

**Arzu TURKMEN***Southern University (Institute of Management Business and Law)  
Bandirma, Turkey  
arzu.turkmen@hotmail.com*

# Determining Levels of Daily Activity and Life Quality of Elder Individuals: Example of the Private Bisev Nursing Home

**ABSTRACT**

This study is initiated for the purpose of determination the factors affecting daily life activities and life quality of elder individuals residing in the Çanakkale Province, Biga County Private Bisev Nursing Home as well as to put instructive suggestions to corporations in order to develop health care of elder individuals. Questionnaire method was applied through face to face discussions with elder individuals (n=58 persons). Statistical analysis was conducted on SPSS Clementine 12.0 package program. Descriptive analysis has been performed for analysis data as well as cross tables have been formed through frequency distribution of participants included in research, health problems they experience, and variance analysis between disease types and different characteristics. Consequently: average of elder individuals residing at nursing home is  $\bar{x} = 78$  and they are included in the group of advanced ages. 89,7% of the elder individuals are covered with social security, 51,7% have income. Activity rate of the elder individuals that they could independently makes 74%, auxiliary means used mostly by elder individuals are determined as glasses and walking frames or similar. The rate of individuals not performing any physical activity is high and rate of elder individuals experiencing no health problem makes 81%. The rate of elder individuals benefiting from care service in the nursing home makes 87,9%. 74,1% of the elder individuals are willing to live in nursing home. One of the conclusions drawing utmost attention is that even though all of the elder individuals residing at nursing home have children, they prefer to remain in nursing home.

**Key words:** *Elder, daily activity, life quality, nursing home.*

*«One of the most distressing situations a man could face is seeing that one day we are in the epilogue of our lives composed of poor working moments, our faces are filled with wrinkles and our hair turned into grey, becoming aware that we can utilize only very small part of our abilities and talents that we have gained in the previous years».*

**V. W. Burrow****Preface**

Old age, a phase that any living creature shall experience within the cycle of life, has different meaning for any individual. Failure to establish unity of universal complete meaning is caused by the dimension of subjectivity, which may be indicated as the heritage factors of individuals, harsh living environment, nutrition conditions, having a disease that leaves pain or disability, painful and traumatic experiences an individual had, physiological, psychological and sociological life differences and requirements, geographical locations lived in, value judgments and cultural factors of the community they belong to (Arpacı, 2003). According to the World Health Organization, the term «old age» means «the ability of an individual to adapt the environmental factors» (WHO). According to the definition made by the Geriatrics Magazine in 2014 old age is the ability of any individual to adapt the environmental factors and stabilization potential between internal and external factors of the organism reduce; possibility of death increases, this is purported as «ageing» (Akgün, Bakar & Budakoğlu, 2004). Normal ageing phase is defined as changes in anatomical structure and physiological functions that occur in time without having any diseases (Güler, 1998). Old age is a process that must be evaluated with physical, psychological and social aspects. When evaluated in such aspects, the old age indicates the changes seen together with chronological age from physiologic point of view (Birren, 1989). When we consider the general characteristics of biological ageing, we see that there are increased mortality, changes occurring on tissue, biochemical, increased susceptibility and sensitivity to diseases, reduced physiological changes through ageing (Arpacı, 2005).

As a result of this and similar histological changes occurred on tissue and cells, it is observed that functions of any organs are decreasing and chronic diseases are increasing (hypertension, diabetes mellitus, coronary artery disease, osteoporosis, cerebral vascular diseases). It lowers the life quality of elder individuals and reduces their daily activities (Arpacı, 2005; Kurt, Beyaztaş, Erkol). In psychological aspect, old age expresses changes in adaptation capacity of a person in aspect of perception, learning, psychomotor, problem solving and personality features as the chronological age advances (Birren, 1982). However in sociological aspect, old age related to behaviour expected from certain age group in a community and values that the community gives to such group (Birren, 1982). In socio-economical aspect, elder population has a role of both affecting and affected. In 1963, the World Health Organization has divided the old age period in four categories; middle old age (45-59 ages), old age (60-74 ages), advanced old age (75-89 ages), very old age (90 and older). In aspect of work life, old age is expressed as a period of retirement, during which the work performance and efficiency reduce and generally such limit is accepted as the age from 60 to 65 (Arpacı, 2005; Toprak, Soydal, Bal, 2002). Communities are also evaluated in ageing categories. It might be mentioned that the community

with a high rate of individuals in 60-65 age group in general population, is ageing. Young Community: is a community having less than 4% of the age group older than 65 years. Mature Community: is a community having 4-7% of the age group older than 65 years. Old Community: is a community having 8-10% of the age group older than 65 years. Very Old Community: is a community having more than 10% of the age group older than 65 years (Arpacı, 2005). According to definition of the United Nations being the population of elder between the rates of 8% and 10% in a country means that the population of that country is «old», however being over 10%, means that the population of that country is «very old» (Turkish Statistical Institute, 2014). Today, increasing the share of old population among the general population carried the care of elder individuals to universal dimension. As reasons of changes in the rate of old population, it may be indicated that the rate of fertility reduces, scientific and technological developments in health sector, reduction of death caused by diseases, early diagnosis, ability to prevent infections, extension of life cycle expected at birth, nutrition, increase of education level and life quality of people (Aylaz, Güneş, Karaoğlu, 2005). Old population in our country exhibits rapid increase as compared to population in other age groups. In Turkey, while the total population increase rate made 13,7% in 2013, increase rate of old population is almost 3 times of this figure as 36,2%. According to population projections the rate of old population (65 and older) in 2013 made 7,7%, however it is expected that such rate shall increase to 10,2% in 2023, to 20,8% in 2050 and to 27,7% in 2075 (Turkish Statistical Institute, 2014). Numerous factors such as changes occurred in family structure due to urbanization, reduced intra-family relations, including active work life and migration of young people to cities for the purpose of education have created infrastructure for the care problems of elder individuals within the family (Akdemir, 1992). Problems encountered by elder individuals may be considered as the work age remained in past, lack of financial power, cultural problems, difficulties with accessing routing communal services, generation problems, lonesomeness, lack of communication, lack of love (Tomanbay). Old age is a long period extending from birth to death as well as a natural law that we cannot prevent. It is highly possible for each elder individual to experience physiologic, pathologic changes and to encounter psychosomatic diseases. As the life cycle extends, chronic diseases, illnesses based on stress and disabilities appear accordingly. This condition decreases the life quality of elder individuals, reduces their daily activities and makes elder individuals to depend on other people. It is vitally important for individuals and communities to determine factors that decrease the life quality and to take preventive measures in respect of risk groups (Sönmez, 2007).

### **Object and Significance of the Research**

Increasing the number of old population of any country over 7% within total population, is evidencing that this country is progressing to become an old community (Arpacı, 2005). Rate of old population gradually increases both in our country and in the world. Parallel with this increase, problems on numerous areas emerge. This study is initiated for the purpose of determining the factors that affect daily life activities and life quality of elder individuals residing in Private Bisev Nursing Home as well as putting instructive suggestions to corporations in order to develop health caring of elder individuals.

### **Population and Sample**

The study has been is conducted in the period between 16.01.2015 – 23.01.2015 in Çanakkale Province, Biga County Private Bisev Nursing Home, and 62 people (N=62) residing at the Private Bisev Nursing Home have created our population. No questionnaire has been made for 2 persons having severe diseases and for 2 persons who did not want to participate, in total 58 people (n=58) were included in our sample.

### **Methodology**

Questionnaire method has been applied through face to face discussion technique with elder individuals residing at the Çanakkal Province, Biga County Private Bisev Nursing Home. Questionnaire has been composed of five sections: arranged as first section personal details: age, gender, marital status, educational status, income status, social security status, used auxiliary means and children status; the second section, A: questions relating to determination of recreational and social status of elder individuals; the third section, B: opinions highlighting the satisfaction towards the institution; the forth section, C: expressions relating to independence levels regarding to daily activities of elder individuals; the fifth section, D: disease types. The Likert type scale has been applied for the B and C sections of the questionnaire.

### **Applied Analysis Techniques**

After controlling the collected data from site, they have been transferred to computer media and statistical analysis was conducted with SPSS Clementine 12.0 Package program. Descriptive analysis was performed for data analysis as well as cross tables have been formed through frequency distribution of participants included in the research, health problems they experience, and variance analysis between disease types and different characteristics.

### **Findings**

**Table 1.**  
**Age Group**

	<i>Statistic</i>	
	<b>Average</b>	
<i>Age</i>	<b>Average</b>	78,2759
	<b>Median</b>	75,732
	<b>Variance</b>	59,256
	<b>Standard Deviation</b>	7,69779
	<b>Minimum</b>	60,00-69,00
	<b>Maximum</b>	90,00 and over
	<b>Kurtosis</b>	-0,348
	<b>Skewness</b>	-0,929

**Table 2.**  
**Distribution of Demographic Characteristics**

	<i>Valid</i>	<i>Frequency</i>	<i>%</i>
<b>Age</b>	60-69 age	9	15,5
	70-79 age	23	39,7
	80-89 age	22	37,9
	90 and older	4	6,9
	Total	58	100
<b>Marital Status</b>	Married	9	15,5
	Single	11	19
	Widow/Divorced	38	65,5
	Total	58	100
<b>Number of Children</b>	One	11	19
	Two	26	44,8
	Three	10	17,2
	Four	11	19
	Total	58	100
<b>Educational Status</b>	Illiterate	8	13,8
	Literate	7	12,1
	Primary School	32	55,2
	Secondary School	1	1,7
	High school	6	10,3
	Vocational School	1	1,7
	University	3	5,2
	Total	58	100
<b>Income Status</b>	I have no income	8	13,8
	1000 TL and below	19	32,8
	1001-2000 TL	30	51,7
	3000 TL and above	1	1,7
	Total	58	100
<b>Social Security</b>	I have no social security	6	10,3
	Retirement Fund	11	19
	SSI	29	50
	Social Security Organization For Artisans And the Self-Employed	9	15,5
	Green Card	3	5,2
	Total	58	100
<b>Auxiliary Means Used</b>	I do not utilize	8	13,8
	Glasses	20	34,5
	Crane	18	31
	Hearing Device	1	1,7
	I utilize more than one	11	19
	Total	58	100

The number of the people attending to questionnaire is  $\bar{x} = 78$ . It has been determined that the lowest age interval is 60-69 and the highest age interval is 90 and over. Sex composition of individuals who participates in the study: male – 79,3%, female – 20,7%. When the marital status of elder individuals has been reviewed, it became clear that 38% of them have lost their partner (widow) or were divorced. The rate of individuals who have two children makes 44,8%. The most interesting result is that almost all of the elder individuals who are remaining in the nursing home have children. When the educational status of the persons participated in the study has been reviewed, it became clear that among the latest graduated schools as top three are primary school (55,2%), literate (12,1%), high school (10,3%). It has been specified that monthly income of participants in the study is between 1001-2000 TL, the rate of individuals having no income makes 13,8%.

It has been determined that 89,7% of elder individuals residing at the institutions where the study has been conducted are covered with social security, and the institution covering social security is heavily Social Security Institution, 50%. When the auxiliary mean of the elder individuals participated in the study has been reviewed it became clear the glasses (34,5%) and walking frames or similar (31%) took the lead in first two ranks, the rate of individuals specified that they are not using any auxiliary mean made 13,8%.

**Table 3.**  
**Social Activity Status of Elder Individuals**

	Valid	Frequency	%
<b>Does anyone visit you? (Children,.)</b>	Yes	33	56,9
	No	25	43,1
	Total	58	100
<b>What frequency your visitors come by?</b>	Once in a week	4	6,9
	Once in a month	8	13,8
	Once in three months	15	25,9
	Once in a year	27	46,6
	They do not come at all	4	6,9
	Total	58	100
<b>Where would you like to live?</b>	With my children	1	1,7
	In my own house	11	19
	In Nursing Home	43	74,1
	Does not matter where I live	3	5,2
	Total	58	100
<b>Which care services you benefit from your institution?</b>	Care Services	51	87,9
	Psychological Support	2	3,4
	All	4	6,9
	None	1	1,7
	Total	58	100
<b>Do you have any health problem?</b>	Yes	11	19
	No	47	81
	Total	58	100
<b>Do you do physical activity or exercise?</b>	I frequently do	2	3,4
	I do	9	15,5
	I occasionally do	9	15,5
	I do not	18	31
	I never do	20	34,5
	Total	58	100
<b>Physical activity and exercises done</b>	Walking	25	43,1
	Apparatus Gymnastic	2	3,4
	I never do	27	46,6
	I do several in combination	4	6,9
	Total	58	100
<b>Which activities would you like to perform if you had a chance?</b>	Hand crafting	2	3,4
	Garden works	10	17,2
	Watching TV	12	20,7
	Chatting with friends	7	12,1
	Listening music	3	5,2
	Card, chequer, backgammon, chess playing	2	3,4
	Others	8	13,8
	I do several of them	14	24,1
	Total	58	100
<b>What do you do in general other than the daily activities you perform?</b>	I sleep	20	34,5
	I watch TV	12	20,7
	I read book / magazine	5	8,6
	I work with my hobbies	1	1,7
	I do walking	11	19
	All	7	12,1
	I listen music	2	3,4
	Total	58	100

On the question if there anyone visiting you, 56,9 % of elder individuals residing at the nursing home answered «yes», 43,1% answered «no». When the visit frequency has been analysed, it became clear that visits occur with the frequency of once in a year (46,6%), once in three months (25,9%), once in a month (13,8%), once in a week (6,9%) and no visit at all. When the places that the elder individuals are willing to live have been reviewed it became clear that 19% of them are willing to live in their own homes, 74,1% are willing to remain in the nursing home. 87,9% of the elder individuals residing at the institution receive caring service from the institution. When the item whether they have any health problem or not has been reviewed, in 81% of the time the answer was «no». When physical activity and exercises of persons have been reviewed, 46,6% of respondents answered «I never do», however physical activity mostly performed in walking (46,6%). Among types of physical activities that most of elder individuals are willing to do: watching television (20,7%), garden works (17,2%), chatting with friends (12,1%). Among activities that elder individuals perform apart from daily works: «I sleep» (20%), «I watch television» (12%), «I walk» (11%). 4 of 18 questions in the Likert- type related to satisfaction with the Private Bisev Nursing Home institution.

When the obtained results have been reviewed, the rate of elder individuals responded «I agree» for the phrase «The service provided by the institution is sufficient» made 89,7%; the rate of elder individuals responded «I agree» for the phrase «I am happy for the care personnel of the institution» made 93,1%; the rate of elder individuals responded «I agree» for the phrase «I do not experience problems with my friends at the institution» made 91,4%; the rate of elder individuals responded «I agree» for the phrase «my privacy is protected» made 94,8%; the rate of elder individuals responded «I agree» for the phrase «I can organize my room as I desire» made 91,4%; the rate of elder individuals responded «I agree» for the phrase «Food are satisfying and delicious» made 94,8%; the rate of elder individuals responded as «I agree» for the phrase «bathrooms are clean» made 96,6%; the rate of elder individuals responded «I agree» for the phrase «The number of the bathrooms is sufficient» made 57%. The rate of the individuals responded «I agree» for the phrase «Laundry services are sufficient» made 98,3%; the rate of individuals responded «I agree» for the phrase «Visitor seeing rooms are sufficient» made 98,3%; the rate of individuals responded «I agree» for the phrase «Tools are sufficient for daily activities» made 91,4%; the rate of individuals responded «I agree» for the phrase «The number of green areas and gardens is sufficient» made 96,6%; the rate of individuals responded «I agree» for the phrase «safety is sufficient» made 84,5%; the rate of individuals responded «I agree» for the phrase «Social requirements of the institution are sufficient» made 82,8%; the rate of individuals responded «I agree» for the phrase «My institution is distant from the city centre» made 82,6%; the rate of individuals responded «I agree» for the phrase «My institution is distant from medical institutions» made 43,1%.

**Table 4.**  
**Relationship Between Gender and the Satisfaction Levels for the Institution**

Health services my institution has provided is sufficient * Gender Cross tabulation			Gender		Total
			Male	Female	
Health services my institution has provided is sufficient	I have no idea	Count	2	0	2
		% of Total	3,40%	0,00%	3,40%
	I agree	Count	41	11	52
		% of Total	70,70%	19,00%	89,70%
	Neither I agree nor I do not agree	Count	3	1	4
		% of Total	5,20%	1,70%	6,90%
Total	Count	46	12	58	
	% of Total	79,30%	20,70%	100,00%	
I am satisfied with the care personnel of my institution * Gender Cross tabulation			Gender		Total
			Male	Female	
I am satisfied with the care personnel of my institution	I have no idea	Count	1	0	1
		% of Total	1,70%	0,00%	1,70%
	I agree	Count	43	11	54
		% of Total	74,10%	19,00%	93,10%
	Neither I agree nor I do not agree	Count	2	1	3
		% of Total	3,40%	1,70%	5,20%
Total	Count	46	12	58	
	% of Total	79,30%	20,70%	100,00%	
I do not experience problems with my friends in the institution * Gender Cross tabulation			Gender		Total
			Male	Female	
I do not experience problems with my friends in the institution	I have no idea	Count	2	1	3
		% of Total	3,40%	1,70%	5,20%
	I agree	Count	38	10	48
		% of Total	65,50%	17,20%	82,80%
	Neither I agree nor I do not agree	Count	5	1	6
		% of Total	8,60%	1,70%	10,30%
	I do not agree	Count	1	0	1
		% of Total	1,70%	0,00%	1,70%
Total	Count	46	12	58	
	% of Total	79,30%	20,70%	100,00%	
I am happy with my room at the institution * Gender Cross tabulation			Gender		Total
			Male	Female	
I am happy with my room at the institution	I have no idea	Count	2	0	2
		% of Total	3,40%	0,00%	3,40%
	I agree	Count	41	12	53
		% of Total	70,70%	20,70%	91,40%
	Neither I agree nor I do not agree	Count	3	0	3
		% of Total	5,20%	0,00%	5,20%
Total	Count	46	12	58	
	% of Total	79,30%	20,70%	100,00%	

I do not experience problem with my room mate * Gender Cross tabulation			Gender		Total	
			Male	Female		
I do not experience problem with my room mate	I have no idea	Count	13	3	16	
		% of Total	22,40%	5,20%	27,60%	
	I agree	Count	30	9	39	
		% of Total	51,70%	15,50%	67,20%	
	Neither I agree nor I do not agree	Count	3	0	3	
		% of Total	5,20%	0,00%	5,20%	
Total		Count	46	12	58	
		% of Total	79,30%	20,70%	100,00%	
My privacy is protected * Gender Cross tabulation			Gender		Total	
			Male	Female		
My privacy is protected	I have no idea	Count	1	0	1	
		% of Total	1,70%	0,00%	1,70%	
	I agree	Count	43	12	55	
		% of Total	74,10%	20,70%	94,80%	
	Neither I agree nor I do not agree	Count	2	0	2	
		% of Total	3,40%	0,00%	3,40%	
Total		Count	46	12	58	
		% of Total	79,30%	20,70%	100,00%	
I can organize my room as I desire * Gender Cross tabulation			Gender		Total	
			Male	Female		
I can organize my room as I desire	I agree	Count	41	12	53	
		% of Total	70,70%	20,70%	91,40%	
	Neither I agree nor I do not agree	Count	4	0	4	
		% of Total	6,90%	0,00%	6,90%	
	I do not agree	Count	1	0	1	
		% of Total	1,70%	0,00%	1,70%	
Total		Count	46	12	58	
		% of Total	79,30%	20,70%	100,00%	
Foods are sufficient and delicious * Gender Cross tabulation			Gender		Total	
			Male	Female		
Foods are sufficient and delicious	I agree	Count	43	12	55	
		% of Total	74,10%	20,70%	94,80%	
	Neither I agree nor I do not agree	Count	2	0	2	
		% of Total	3,40%	0,00%	3,40%	
	I do not agree	Count	1	0	1	
		% of Total	1,70%	0,00%	1,70%	
Total		Count	46	12	58	
		% of Total	79,30%	20,70%	100,00%	
Bathrooms are clean * Gender Cross tabulation			Gender		Total	
			Male	Female		
Bathrooms are clean	I agree	Count	44	12	56	
		% of Total	75,90%	20,70%	96,60%	
	Neither I agree nor I do not agree	Count	2	0	2	
		% of Total	3,40%	0,00%	3,40%	
	Total		Count	46	12	58
			% of Total	79,30%	20,70%	100,00%
Number of bathrooms is sufficient * Gender Cross tabulation			Gender		Total	
			Male	Female		
Number of bathrooms is sufficient	I agree	Count	45	12	57	
		% of Total	77,60%	20,70%	98,30%	
	Neither I agree nor I do not agree	Count	1	0	1	
		% of Total	1,70%	0,00%	1,70%	
	Total		Count	46	12	58
			% of Total	79,30%	20,70%	100,00%
Laundry services are sufficient * Gender Cross tabulation			Gender		Total	
			Male	Female		
Laundry services are sufficient	I agree	Count	45	12	57	
		% of Total	77,60%	20,70%	98,30%	
	Neither I agree nor I do not agree	Count	1	0	1	
		% of Total	1,70%	0,00%	1,70%	
	Total		Count	46	12	58
			% of Total	79,30%	20,70%	100,00%
Visitor rooms are sufficient * Gender Cross tabulation			Gender		Total	
			Male	Female		
Visitor rooms are sufficient	I agree	Count	45	12	57	
		% of Total	77,60%	20,70%	98,30%	
	Neither I agree nor I do not agree	Count	1	0	1	
		% of Total	1,70%	0,00%	1,70%	
	Total		Count	46	12	58
			% of Total	79,30%	20,70%	100,00%

Tools for daily activities are sufficient * Gender Cross tabulation			Gender		Total	
			Male	Female		
Tools for daily activities are sufficient	I have no idea	Count	1	0	1	
		% of Total	1,70%	0,00%	1,70%	
	I agree	Count	42	11	53	
		% of Total	72,40%	19,00%	91,40%	
	Neither I agree nor I do not agree	Count	3	0	3	
		% of Total	5,20%	0,00%	5,20%	
	I do not agree	Count	0	1	1	
		% of Total	0,00%	1,70%	1,70%	
Total		Count	46	12	58	
		% of Total	79,30%	20,70%	100,00%	
Green Area and Gardens are sufficient * Gender Cross tabulation			Gender		Total	
			Male	Female		
Green Area and Gardens are sufficient	I agree	Count	44	12	56	
		% of Total	75,90%	20,70%	96,60%	
	Neither I agree nor I do not agree	Count	2	0	2	
		% of Total	3,40%	0,00%	3,40%	
	Total		Count	46	12	58
			% of Total	79,30%	20,70%	100,00%
Security is sufficient * Gender Cross tabulation			Gender		Total	
			Male	Female		
Security is sufficient	I have no idea	Count	4	0	4	
		% of Total	6,90%	0,00%	6,90%	
	I agree	Count	37	12	49	
		% of Total	63,80%	20,70%	84,50%	
	Neither I agree nor I do not agree	Count	3	0	3	
		% of Total	5,20%	0,00%	5,20%	
	I do not agree	Count	2	0	2	
		% of Total	3,40%	0,00%	3,40%	
Total		Count	46	12	58	
		% of Total	79,30%	20,70%	100,00%	
My institution is distant to city centre * Gender Cross tabulation			Gender		Total	
			Male	Female		
My institution is distant to city centre	I have no idea	Count	2	1	3	
		% of Total	3,40%	1,70%	5,20%	
	I agree	Count	4	1	5	
		% of Total	6,90%	1,70%	8,60%	
	Neither I agree nor I do not agree	Count	17	7	24	
		% of Total	29,30%	12,10%	41,40%	
	I do not agree	Count	23	3	26	
		% of Total	39,70%	5,20%	44,80%	
Total		Count	46	12	58	
		% of Total	79,30%	20,70%	100,00%	
My institution is distant to medical institutions * Gender Cross tabulation			Gender		Total	
			Male	Female		
My institution is distant to medical institutions	I have no idea	Count	2	1	3	
		% of Total	3,40%	1,70%	5,20%	
	I agree	Count	4	1	5	
		% of Total	6,90%	1,70%	8,60%	
	Neither I agree nor I do not agree	Count	18	7	25	
		% of Total	31,00%	12,10%	43,10%	
	I do not agree	Count	22	3	25	
		% of Total	37,90%	5,20%	43,10%	
Total		Count	46	12	58	
		% of Total	79,30%	20,70%	100,00%	

3,4% of respondents answered «I have no idea» to the question if «Health services provided by the institution are sufficient», and all of these respondents are male. 89,7% of respondents answered «I agree», and among them 70,7% – male, and 19% – female. 6,9% of respondents answered «Indecisive», and among them 5,2% – male, and 1,7% – female.

1,7% of respondents answered «I have no idea» to the question «I am happy with the care personnel of the institution» and all of these respondents are male. 93,1% of respondents answered «I agree», and among them 74,1% – male, and 19% – female. 5,2% of respondents answered «Indecisive», and among them 3,4% – male, and 1,7% – female. 5,2% of respondents answered «I have no idea» to the question «I do not experience any problem with my friends at the institution» and among them 3,4% – male, and 1,7% – female. 82,8% of respondents answered «I agree», and among them 65,5% – male, and 17,2% – female. 1,7% of respondents answered «Indecisive», and all of these respondents are female. 3,4% of respondents answered «I have no idea» to the question «I am happy with my room at the institution» and all of these respondents are male. 91,4% of respondents answered «I agree», and among them 70,7% – male, and 20,7% – female. 5,2% of respondents answered «Indecisive», and all of them are male. 27,6% of respondents answered «I have no idea» to the question «I do not experience any problem with my roommate», and among them 22,4% – male, and 5,2% – female. 67,2% of respondents answered «I agree», and among them 51,7% – male, and 15,5% – female. 5,2% of respondents answered «Indecisive», and all of these respondents are male. 1,7% of respondents answered «I have no idea» to the question «My privacy is protected» and all of them are male. 94,8% of respondents

answered «I agree», and among them 74,1% – male, and 20,7% – female. 3,4% of respondents answered «Indecisive», and all of these respondents are male. 91,4% of respondents answered «I agree» to the question «I can organize my room as I desire», and among them 70,7% – male, and 20,7% – female. 1,7% of respondents answered «Indecisive» and all of them are male. 94,8% of respondents answered «I agree» to the question «Foods are sufficient and delicious», and among them 74,1% – male, and 20,7% – female. 6,9% of respondents answered «Indecisive», and all of them are male. 1,7% of male respondents answered «I do not agree». 95,9% of respondents answered «I agree» to the question «Bathrooms are clean» and among them 75,9% – male, and 20,7% – female.

3,4% of respondents answered «Indecisive», and all of them are male. 98,3% of respondents answered «I agree» to the question «Number of bathrooms is sufficient», and among them 77,6% – male, and 20,7% – female. 1,7% of respondents answered «Indecisive», and all of them are male. 1,7% of respondents answered «I have no idea» to the question «tools are sufficient for daily activities», and all of them are male. 91,4% of respondents answered «I agree», and among them 72,4% – male, and 19% – female. There is 5,2% of indecisive responds and all of them have been given by male. 1,7% of female respondents answered «I do not agree». 98,3% of respondents answered «I agree» to the question «Laundry services are sufficient», and among them 77,6% – male, and 20,7% – female. 1,7% of respondents answered «Indecisive», and all of them are male. 98,3% of respondents answered «I agree» to the question «Visitor rooms are sufficient», and among them 77,6% – male, and 20,7% – female. 1,7% of respondents answered «Indecisive», and all of them are male. 96,6% of respondents answered «I agree» to the question «Green areas and gardens are sufficient», and among them 75,9% – male, and 20,7% – female. 3,4% of respondents answered «Indecisive», and all of them are male. 6,9% of respondents answered «I have no idea», to the question «security is sufficient», and all of them are male. 3,4% of male respondents answered «I do not agree». 5,2% of respondents answered «I have no idea» to the question «My institution is distant to the city centre», and among them 3,4% – male, and 1,7% – female. 8,6% of respondents answered «I agree», and among them 6,9% – male, and 1,7% – female. There is 41,4% of indecisive responds, and among these respondents 29,3% – male, and 12,1% – female. 5,2% of respondents answered «I have no idea» to the question «My institution is distant to medical establishments», and among them 3,4% – male, and 1,7% – female. 8,6% of respondents answered «I agree», and among them 6,9% – male, and 1,7% – female.

The number of indecisive responds makes 43,1%, and among them 31% – male, and 12,1% – female. There is 43,1% of respondents answered «I do not agree», and among them 37,9% – male, and 5,2% – female. Variance analysis was conducted between experiencing health problems and disease types. Persons experiencing health problems (n=11 persons) have gained variability with the following disease types.

**Table 5.**  
**Independence Level of Specified Activities**

	<i>Valid</i>	<i>Frequency</i>	<i>%</i>
<b>Wearing</b>	Dependent (To a Person)	13	22,4
	Independent with auxiliary means	43	74,1
	Completely Dependent	2	3,4
	Total	58	100
<b>Eating</b>	Dependent (To a Person)	14	24,1
	Independent with auxiliary means	44	75,9
	Total	58	100
<b>Phone Using</b>	Dependent (To a Person)	15	25,9
	Independent with auxiliary means	42	72,4
	Completely Dependent	1	1,7
	Total	58	100
<b>Room organizing</b>	Dependent (To a Person)	15	25,9
	Independent with auxiliary means	42	72,4
	Completely Dependent	1	1,7
	Total	58	100
<b>Shopping</b>	Dependent (To a Person)	14	24,1
	Independent with auxiliary means	43	74,1
	Completely Dependent	1	1,7
	Total	58	100
<b>Toilet</b>	Dependent (To a Person)	14	24,1
	Independent with auxiliary means	44	75,9
	Total	58	100
<b>Taking a bath</b>	Dependent (To a Person)	14	24,1
	Independent with auxiliary means	41	70,7
	Completely Dependent	3	5,2
	Total	58	100
<b>Works require handcrafting</b>	Unanswered	1	1,7
	Dependent (To a Person)	12	20,7
	Independent with auxiliary means	42	72,4
	Completely Dependent	3	5,2
	Total	58	100



Using transportation means	Dependent (To a Person)	12	20,7
	Independent with auxiliary means	44	75,9
	Completely Dependent	2	3,4
	Total	58	100
Walking	Dependent (To a Person)	11	19
	Independent with auxiliary means	45	77,6
	Completely Dependent	2	3,4
	Total	58	100

Findings relating to activities of elder individuals participating to the questionnaire: the rate of responds «Independent with auxiliary means» makes 43% for activity «wearing»; the rate of responds «Independent with auxiliary means» makes 44% for activity «eating»; the rate of responds «Independent with auxiliary means» makes 42% for activity «using phone»; the rate of responds «Independent with auxiliary means» makes 42% for activity «room organizing»; the rate of responds «Independent with auxiliary means» makes 43% for activity «shopping»; the rate of responds «Independent with auxiliary means» makes 44% for activity «toilet»; the rate of responds «Independent with auxiliary means» makes 41% for activity «taking a bath»; the rate of responds «Independent with auxiliary means» makes 42% for activity «works require handcrafting»; the rate of responds «Independent with auxiliary means» makes 44% for activity «using transportation means»; the rate of responds «Independent with auxiliary means» makes 45% for activity «walking»;

**Table 6.**  
**Significant Disease Types of Individuals Experiencing Health Problems**

ANOVA						
		Sum of Squares	df	Mean Square	F	Sig.
Prostate	Between Groups	0,564	1	0,564	9,986	0,003
	Within Groups	3,161	56	0,056		
	Total	3,724	57			
urine incontinence	Between Groups	0,074	1	0,074	4,538	0,038
	Within Groups	0,909	56	0,016		
	Total	0,983	57			
Sleep disorder	Between Groups	0,801	1	0,801	8,38	0,005
	Within Groups	5,354	56	0,096		
	Total	6,155	57			
Chronic pains	Between Groups	0,23	1	0,23	4,92	0,031
	Within Groups	2,615	56	0,047		
	Total	2,845	57			
Skin dryness	Between Groups	0,074	1	0,074	4,538	0,038
	Within Groups	0,909	56	0,016		
	Total	0,983	57			
Bronchitis	Between Groups	0,692	1	0,692	6,241	0,015
	Within Groups	6,205	56	0,111		
	Total	6,897	57			
Asthma	Between Groups	0,389	1	0,389	4,365	0,041
	Within Groups	4,99	56	0,089		
	Total	5,379	57			
Heart Diseases	Between Groups	0,952	1	0,952	6,7	0,012
	Within Groups	7,961	56	0,142		
	Total	8,914	57			
Hypertension	Between Groups	1,401	1	1,401	9,037	0,004
	Within Groups	8,685	56	0,155		
	Total	10,086	57			
Hypotension	Between Groups	0,472	1	0,472	6,455	0,014
	Within Groups	4,097	56	0,073		
	Total	4,569	57			

### Conclusion and Suggestions

The average age of respondents participated in questionnaire is  $\bar{x} = 78$ . The advance age is determined as the age of the group of 75-89 (1), according to results of our research; individuals residing at the nursing home are included to this group. One of the conclusions drawing utmost attention is that all of elder individuals residing at the nursing home have children. Even though they have children, remaining at the nursing home may be the choice of elder individuals however it might be an indication that the care of elder individuals are not undertaken by children in our country and institutional care services are preferred. 74,1% of the individuals responded «nursing home» to the question «where would you like to live» support this finding. Only 10,3% of elder individuals residing at the nursing home are not covered with social security. When the monthly income has been queried, it became clear that level of monthly income of 51,7% of elder

individuals is between 1001 – 2000 TL, the rate of individuals having no income makes 13,8%. According to the obtained results it has been observed that elder individuals residing at the nursing home are able to maintain their lives without receiving any economic support. In consideration of such information, it seems that they preferred the institution not only because of poverty.

When the education level of elder individuals has been reviewed it became clear that 55,2% of individuals have graduated from primary school and general education level of elder individuals is under the country average. The activity rate of elder individuals residing at the nursing home they perform independently with auxiliary tools makes about 74%. Being such individuals using those tools covered by social security, it is observed that government has provided accessibility at such services however it is insufficient to support elder individuals for facilitating daily activities and maintaining their lives without depending on others. Awareness must be provided to elder individuals and sufficient consciousness must be created in order to integrate such services. When satisfaction of elder individuals with the nursing home has been reviewed it became clear that they are highly satisfied. This may also be linked with the lack of higher expectations of elder individuals, low educational level or lack of awareness. When opportunities of elder individuals to benefit from the services of the institution have been queried, it became clear that 89,7% of elder individuals expressed that they benefit from the care services. Nursing home is not a shelter for elder individuals, it must be considered as a place where they should spend their old age in quality. When elder individuals residing at the nursing home have been asked «What would you like to do for yourself», it became clear that there are elder individuals who are willing to work with tree grafting, to design furniture, to dance, to have their thoughts printed in newspapers, to open kindergarten and to be with them. Based on the verbal data, institution directors have to take the desires of elder individuals in consideration. By taking advantage of the experience and practice of elder individuals, community beneficial projects must be provided instead of isolating from the community itself. The rate of elder individuals residing at nursing homes responding as I do not perform «Physical Activity» is 31% and rate who responded «I never do Physical Activity» makes 34,5%. It is obvious that physical activities selected with awareness have treatment effect, and that physical activity provides happy life by eliminating negative effects of individual and increases life quality of elder individuals.

Therefore, programs must be designed as teamwork conducted by healthcare and social services experts. The rate of individuals responded «I do not agree» to the question «My institution is distant from medical institutions» made 43%. The rate of individuals responded «I do not agree» to the question «My institution is distant from the city centre» made 44,8%. The reason of this condition might be the service vehicle of the institution. When the question concerning the level of interest of younger generations towards elder individuals has been asked, the rate of responds «very interesting» made 46,6%. The rate of individuals without any health problems has been determined as 81%. Variance analyses have been conducted between experiencing health problems and disease types. According to the results the major diseases of individuals with health problems are: prostate, urine incontinence, sleep disorder, chronic pains, skin dryness, bronchitis, asthma, heart diseases, hypertension, and hypotension. As a result of a proper care and assistance services relating to such diseases a life quality of individuals might be increased.

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