to use phones, 55,1% can shop by themselves, 61,1% can prepare their own food and 76,6% can clean their houses. Besides, it is pointed out that 72,8% can do laundry, 76,6% can travel, 85,5% can use their prescribed medicine on their own and 74,0% can deal with their financial issues like banking.
- According to TÜİK Elderly Profile Research 2023 results, the ratio of the elderly individuals who declared they were happy is 64,1%. The ratio of the men who declared to be happy is 64,9%, while it is 63,5% for women. The most important source of happiness of elderly individuals is health, love, success and money respectively.

### **The Problems of the Elderly living in Rural Areas and What to Do**

Although the population density, geographical structure, social and economic features of each country cause differences, the places far away from the city centre with less dense population which is made up of elderly mostly and which has a basic economics depending on agriculture is generally named as rural area (Avcı & Gözüm, 2018: 57). According to the TÜİK Address based Population Registration Results 2024, 93,4% of the population in Türkiye lives in city and town centers whereas 6,6% live in towns and villages and the majority of the inhabitants are elderly population (TÜİK, 2024). The fact that rural areas have a more disadvantaged position than cities in terms of educational institutions, employment areas, transportation infrastructure, health services and telecommunications is effective in young population's tendency to live in the cities.

Differences between life standards effect the individuals living in rural areas more negatively during their old age. Because old age is a period that the need for external support increases. While it is easier to reach the services and implementations presented by the central and local administrations for the elderly, it is more difficult in rural areas. Being far from administrative structure in rural areas makes access to resources more difficult and sometimes even impossible. Findings of the field study conducted by Uyanık and Yüksel 2018 support this. On the other hand, neighbourhood relationships are more developed in rural areas than in cities and this condition is an advantage for the elderly in rural areas (Kuddaş, 2022, s. 37; Uyanık & Yüksel, 2018: 120-122).

Old age, above all, expresses a physiological regression. Elderly individuals require medical services more than the young. Circulatory or respiratory illnesses or chronic illnesses such as

cancer are seen in elderly more than the young individuals. These sorts of illnesses require a continuous and regular medical follow up. However, there aren't sufficient medical institutions, medical equipment and medical staff in many rural areas (Avcı & Gözüm, 2018: 57). This causes the condition that elderly cannot receive sufficient medical service in their old ages. When the elderly individual is outside the social security system, it is much more difficult to meet their medical needs (Danış, 2009: 70). The study Yavuz et.al. conducted in İbradı on access to healthcare services for elderly people aged 65 or more support this. Compared to the individuals living in the city, level of access to the medical services is lower for the elderly individuals living in the rural areas. Regarding the findings, the elderly individuals living in İbradı which is a rural area have difficulties in accessing medical services. The number of doctors where they reside is insufficient and the distance to fully equipped medical institutions is long. During the periods when the weather conditions are negative, it is much more difficult to access the medical services (Yavuz, et al, 2023: 147). The findings of the field study conducted by Küçük in Konya Derebucak assert that the quality of the medical services provided for the elderly in rural areas is low (Küçük, 2016: 45).

Being away from active working life causes income loss and with the increased medical expenses, it might lead to poverty during old age period. Poverty influence the elderly living in the rural areas more deeply. The reason for this is that the main economy in rural areas is based on agriculture and livestock and the income varies (Çelenek, 2020. 2106). On the contrary, agriculture and livestock facilities require physical work. It is much more difficult and even impossible in some circumstances to work at jobs that require physical power during the old age period. Türkiye falls short in struggling against elderly poverty. Elderly individuals face discriminations and exclusions and the social service, social security and medical services provided by the government fall behind. This condition is felt much clearer in rural areas. The policies developed and implemented for the elderly eases but does not remove the choric poverty of the elderly (Sarı, 2021: 164-165). The study Tufan conducted in 2014 shows that nine out of every ten elderlies does not have an income. The findings of the filed study conducted on the elderly by Tamkoç et.al. in Satırlar village in Kalecik districk of Ankara city reveals that the elderly individuals living in rural areas primarily receive support from first degree relatives and neighbours in the struggle against poverty and includes information related with the difficulties they experience in accessing public services (Tamkoç et al, 2023: 793-807).

Due to ageing, need for external support to meet nutritional and care needs increase. There are different risk levels in meeting the nutritional and care needs of elderly individuals living in different residential areas (Vural et al, 2018: 6). Service sector in cities is developed. Likewise, the institutions providing services for the elderly are varied and high in number. It is possible to provide these services from numerous private sector institutions besides the public institutions and local governments. Services such as nursing homes, day care centers, home care services and hot meal supply are more prevalent in cities. In the rural areas, on the other hand, powerful filiation and neighbourhood relationships and having the access to natural food supplies is an advantage. Adopting the aging in place principle and not distancing the elderly individual from the place s/he resides is the ideal one. However, at this point meeting the continuous and regular nutrition and care needs should be provided with a rights based approach. Migration from rural areas to urban places increased the number of elderly living alone in rural areas and institutionalism could not be provided in meeting the nutrition and care needs of these elderly individuals (Çelenek, 2020. 2106). When the implications in Türkiye

are compared with the ones in other countries, they are quite limited (Tonbalak & Ongun, 2022: 439). Beyond the mercy of the immediate environment, public policies in rural areas should be put into practice immediately.

Accessibility is the most important life quality indicator of a place and participation of the elderly to daily life and social relationships is possible to the extent that the accessibility and availability of the structural environment (Tutal, 2018: 493). Since the elderly individuals would like to age in the house and environment they got used to, the houses and residences should be designed to be easily lived when they get older. The difficulties elderly individuals face in daily life are not caused by the aging of their bodies but the inaccessible design of the surroundings (Doğanay, 2025: 113-117). Physical and social infrastructure insufficiencies, deficiency of communication tools and limitation of means of transportation are present in rural areas in Türkiye. This condition causes the elderly individuals living in rural areas to experience inconveniences in meeting their health and care needs, difficulty in accessing supporting services and to get into difficulties in their daily lives (Duvan & Davran, 2023: 255-256). Local governments are the administrative units that are the closest to the public and they have an important function in detecting the needs and meeting them immediately. This function is also valid for the implication of local social policies aimed at elderly. Opening nursing homes for the elderly, providing them home care services, providing free medical examinations for the elderly, medicine, food and fuel assistance, providing free or discounted use of public transport vehicles are among the most prevalent practices of the municipalities. The function of local governments is also very important in providing environments that meet accessibility standards. However, in order for the local governments to provide these services, they need resources and staff. Most local administrations in Türkiye are small and medium scaled and they do not have sufficient pecuniary resources or staff. This situation is reflected in the variety and the quality of the services local governments provide. Most local administrations that are in rural areas have difficulties to provide even basic municipal services. This affects the services provided for the elderly in a negative way. Lack of technical brief, pecuniary resource and qualified personnel makes it difficult to create accessible places.

## **Result**

Old age is the natural result of flow of life. Besides, the place the humanity has reached shows that the population is ageing quickly. Developed countries encountered the ageing of the population earlier and enriched the social policies in the field of ageing. The accumulation, information, resources, technology the developed countries have and the interest they have in the field provided them to approach old age with a more holistic point of view and be successful in policies and practices. Developing countries on the other hand, are developing policies aimed at ageing of the population following the footsteps of developed countries within the limited resources they own.

Türkiye is a country with a young but ageing population. It has a cultural heritage which loves and values the elderly. However, urbanisation and the social transformation it brought created differences in the perception and care of the elderly. During the period we are in, policies aimed at elderly in Türkiye increase and become varied and new actors outside the family participate in. In Türkiye, which experienced a fast urbanisation, the immigration of the young population into the cities and their efforts to be integrated to city life increased the number of institutions and participants outside the family in elderly care. Moreover, there are various policies and practices that take the heterogenic structure and different needs of the elderly population into account. On the other hand, immigration to the cities increased the

number of elderly in rural areas and the policies and applications aimed at elderly living in rural areas became even more important.

With this study, it is aimed to draw attention to the problems of the elderly population that became intense in rural areas in Türkiye and to develop suggestions for the thing that can be done. 10,6% of the population in Türkiye consists of people aged 65 and over. It is estimated that this rate will increase in the future. With this expectation, the interest and resources transferred increase and this situation contributes to the development of policies for old persons. But on the other hand, the increase in the old population living in rural areas created the need to approach the elderly policies and practices aimed at rural areas with a greater importance and care.

Being far from administrative structuring in rural areas in Türkiye makes the access of the elderly population to the resources and services more difficult and it sometimes even becomes impossible. The number of elderly experiencing difficulties in accessing social services and health care are great in number. This situation affects the treatment process of the elderly in a negative way. There are no sufficient health care institutions, health equipment and medical staff in some places and elderly individuals cannot go to the city centers for medical purposes. Most of the time, they are sometimes even not aware of the rights they are given. The elderly living in rural areas have a lower degree of education compared to the elderly living in cities and for this reason they cannot take advantage of the opportunities technology provides. There are also some elderly individuals who cannot receive the necessary care and treatment since they do not have social security.

Another problem elderly people experience in rural areas is poverty. The fact that the economy is based on agriculture and livestock and that these jobs require physical strength makes elderly employment difficult. Moreover, the increase in medical expenses might also make the elderly poor. The external support in meeting nutrition and care needs due to ageing increase and as a result, the expenses increase. The migration of most of the young people to the cities and the scarcity of the institutions providing services to the elderly in total areas harden the condition of the poor elderly.

One other problem decreasing the quality of life in rural areas in Türkiye is the inaccessible places. Insufficient physical and social infrastructure, lack of communication tools, the limited means of transportation are very common in rural areas. This situation causes the elderly living in rural areas to experience problems in meeting their medical and care needs, difficulty in accessing supportive services and to face difficulties in their daily lives. Suggestions for what needs to be done in order to eliminate these and similar problems and to increase the life quality of the elders living in rural areas are as follows;

- Literacy education programmes should be organised thorough local governments and public education centers for the elderly who live in rural areas and are not literate but want to learn.
- The elderly people living in rural areas who volunteer should be given technology literacy training and the environments equipped with technology literacy training and environments equipped with the required technical infrastructure should be created. Thereby, they can use the applications they need in their lives independently
- Educations related with active and health ageing should be provided for the elderly living in rural areas. Besides, awareness for the elderly individuals should be raised about the rights they have, the services they are given and the policies.



- The elderly individuals without social security should be taken in the social security system and the elderly that require financial and social support should be detected and their needs should be met.
- Mobile medical treatment facilities should do medical check-ups and health services should be delivered to the homes of elderly people who continue their treatment at home.
- Elderly people who continue their treatments in medical institutions in city centers should be provided the means of transport to go for their regular check-ups and should be given free transportation services.
- The medication needs of the elderly living in rural areas should be met and their medication should be monitored to make sure that they do not disrupt.
- Nursing at home, hot meal, house cleaning etc. services should be provided for the elderly that require care at home. Elderly people who need should be supported with issues like shopping, banking and transactions with government institutions.
- Participation of the elderly in employment should be supported through cooperatives.
- Environments that the elderly individuals can socialise should be created and free trips to city centers or celebrations day activities should be organised.
- Public areas, buildings, residences and public transportation vehicles should be made to comply with accessibility standards.
- The voluntary elderly individuals in rural areas who want to be placed in nursing homes should be placed in nursing homes.
- The demands, suggestions and complaints of the elderly living in rural areas should be taken and policies and practices aimed at them should be developed and inspections should take place.
- Inspections for the officials and authorised institutions providing services to the elders should be carried out and disruptions of services should be avoided.
- Cooperation between central government, local government, private sector and non-governmental organisations should be increased.
- Academic studies on elderly living in rural areas should be increased and academic environments should be created to develop collaboration among scientists from different disciplines

#### KAYNAKÇA

ARUN, Ö. (2008). Yaşlı Bireylerin Türkiye Serüveni: Kaliteli Yaşlanma Üzerine Senaryolar, Gaziantep Üniversitesi Sosyal Bilimler Dergisi, 7(2)pp. 313-330.

AVCI, D. Y. & GÖZÜM, S. (2018), "Kırsal Alanda Yaşayan Yaşlılar için Sağlık Hizmeti Sunum Modelleri ve Tele-Sağlık". TJFMPC, 12(1)pp: 56-67. DOI: 10.21763/tjfmpe.400067

BARAN, A. G. (2011), "Aile ve Yaşlanma", *Aile Sosyolojisi*, Ed: Kasapoğlu, A. & Karkiner, N., Eskişehir: AÖF Yayınları, pp: 134-165.

ÇELENK, M. (2020), "Yoksulluğun Kırsaldaki Görünümleri: Ordu İlinde Yalnız Yaşayan Yaşlılar", *Journal Of Social, Humanities and Administrative Sciences*, 6(34), pp: 2104-2109.

ÇOLAK, M. & ÖZER, Y. E. (2015), "Sosyal Politika Anlamında Aktif Yaşlanma Politikalarının Ulusal ve Yerel Düzeydeki Analizi", *Elektronik Sosyal Bilimler Dergisi*, 14(55), pp: 115-124.

DANIŞ, M. Z. (2009). "Türkiye'de Yaşlı Nüfusun Yalnızlık ve Yoksulluk Durumları ve Sosyal Hizmet Uygulamaları Açısından Bazı Çıkarımlar". *Toplum ve Sosyal Hizmet Dergisi*, 20(1), pp: 67-84.

DPT, (2007), Türkiye'de Yaşlıların Durumu ve Yaşlanma Ulusal Eylem Planı, Sosyal Sektörler ve Koordinasyon Genel Müdürlüğü, Yayın No DPT: 2741.

DOĞANAY, G. (2025), "Coğrafi Özelliklerin Yaşlı Bireylerin Gündelik Yaşamları Üzerine Etkileri", *Eastern Geographical Review*, 30(53), pp:112-125.

DOĞRUER, A. (2015), "Yaşlılık ve Hukuk", Erişim Adresi: <https://yaslihaklaridernegi.org/yaslilik-ve-hukuk/> Erişim Tarihi: 09.05. 2024.

DUVAN, K. E. & DAVRAN, M. K. (2023) Yaşlılık Olgusu ve Kırsal Alanda Yaşlılık, Ankara: İKSAD Yayınevi.

ERGİN, İ. (2016), "Yaşlı Sağlığı ve Sosyal Politikalarda Kamusal Destek Ne Durumda? Türkiye ve Dünyada Mevcut Durum", *Ege Tıp Dergisi*, 55, pp: 12-18.

GÖKÇE, B. (2013), Türkiye'nin Toplumsal Yapısı ve Toplumsal Kurumlar, Ankara: Savaş Yayınevi.

KUDDAŞ, N. B. (2022). Kırsal Bölgelerde Sosyal Kalkınma ve Sosyal Hizmet, Ankara Üniversitesi Sağlık Bilimleri Enstitüsü Sosyal Hizmet Anabilim Dalı Yayımlanmamış Doktora Tezi, Ankara.

KÜÇÜK, M. (2016), "Kırsal Alanlarda Yaşlı Yerel Halkın Karşılaştığı Sorunlar: Konya İli Derebucak İlçesi Üzerine Bir İnceleme", *Afyon Kocatepe Üniversitesi Sosyal Bilimler Dergisi*, 18(1), pp: 29-48, DOI NO: 10.5578/jss.14920

MANDIRALIOĞLU, A. (2010), "Dünya ve Türkiye'de Yaşlıların Demografik Özellikleri", *Ege Tıp Dergisi*, 49(3), pp: 39-45.

ÖZKAN, M. (2017), Yaşlılarda Mekan Aidieti: Yaşlılık ve Mekan İlişkisine Sosyolojik Bakış, Selçuk Üniversitesi Sosyal Bilimler Enstitüsü Sosyoloji Anabilim Dalı Yayımlanmamış Yüksek Lisans Tezi, Konya.

SARI, H. K. (2021), "Yaşlılık ve Sosyal Hizmet İlişkisi Bağlamında Yaşlılık ve Yoksulluk", *Journal of Social Sciences and Humanities*, 5(1), pp: 159-167,

SENGİR, Ü. (1994), "Üçüncü Yaş Turizmi ve Alınacak Sağlık Tedbirlerinin Bu Turizm Üzerindeki Etkileri", İstanbul Üniversitesi İktisat Fakültesi Sosyal Bilimler Enstitüsü Turizm Anabilim Dalı Yayımlanmamış Yüksek Lisans Tezi, İstanbul.

TAMKOÇ, B., SÜRSAVUR, D. L., ERDEMİR, T. A. & KARATAŞ, K. (2023), "Kırsalda Yaşayan Yaşlıların Yoksulluk Durumları ve Yoksullukla Baş Etme Biçimleri: Satılar Köyü Örneği". *Toplum ve Sosyal Hizmet Dergisi*, 34(4), pp: 791-813. DOI: 10.33417/tsh.1195061

TAŞCI, F. (2010), "Yaşlılara Yönelik Sosyal Politikalar: İsveç, Almanya, İngiltere ve İtalya Örnekleri", *Çalışma ve Toplum*, 1, pp: 175-202.

TONBALAK, K & ONGUN, D. (2022), "Yaşlılıkta Beslenme Durumunu Etkileyen Engellilik Sorunlarına Karşı Uygulanan Beslenme Çözümleri", *İzmir Kâtip Çelebi Üniversitesi Sağlık Bilimleri Fakültesi Dergisi*, 7(2), pp: 435-440.

TUFAN, İ. (2014). Türkiye'de yaşlılığın yapısal değişimi. İstanbul: Koç Üniversitesi Yayınları.

TUNCAY, T. (2019), “Yaşlılık Mevzuatı”, Sosyal Hizmet Mevzuatı, Atatürk Üniversitesi Açıköğretim Fakültesi Yayını.

TUNCEL, G. & UZUN, H. (2019), “Türkiye’de Yaşlılara Yönelik Sosyal Politikalar Üzerine Bir İnceleme”, Fırat Üniversitesi İİBF Uluslararası İktisadi ve İdari Bilimler Dergisi, 3(2), pp: 309-334.

TUTAL, O. (2018), “Yaşlılık, Yaşam Çevresi ve Evrensel Tasarım”, *Yaşlılık: Disiplinlerarası Yaklaşım, Sorunlar, Çözümler*, Ankara: Nobel Akademik Yayıncılık.

TÜİK, (2023) İstatistiklerle Yaşlılar 2023, Erişim Adresi: <https://data.tuik.gov.tr/Bulten/Index?p=Istatistiklerle-Yasli-lar-2023-53710> Erişim Tarihi: 30.07.2025

TÜİK, (2023), Türkiye Yaşlı Profil Araştırması 2023, Erişim Adresi: <https://data.tuik.gov.tr/Bulten/Index?p=Turkiye-Yasli-Profil-Arastirmasi-2023-53809> Erişim Tarihi: 30.07.2025

TÜİK, (2024) TÜİK Adrese Dayalı Nüfus Kayıt Sonuçları 2024, Erişim Adresi: <https://data.tuik.gov.tr/Bulten/Index?p=Adrese-Dayali-Nufus-Kayit-Sistemi-Sonuclari-2024-53783> Erişim Tarihi: 30.07.2025

TÜİK, (2024) TÜİK İç Göç İstatistikleri 2024, Erişim Adresi: <https://data.tuik.gov.tr/Bulten/Index?p=Ic-Goc-Istatistikleri-2024-54082> Erişim Tarihi: 30.07.2025

TÜİK, (2024) Aktif Yaşlanma Endeksi 2024, Erişim Adresi: <https://data.tuik.gov.tr/Bulten/Index?p=Aktif-Yaslanma-Endeksi-2024-57937> Erişim Tarihi: 30.07.2025.

TÜİK, (2025) Erişim Adresi: <https://data.tuik.gov.tr/Bulten/Index?p=Dunya-Nufus-Gunu-2025-54078> Erişim Tarihi: 30.07.2025.

Türkiye Cumhuriyeti 1982 Anayasası, (7.11.1982), (Kanun No: 2709) Erişim Adresi: <https://www.mevzuat.gov.tr/MevzuatMetin/1.5.2709.pdf> Erişim Tarihi: 30.07.2025.

UMUTLU, S. & EPIK, T. M. (2019), “Türkiye’de Yaşlı Nüfus ve Sosyal Politika Uygulamaları”, Sosyal ve Beşeri Bilimler Dergisi, 11(1), pp: 29-43.

UYANIK, Y. & YÜKSEL, A. (2018), “Yaşlılara Yönelik Uygulanan Sosyal Politikaların Kırsal Bir Bölgede Yaşayan Yaşlılara Ulaşma Durumunun İncelenmesi”, İş ve Hayat Dergisi, 4(7), pp: 120-137.

VURAL, K. V., ZENGİN, G. & İNCİ, F. H. (2018), “Üç Farklı Yerleşim Alanında Yaşlıların Beslenme Durumunun İncelenmesi”, İzmir Kâtip Çelebi Üniversitesi Sağlık Bilimleri Fakültesi Dergisi, 3(2), pp: 1-7.

YAVUZ, M., ÖZGÜR, Ö., ÖZGÜN, B. G., (2023), “Kırda ve kentte 65 Yaş ve Üzeri Bireylerin Sağlık Hizmetlerine Ulaşım Faktörünün Değerlendirilmesi: Nitel Araştırma”. Türkiye Klinikleri Sağlık Bilimleri Dergisi, 9(1), pp:147-55.

YERLİ, G. (2017), “Yaşlılık Dönemi Özellikleri ve Yaşlılara Yönelik Sosyal Hizmetler”, Uluslararası Sosyal Araştırmalar Dergisi, 10(52), pp: 1278-1287.