

## A Qualitative Research on Five Urban Older Women about the Meanings of Ageing and Life

*Aylin Görgün Baran*

Department of Sociology, Faculty of Letters, Hacettepe University, Ankara, Turkey

**Abstract:** The objective of this research is to describe the way ageing is being perceived by the old individuals and the way they give meaning to life and make an evaluation to determine the factors forming the meaning of the “good and poor old age”. In this aspect, the factors forming the meaning of the “good and poor old age” such as the physical health, material security, family and relative relationships, sociality, neighborhood relations and the past experiences are studied. In this study, in which the qualitative research method is applied, interview technique has been used to speak with five older women in Turkish capital Ankara and these have been deepened by focus group interviews. At the end of the research, it has been seen that old participants evaluate the meaning of ageing and life towards their own experiences. According to the old women, the factors leading to good ageing are: physical health sufficient to facilitate to do the daily works and go out, material security, good relations with the family, relatives and neighbors, positive experiences and good memories in their past lives. It is also seen that education and profession is also effective (relatively) on good and poor old ageing.

**Key words:** Ageing in urban areas • Meaning of ageing and life • Good and poor old age • Qualitative research

### INTRODUCTION

Most of the characteristic features regarding ageing and care during old age are peculiar to human. When observing other beings, for instance among the wild animals, it is seen that the animals do not look after their parents [1]. In this case, the answer to the question “why” would be; human beings live in symbolic and meaningful world where they share and the power of meaning form the subject of life and death.

In Turkey, which is one of the developing countries, the approaches towards the elder members of the family is the traditional ways of accommodating the elder family members in their own houses, look after them during their illnesses and not leave them alone [2]. However, the changes occurred in the urban areas during the last 30 years, has lead to some changes in the lifestyles and the way to deal with the elder people. Due to the participation of the women to the labor force, it has become difficult for the women to accomplish their role of looking after the elder [3,4]. Therefore, the number of organizations in the urban areas in Turkey, serving the elder people and looking after them has increased. These organizations are providing accommodation services for

the old and thus supporting the families [5,6]. In a research in which the life preference of the individual regarding older people throughout Turkey, most of the men (53.8%) and women (56.2%) have stated that they wish to live with their children. In the same research, number of women who have stated that they can receive the care service in their homes is 19%, which is higher than the amount of men (16.5%). The number of both women (10.4%) and men, who have stated that they could stay in an asylum, is low [7]. On the other hand, in a research done by Atalay *et al.* [8], the number of the elder living with their children in Turkey differs from region to region. The number of living with families usually decreases when moved from the Eastern Anatolia (40.38%) to the Western Anatolia (18.02%) and as the industrialization rate increases, the number of the old living alone also increases. Furthermore, the change of the urban lifestyle, retirement income has caused changes in the thoughts of the elder people to live with their children. Although these rates show that in Turkey, the tradition of living with the family and being looked after by the family members in case of any sickness is still sustained, it is also rarely seen that the old person stays at his/her own house or in an asylum. Especially big cities are areas in

which the old people have adopted new professions other than farming and they have got a retirement income, therefore the traditional structure has slightly changed in these cities. Only some of the elder people who have got their own houses or a retirement income prefer to live alone and receive care services at their homes.

In this study, the views of the old people, who prefer to live in their own houses rather than asylums, which can be considered as an indication of transition from traditional structure to modern life and have capacity to handle problems, regarding meanings of ageing and life are discussed. Data regarding the successful ageing factors such as physical health and function, material security, family and relative relationships, sociality and adaptation are evaluated. In the study, 5 old women in Ankara, the capital city of Turkey are interviewed.

### **MEANING OF AGEING AND LIFE**

Ageing is not only a product of the individual process; it is also symbolically constructed as a result of the social experiences of the individual [9, 10]. The fancy of old is formed in every society as a result of a series of real experiences. In all societies there the words of family, baby, child, adult and old. When considered from the aspect of inter-cultural differences, the transition from the adult age to the elder age is the less ritualized phase among all phases of life. It is stated that ageing starts early and when someone reaches mid-40s, some fancies regarding ageing start to form up in the minds of people [11, 12, 13]. As changes occur in the physical capacities of the individuals and their functional skill reduces, they start to pronounce the statement of "I am old" whether serious or joking. Therefore, although the starting period of ageing is formed in the context of physical regression or reduce of the functional skill, the old people are related with the moral and emotional power used in the social practices and rituals of the society [14]. Life phases of the people and the ideas regarding ageing in this context are majorly related closely with the structural conditions of the society. As conditions change, the thoughts of individuals regarding how they find the "meaning of life" in different stages of their lives also change. But, instead of trying to relate education, working and free time activities of an ageing society with the youth, mid-age and old ages, developing flexible approaches in order to facilitate performing of such activities lifelong, seems to be a more appropriate strategy [11,15,16. In a research, the role of grandparenting, which is believed to be affecting oneself to feel old and is one of the factors determining

the formation of old age identity and feeling, has been studied. As a result of the research, it is observed that grandparenting really affects the age identity and those who become grandparents in earlier ages feel older when compared to others [17]. These results actually form a sample of not only the fact that ageing depends on age, but also on the status determined for certain ages in the social life is affective on people to feel old. However, making some daily activities flexible rather than classifying them according to certain age groups could cause changes in the people's definition of ageing.

it is becoming more important that the old people should form a personal meaning regarding life and ageing in order to sustain their lives actively.

### **FACTORS FORMING THE MEANING OF GOOD AND POOR OLD AGE**

The meaning of good and poor old age is related with whether they spend elder age good or bad, in scope of the positive and negative conditions they experience during their old ages. In this context, many researches directly or indirectly refer to good and poor old age. For instance, in a research made with participation of 60-year-old individuals mostly from traditional societies regarding the beginning of ageing, it has been stated that there are three criteria in forming the old category, which are the changes in socio-economical roles, chronological features and physical characteristics [11]. When setting up the criteria on how the cultural mechanisms regarding the care of the elder and which indirectly determines the meaning of the good and poor old age, this research which stresses the importance of definitions and practices regarding the ageing in the social life, has contributed greatly to the ageing literature with its outcomes.

Although the lives of individuals vary, the chronic losses that go on for physical functions, makes it hard to accomplish the daily living activities. Therefore, studies explaining the importance of being physically healthy in old age are common [18]. In a research which studied the social relations of the healthy and unhealthy old people, it has been observed that the healthy people have got more social contacts and are in a more active social relationship with their friends and relatives[19]. This is an indicator of the relationship of the social relations with physical health in successful ageing. In some cases, research outcomes show that especially with men, being old living alone negatively affects healthy nourishment [20]. Therefore, although old individuals differentiate largely with their health status, economical security and

other personal handling mechanisms, the situation of owning these resources or not becomes the indicator forming the meaning of the good and poor old age.

In a research conducted by Burbank in 1992, the fact which gives life its meaning for the old people has been studied. About 90% of the old people who have participated in this research have defined their lives as meaningful. 57% of them have stated that the meaning of their lives is based on their relations with other people, 12% have stated it to serve other and the other choices were fulfilling religious activities and leisure time activities [15].

In a research conducted by Thompson in 1993, it is determined that one of the threats preventing to live good in late ages is to loose the purpose of living and getting bored; and having health problems believed not be forming a great risk. In their replies on how they percept the ageing, the old people have stated that they do not feel old as long as they are not sick or depressive. Kaufman has conceptualized this situation as the “ageless self” [15]. In the qualitative research conducted by Harrison and Kahn [21] on this issue, old individual’s statement of “knowing one’s age, but not feeling old, try to live vivid and accomplish most of the things one desires to do” is an important finding. They have stated to some researchers that “ageing is the chance to accomplish many things not done before” [22].

Therefore, with the statements of Bulmer [23] and Giddens [24], the validity of the theory that the person himself/herself is affective and active (reflexive actor) on their own lives is still important, because in order for the old person to cope with the inherent journey, activeness and the personal characteristics of the individual are important.

Personality, as Mead [25] states, is shaped by interaction of the inborn biological and psychological characteristics with the social environment. Therefore this process covers the learned behaviors. The socialization process which every individual experiences, causes the formation of individuals’ characteristics in different ways. However, personality has been identified and used as psychological well-being by McCrae and Costa and the outcome of this research is found to be personality is directly related to morale and loneliness. Personal characteristics directly affect the loneliness variant. Weisse recommends that the individuals should establish close social relations to overcome loneliness. Close relations can be established at the early stages of life and go on for lifelong. The closeness to the parents during childhood mainly affects the entire relations the rest of

one’s life [26, 27]. Therefore, since positive and negative behaviors of the family relations during early childhood determine the personal characteristics of the individual, these will later be faced as factors to have a “good or poor” old age.

It is stated that the major psycho-social problem of the old individuals is “the hopelessness crisis”. In this crisis, the individual is focused either on his/her inherent life, the past achievements or failures and fear of death. Loss of spouse or friends can lead the old individuals to prepare themselves for death. Therefore, the old individual may wish to spend most of his/her time with his/her children. In this context, as stated before, personal characteristics show that the good and poor old age in the old age stage is connected with the experiences in the childhood [26,27]. Takahashi *et al.* [28], has introduced that the vastness of the social relation nets, positively affects the happiness and psychological well-being. Furthermore, it is determined that the old people are emotionally integrated to relationship ties. Thus, the density of the social relations is among the factors which determine the good psychological situation of the old person.

In the qualitative research of Harrison and Kahn[21] on three old women, which we had mentioned before, the 80-year-old woman who is relatively healthier, has stated the factors of being able to do the daily works, keeping the relations with grandchildren and having a religious belief are the basic factors which keep her connected to the life. On the other hand, old woman’s acceptance of life as it is and stressing that she is thanking God for what she has and that she lives, shows the strength of her good psychology situation.

In the research conducted by Shenk *et al.* [29] on two old women living in the rural area, the woman who has a better health condition, considers the factors of locational closeness of her family, the feeling of commitment to the land, the desire to work and having religious belief as indicators of commitment to life. In the research of Shenk *et al.*, it is interesting that the both women have stated that having a religious belief is a major factor in their commitment to life. In the researches of both Shenk *et al.* and Harrison and Kahn, it is seen that religious belief (belief in God) is an important factor for morale support.

In another research conducted regarding succesful ageing, Bowling and Iliffe [30], have developed 5 different succesful ageing models (biomedical, broader biomedical, social, psychological and lay-based) and have studied which would be more appropriate to be used. As a result of the research, it has been found that the lay-based

model, which deals with elder ness in multi-dimension way, is more appropriate. In Rowe and Kahn [31] models, succesful ageing is dealt with in three dimensions, which are health, social and physiological. As for our topic, social dimension is sociologically important for the old individual being active, having a wide social relation network and having hobbies [32, 33].

Christine L. Fry *et al.* [35], who have made an inter-cultural comparative research with a model expanded with the addition of material security and adaptation, have analyzed the ageing experience in different cultures and how the old individuals shape the ways making them live better, through comparative area study. Areas included in this research were Africa, USA, Ireland and Asia. According to the findings of the research, four sub-headings have been developed in participants' definition of succesful ageing. These have been thematically categorized as physical health and function, material security, family and relative relationships, sociality and adaptation.

In the physical health and function category, the participants have indicated health and functionality of the body as the factors determining the meaning of good and poor old age.

In the research, financial security factor has been evaluated by developing a common definition since the economical development levels of the seven regions are different from each other. Material security can be used to ensure the presence of goods and food, whereas it can also mean meeting the physical requirements, which is based on accommodation and protection against climatic and environmental conditions.

Regarding good and poor old age, family and relative relationships of the seven areas are also different. For instance participants in Asia and Africa, consider care of the old people by their adult children as a factor of good ageing, whereas in the USA and Ireland, family is considered as a factor of poor ageing.

Physical health, financial security and family relations are considered as three basic topics to have successful and problematic ageing period. In case any of these factors is not healthy, it becomes risky to have good age. Participants in Ireland, USA and Hong Kong have added a fourth dimension named sociality. They have defined sociality, which is a feature of good age as "*always going out, never sitting at home, not feeling bad, finding something to do, not overwhelming anyone, not speaking a lot, not worrying about own life and not thinking of death*". According to the outcomes of the research, plenitude or short of the physical health,

financial security and family and relative relationships is a major factor in having a successful or difficult age.

In is cross-cultural comparative researches, Imamoğlu and Imamoğlu [35], has found that the old individuals in Turkey have got a wider social relation network than those in Sweden. It has been observed that in both cultures, social relations are affective in isolating the loneliness and anxieties. Therefore, the width of social relation network in old age is a sign of a good old age and short of this network is an indicator of a difficult old age.

As a result, although the factors forming the meaning of good and difficult age differ in inter-cultural comparative studies, it is possible to get to a result explaining the general situation in scope of a common definition regarding the meaning of ageing.

## METHOD

Qualitative method has been used in the research. In this study, which is conducted on the meanings of life and ageing, it is believed that only those who live these periods can define the problems best. Therefore, the study has been performed as a qualitative research in order to provide deep information from limited number of participants.

**Characteristics of the Participants:** The socio-demographical and economical features of the old individuals participated in the research are as follows: Ms. Emine 92, Ms. Adalet 97, Ms. Belkıs 86, Ms. Türkan 76 and Ms. Melahat is 75 years old. Four of them have lost their spouses and one of them is married. Three of them lost their husbands more than 20 years ago and one of them 1 year ago. Although each one of them has chronic health problems similar to each other such rheumatism, gut and heart problems, none of them are bedridden despite their very old ages.

Each of them has got relatively sufficient incomes to live on; three of them are housewives (they receive the retirement salaries of their husbands), one of them is a retired primary school teacher and the other one is a retired nurse. Only one of them does not have a house of her own, but she receives the retirement salaries of both hers and her husband's.

Two of them have caretakers during the day to look after them and do their housework and shopping. Three of them have first degree relatives in Ankara, while two of them have got second degree relatives. Three of the participants have got children and grandchildren and have to opportunity to see them everyday. One of them

has got only one child who lives abroad; therefore she can only meet her child once a year. Two of them have not got any children.

**Data Collection and Evaluation Process:** The participants have been selected from the two different districts of the capital city of Turkey, Ankara, which is a metropolitan, industrialized and populated city.

The main problem of this study is the way these old individuals look at the meaning of being old, their connections to the life and how they define the good and poor old age. Therefore, a focus group consisting of 5 old women has been established. The reason why the participants were selected from Aşağıyancı and Bahçelievler districts of Ankara is that these areas represent the middle socio-economical level, the rate of the old population is higher and there is a relatively similar lifestyle.

The reason for selecting the women living in their own houses is that; the participant women do not wish to live with their children and they also do not prefer to go to an asylum, but they choose to live independently on their own.

In the interviews made with the participants of the focus group, 32 questions have been developed to find replies to the problems of the research. The questions had been answered in about 20 interviews. The interviews had been concluded as satisfactory replies have been given to the questions. Questions has been asked to the participants regarding their individual lives, past working lives, present economical situations, family and relative relationships, their views on adult ages, what are their worries about ageing and their health status. These subjects have been attempted to be detailed with focus group interviews. The interviews in the form of systematic observation questionnaires have continued for about six months. Afternoon tea parties among woman are one of the common Turkish traditions. These parties have been used during the researches and the interactions between the participants have been observed. The interviews have taken place in the residences of the participants.

The replies of the participants regarding ageing, devotion to life and good and poor old age have been supported with their life stories. Although the researcher has sometimes interrupted the speech to orient them to answer the questions, the speech flow of the participants has developed to answer the questions. In this scope, the data have been collected with focus group technique and the findings have been evaluated with thematic categorization method.

## FINDINGS OF THE RESEARCH

Here in the first section, how the old women define ageing and life is discussed in connection with being healthy (being able to live without anybody's help). In the second part, the reasons of choosing their current location is discussed in connection with social relations network (relations with the relatives, friends and etc.), which is a psychological health indicator. In the third part, thoughts about death have been analyzed in the context of the affect of past experiences to present beliefs, which is within the psychological dimension of good and poor old age. Finally, the relation of meaning of life and age with being educated and having a profession has been analyzed.

### Meanings of Ageing, Life and Good and Poor Old Age:

The answers to the question of "how do they see themselves at the present" indicate that they all accept that they are old, but especially stress that they are not senile. Besides, one of the participants has stated that "she feels as if she is 20". Ms. Belkıs, who is a retired nurse, has said that:

Every age has its own beauty. I am happy that I have reached the age of 86 and saw all the beauties. If you wonder how I lived that long, I will give only one answer; work, work, work.

Later in our interview she stated that she is working in a charity and that she goes there everyday, she feels happy to help those in need, she keeps a diary when she is at home, her husband was a senior bureaucrat and they had a happy life together (she said this earnestly), but loosing her husband was her faith and that she does not like gossiping at all. What she said regarding the meaning of ageing was interesting. She defined it as a feature of *helping others* totally different from other participants. Ms. Belkıs, who stated that she has had a cardiologic operation and she has got a cardiac pacemaker, appears to be very tightly linked to life as she tries to do everything in a hurry whenever you see her. In focus group interviews, she stated that she buys her daily newspaper every morning, she sometimes has breakfast in a patisserie, the tradesmen in the neighborhood know her since she has been living there for a long time and that these people help her when she needs something. She was holding her heart when she told us that she has got a daughter who lives abroad and she could visit her when she was in her 70s, but now she could not travel due to her heart problems.

The researcher has noticed that other participants were envying her when she told us that she loved her grandchild a lot and she has been writing letter to him/her. Following these conversations, 97-year-old Mrs. Adalet said;

You do not have walking problem; you can go out and walk, but I find it very difficult to walk. I cannot even go to bank to get my salary. The only thing I can do at home is to do my prayers and read the Koran, which gives me peace.

Mrs. Adalet said that she had married late, her husband had not given her any peace, they had very bad fights because he was very jealous and chary, therefore she did not feel sad when he died, but she had done all her responsibilities for him and that she still reads Koran for his soul since she receives his retirement salary and she really found peace after his death. Mrs. Adalet, who stated that the only think linking her with this life is to fulfill her religious responsibilities, said the following on this issue:

It is impossible not to think about the past. My childhood and youth years were very happy. I married very late (at the age of 34). After loosing my parents I lived with my small brother and we were very devoted to each other. We had great fun together. After I got married, he moved to the USA, he got married there and he had a daughter. He used to visit me whenever he came to Turkey. I lost him two years ago, I mourned for him more than for my husband; I keep on reading for him.

She told us that her childhood passed in Damascus due to her father's job and then they moved to Çanakkale, Turkey when she was young and she can speak Arabic; she means reading the Koran with the term "reading". Mrs. Adalet, who cannot look after herself without the help of her caretaker, stated that she was not happy with this situation:

Now I have got money but I am not healthy. I can only walk with a walker (four legged walking set) at home. My caretaker does all the housework.

She explains the meaning of ageing as such; "you cannot walk, you cannot go out, others do your works for you".

The 92-year-old retired primary school teacher Mrs. Emine had lost her husband who was a pilot in 1947 when they were married only for nine years. She said that she loved him a lot, they had a very happy life together and until now she had lived with the good memories of the nine years of her marriage. She added that she could not bear the sorrow of loosing him during the first years and she carries a hand made necklace, made by her husband,

with a photo of her husband on one side and hers on the other and she went on saying:

My husband put the necklace on my neck and told me; "If I die you will carry it forever and if you die I will carry it". I do not know how I managed to live without him. After we got married I resigned from my job because I could not move my post to the same city with him. A few years after his death, with the help of some friends, I started to work in a private primary school. I remember that those little children, as if they were aware of my sorrow, never misbehaved themselves and even the class representative used to warn them not to misbehave because the teacher was in sorrow. I think what kept me in life was the responsibility feeling of these little children; most of them are now in important posts in the state, some of them still call me and some of them have retired.

Mrs. Emine, who does not have any children, has got a heart problem but she looks after herself very well. She stated that she does not have walking problem and whenever the weather is good, she walks from home to the supermarket and buy whatever she wants. Sometimes she asks the doorkeeper to do the shopping and a relative of her living in the same block often comes to check her. She said that after retirement, she went abroad to travel and saw many places and she was happy to do this because now there was nothing which she envies to do. She added that they visit the neighbors with each other and she keeps on planning for the things to do the next day. She explains the meaning of ageing as;

You do everything when you are young and now you sit, go shopping, visit and read (she means reading newspapers)

Mrs. Türkan, who suffers from rheumatism, is 76 years old and lost her husband last year. She said that her days are now passing in somber and after loosing her husband she started to think it is her turn, which really fears her and therefore not try to think about. She stated that although she is old she did not feel so for very long time, but now she finds it very hard even to go to the bank, thus she does not want to go out and she still feels sorry for her husband. Her way of explaining the meaning of ageing is;

You expect everyone to visit you; you deal with your sickness and medicines.

The last participant is 75-year-old Mrs. Melahat who lives with her husband who is paralyzed since 8 years. Her husband cannot walk, or even cannot percept that he should go to the toilet, therefore he requires continuous care. I asked her if she has ever felt tire of looking after her husband for 8 years. She says;

I pray to God not to take him from me. How can I live without him? I am really grateful with my children, especially my little son who lives close to her. He comes everyday to clean his father, bath him, do our shopping. My daughter and grandchildren also are very helpful, I only have to do the cooking, washing the dishes and clothes, therefore I cannot say I feel tired.

Mrs. Melahat defines ageing as; You eat when someone brings it to you, you see someone when they come to you.

Generally, when we consider participants' views of life, we see that some of them reply as "this is our present situation, we live such". This reply shows that they live they think of the past and the future together and live the present. This is a very meaningful situation for the old individual. However, this does not mean that they do not have anxieties at all; they try to live the present bearing in mind that life goes on. However, two of the participants said that they do not want to say anything more about the meaning of life and their life was such if you can call it life, but they still thank God for their situation since they know there are old people in worse situations than they are.

#### **Selection of the Place Lived and Good and Poor Old Age:**

In this research, which studies the ideas of the old women, who prefer to live in their own houses, rather than living with their children or in an asylum, regarding meanings of ageing and life and evaluates their thoughts on the good and poor old age strategies, the following outcomes have been obtained on why these women prefer to live at their own houses and the affect of this choice on their daily communication.

The old women, although staying alone, stated that they do not want to stay with their children or relatives. Mentioning that they might disturb them or be disturbed by them, they believe *the best thing is the stay in your own house and wait for them to visit you often*. Especially the idea of living in an asylum makes them feel uncomfortable and they stress that they do not wish to live there. They believe an asylum is place for people without money or relatives. They also state that they will feel as if they are abandoned and they also say they are bored to stay with people in their ages all day long. As they are in sorrow of losing their coeval relatives, being together with old and sick people all day long will totally destroy their morale. However, living in a block, being in close contact with the world around, being aware of the people around, even doorkeeper's knocking on the door everyday makes it an active and joyful life for them. Although stating that they do not like the noises made by

children, they confess that they sometimes miss some noises. Shortly, they stated that they wish to live close to other people and not be isolated from the society. Asylums, for them, are places to be isolated from the society and people and a place for poor ageing. This perception gives them the feeling of being excluded.

97-year-old Mrs. Adalet, who does not have any children, says that her relatives nowadays do not visit her much, but her neighbors are really in help of her. She states that she sometimes, although very difficulty goes to visit her upstairs neighbor and for someone at her age, even doing this is a great benefaction. She always prays God not to make her dependent to other help and hope.

76-year-old Mrs. Türkan, who says she is very luck from the point of children, states that her children visit her almost everyday, take her to doctor whenever she needs, do her shopping although she has a caretaker and their visits are the biggest sources of pleasure for her life. She adds:

I do not know if it is caused by loneliness, sometimes I grouch a lot and sometimes I cannot understand what is being talked around because I cannot hear very well; sometimes I wish to stay alone, I get cranky and I think I aggrieve my children. They are everything I have. I pray to God not see their sorrow.

Mrs. Türkan, who spends most of her time at home, stated that in the past she sometimes had problems with her husband (due to her children being small, inexperience brought by being young, problems caused by the mother-in-law), but now when she thinks about it, she believes it is no worth to afflict oneself in this short life. She confesses that some of the problems were caused by her and if she had the chance she would not do the same mistakes again. She added that she is very happy with the visits of her neighbors, she sometimes visits them, life would have been better if she did not suffer from the pain of her legs, she is worried about being bedridden in later ages, she spends her days with watching TV and doing her prayers and thanks God for her present situation.

Mrs. Melahat, who has a stomach sickness, stated that her children and grandchildren visit her often since they have the advantage of living close, the grandchildren look after their grandfather and she spends all her days sitting by the window and watching the people going by; sometimes she goes to visit her parents, sometimes her neighbors visit her and she spends most of her time in the garden in summers since her flat is on the ground floor.

#### **Thoughts about Death and Good and Poor Old Age:**

Mrs. Türkan said that, after losing her husband, she

started to think it is her turn now and started to fear from death. She stated that until her husband died she did not have such a feeling at all, but now this worry and fear makes her sleepless during the nights. Her lips pucker when she says that after she dies, she will be called with her name and when she gets up she will hit her head to the tombstone, thus she will understand that she is dead. It appears that she is really scared of death after what she heard from the elder about death in her childhood. Considering that this ideas exist in most of the old people, it seems that it is not possible to think about death in be worried during the ageing. This might be the reason for many old people to live a restless life. Mrs. Emine says the following on this issue:

It is not that I do not think of death, although not very often. At that time I hire a caretaker, but I am some much used to live alone, I feel unease and I can only stand to live a week or ten days, then I send them back. Now I have moved to a block where a relative of mine lives. They knock on my door everyday and so I feel safer.

Mrs. Adalet states that she fears death, but also stresses that her religious faith gives her power. She says that when she fear death a lot in times, she starts to tell herself her religious faith must have weakened, then she devotes herself to her prayers and feels better.

It is seen that for the old people in these feelings, relying to a moral power turns to be a very strong emotion. It is seen that being faithful reduces the fear of death in some, which gives them power and peace and increase the threshold of sensitivity in others. However, the difference of the adapted cultural codes for these people, who have lived in different environments, causes them to live a good or poor age.

**Relation of the Meanings of Ageing and Life with Being Educated and Having a Job:** Another factor of good and poor old age, which has appeared as a different result in our research, is related with working in the past depending on the education levels. Two of the participants are graduates of vocational high school and the others from primary school. In focus group interviews, the difference of education level and the approach to the events is noticed. The old participant, who was a primary school teacher, proudly stated that she had a very happy working career and never had any problems with her colleagues. She stated that although she has a religious belief, she does not perform any rituals because she was not brought up so; she only plans for the things to do the next day (such as paying the rent, going shopping, decide

what to buy, paying the bills), she reads newspaper everyday and goes for walk when the weather is good. On the other hand, Mrs. Belkis, who was a nurse, said that she keeps a diary; she works for a charity although she is 86 and is happy to do so and added that ageing is a nice period in one's life. She proudly stated that she acted very kind to her patients when she worked and that they loved her very much and they always asked her to stay on night duty. She also added that she has got a religious belief, but she does not perform the rituals since she has other things to do and she also goes to buy newspaper every morning. Thus, the existence of a good working career related to the education level is among the factors to have a happy ageing period. The other three old individuals, who do not have a working career, spend most of their days with performing religious rituals. This shows that the participants with education and career are occupied with the daily rush of the life, whereas the others with lower education level and no working career define religion as their connection to life and provide moral satisfaction. The education and discipline acquired by the participants, their experiences and relations during the socialization process could cause them to live differently in their future lives. It is possible to note that this situation of socialization process cause them to develop cultural behaviors to arrange their lives.

## **CONCLUSION AND DISCUSSION**

In this research, the factors forming the meanings of life and ageing, good and poor old age are dealt with in the context of health and doing self work, financial security, relations with the family, relatives and neighbors, living with the good and bad memories of the past and the idea of death. In this aspect, the following results have been obtained on the issue of good and poor old age.

It has been determined that the old participants, apart from physical problems and loss of functions, generally live a good old age period, have good relations with family and relatives and have a wide social relation network which make them happy.

As we look at the socio-demographic features of these old woman according to the research findings, all of them are categorized in late age category and from socio-economic aspect, they are in mid-up and mid-mid socio-economic class. Especially education level and active participation in working life, causes differences for them regarding their links to the life.

In our research, none of our participants have got any mental problems; however, it appears that two

participants find it difficult to do their daily works due to rheumatism problem. Because not being able to walk, causes someone to sit and not be able to move. Therefore, the participants define the meaning of ageing in scope of the problems they suffer. Problems which can be relatively outpatient treated, such as heart and stomach problems, can be controlled with medicines or diets, therefore, these problems do not force someone to remain seated in one place and not move at all. This situation helps them to overcome the problems of ageing without much difficulty. In this context, the participant who is a retired nurse forms a sample the concept of "ageless self" with her expression of *I still feel young*. The studies of HarissonandKahn [21], Gullete [13] and Burbank and Kaufman [15] on this issue are similar to ours. However, the problems of those who suffer from rheumatism are much more than other who can walk, since rheumatism means not be able to walk and do personal works well; therefore, they always fear to be bedridden, feel the death more closely and always pray "not be in need of other to live". As seen in the studies of Hansonand Carpenter [18], Gilhooly *et al.* [19], there are differences between the healthy and unhealthy old individuals regarding their views of life and ability to establish social relations. This outcome overlaps with our research.

Although the participants do not have any financial problems, issues such as inflation, high amounts they pay for their electricity, water, telephone and natural gas bills make them compare things with the past; for instance when they pay a bill amounting 10 YTL, the frequently talk about *what could have been bought with this amount in the past*. Two old women say that, each time their grandchildren come to visit them, they give them some money to make them come again; they also stress how money is important for older people. In the research by Fry *et al.* [35], it is stressed that financial security is important for the old participants from the USA and Ireland, whereas this is not seen as a problem by those from Africa and Asia since they are looked after by their families or relatives and believe they will be looked after by the state if they have no one else to do so. Our research has shown that money is a means of providing financial security and keeps up the relations with others.

On the other hand, family and relative relationships appear to be a more obvious factor in forming the meaning of good and poor old age in our research as in the researches of Fry *et al.* [35], HarissonandKahn [21] and [29] *et al.* Family members and adult children function for the old individuals not only to meet their requirements such as do their shopping, take them to doctor, but also

provide the biggest moral support to them. Three of the participants with children, when talking about their children, they mention them with love and gratefulness. It is observed that the old participants are in a high expectation from their children, apart from wanting to be in close relation with them. It is determined that the participant with no children and relatives is resented and reproaching on this issue. She is trying to overcome this through relations with her neighbors.

It has been observed that our participants are social, even though they have physical problems. None of them wish to stay in an asylum. Sociality or being social is meaningful only with the individual behaviors of the old person, which facilitates the interaction and is considered to be sociologically active, not be addicted to home and do whatever one wants to do. This factor is closely related with physical health factor. In this context, not being worried about the future or the present and not thinking about death are even reduced more with being social and this is an indicator of successful age. In our research, facts such as working of the 86-year-old participant in a charity, the other two walking for shopping; but addiction of the two other participants with rheumatism to their houses and getting power from their belief in God, proof the existence of good and difficult ageing as stated by RowandKahn [31], in the aspect of being social. In this category, loneliness is taken as the opposite of being social. Old participants do not mention loneliness as a problem, although they complain about it. This result is similar to the outcome of the research by Fry *et al.* [35], which indicated that American and Irish participants want to live alone and do not want to be disturbed with the presence of their children in their houses.

Another important finding of this research is the lives of the old women have become more meaningful by their relations with their neighbors. This result overlaps with the outcome from ImamoğluandImamoğlu's [34] research indicating that the old people from Sweden are in a less social relation network than the Turkish. The neighbors in the block are relatively younger (in their 60s) and retired women, therefore the number of visits increase and they invite each other to tea parties. These types of parties which are common among the women in urban areas, are among the days where women meet to chat, know what each other is doing, live a different day. The tight relations between the neighbors are considered to be among the indicators of good age in the context of the width of the social relation network. Neighborhood relations, just like family relations, are considered.

As the neighborhood relations indicate that the old individuals are active, they are also samples proving that the individuals are living a relatively peaceful life in their old ages. In this context, this situation is considered within the sociality factor as the social relation networks expand in scope of both family and neighborhood relations.

On the other hand, an important finding of our research is the participants' fear of death. The two participants with higher education level (graduates of vocational high school), who had a working career and are involved in social and cultural activities and are part of humanitarian activities, have got a less fear than the other participants. The two other primary school graduate participants have got strong religious beliefs (Muslim) and faith in God, which appears to be a major factor connecting them to life. This result overlaps with the works of HarissonandKahn [21] and Shenk *et al.* [29]. Their faith in God is important since it reduces the feelings of death and loneliness and connects them to life. In this context, the religious belief factor is therapy for the old individuals participating in the research. According to these researches, the old individuals feel comfortable when they perform the religious rituals; and feeling comfortable connects the individual to life. This appears to be a criterion of good age. These people have been taught that the hell is a very bad and hot place and the heaven is a very nice place since childhood and is a motivating factor to perform the religious rituals [21,29]. On the other hand, the superstitions taught along with the religious teachings during the childhood can cause the individuals to have an unhappy and unease old age period. An old person always thinking of death may cat depressive and undergo a difficult age. Religious teachings should be made more seriously and carefully due to the fact that trying to discipline the individuals with fear may cause traumas. Therefore, it is necessary to arrange therapy sessions to minimize their fear of death. In this research it is observed that the 76-year-old Mrs. Türkan has got behavioral disorders caused by her beliefs. She usually acts nervously and angrily to the people around her. Since this situation corresponds with personal characteristics, it should be evaluated as a separate factor in scope of the meaning of good and poor old age. On the other hand, in the research conducted by Fry *et al.* [35], individual features and fear of death is mentioned within the sociality factor. They find the way to overcome the fear of death and reduce the anxiety level in being visited frequently, always being together with their children and grandchildren and as three participants

do, having a strong religious belief. Thus, anxiety of finding works to do daily is reduced and fear of death is expelled from the mind for a while.

The participants still feel sorry deeply for loosing their spouses and feel it is their turn. One of the participants has lost her husband and another one lost her brother a short while ago; therefore they stated that they feel the fear of death and are worried. Considering that the others have lost them long years ago, pass of time is a factor which reduces this fear. The anxiety of death could be thought in two ways; in one way, the person fears for him/her; and in the second way, there is the anxiety of never seeing the beloved ones again. For these reasons, the participants are grumpy when they are alone; and they are happy when someone visits them. Therefore, touching them and embracing them is the biggest source of moral for them since it gives them the feeling of living.

Another result of this research is that it is seen that the participants have got a very strong memory, something not expected from their ages. Although remembering the past very well, they can calculate very well when shopping and make consecutive sentences when they talk. They have got problems due to not hearing well, they all need the help of others to go to a hospital and receive self care. Despite all the negative things in their lives, they always stress that they are happy to live. This result overlaps with the findings of HarissonandKahn[21] and Shenk *et al.* [2]. The finding of the relation between the perception of ageing with the health status as found by Fry *et al.* [35], overlaps with ours.

Considering that life is a river and it is still traveled on this river during elderness, instead of worrying, it is necessary for an individual to form a sensitive life-education (like the teacher and the nurse in our research) and apply it in order to get away from the problems of ageing, as Uygur [1] has stressed. It would be meaningful to give samples of the novels "Bir Dinozorun Anıları" (The Memories of a Dinosaur) written by Mina Urgan, who has described the meaning of good age and "Annem Belkıs" (My Mother Belkıs) by Vassaf Gündüz, to form models [36,37]. A sensitive life-education is about one's self development. In order to expect the help of others on this issue, it is more affective to help oneself as Schopenhauer[38] stated. This situation is an indicator of being an "active individual".

The outcomes of this research on the meanings of succesgul ageing and life shows similarities in many points with the research conducted by Fry *et al.* [35],

which we have taken as a reference, although it overlaps with many researches on good and poor old age. In both researches, although it is determined that physical health, financial security, family and relative relations and sociality or being social are factors forming the meaning of good and poor old age, in our research it is also observed that neighborhood relations and working life related with education level are important factors of good and poor old age.

As a conclusion, although there are differences between societies that have emerged from cultural features, each society has cultural differences within itself. Therefore, ageing is closely related with cultural experiences. In this research as the factors forming the meaning of good and poor old age are set as physical health and function, financial security, family and relative relations and sociality, important data have been obtained to explain the sub-culture of ageing. In addition to this, in the research outcomes, although it is difficult to evaluate the ageing culture generally, it appears that such studies should be expanded to cover the old people living in different socio-economic levels and include the relation between the fear of death and the what has been learned during childhood regarding death, as issues to be handled in another research.

## REFERENCES

1. Uygur, N., 1998. Philosophy of life (Yaşam felsefesi). İstanbul: Yapı Kredi Yayınları.
2. Emiroğlu, V., 1995. Ageing and Social Adaptation at Ageing (Yaşlılık ve Yaşlılıkta Sosyal Uyum). II. Baskı, Ankara: Şafak Matbaacılık
3. Görgün-Baran, A., V. Kalıncara, N. Aral, G. Akın, G. Baran and Y. Özkan, 2005. The elder and family relations research: Ankara sample (Yaşlı ve yaşlı aile ilişkileri araştırması Ankara örneği). Ankara: T.C. Başbakanlık Aile ve Sosyal Araştırmalar Genel Müdürlüğü Yayınları.
4. Kalaycıoğlu, S., U.U. Tol, Ö. Küçükkural, K. Cengiz, 2003. Life style preferences from the point of the elder people and their relatives (Yaşlılar ve Yaşlı Yakınları Açısından Yaşam Biçimleri Tercihleri), Türkiye Bilimler Akademisi Raporları, Sayı: 5, (UNFPA Birleşmiş Milletler Nüfus Fonu'nun Katkılarıyla).
5. Görgün-Baran, A., 1996. Social life conditions of the elder people institutionally (Kurum bakımındaki yaşlıların sosyal yaşam koşulları), Hacettepe Üniversitesi Edebiyat Fakültesi Dergisi, 1-2(13): 19-58.
6. Görgün-Baran, A., 1997. Immigration and societal position of the aged people a study in Ankara Aged Information Center, Hacettepe Üniversitesi Edebiyat Fakültesi Dergisi, 1-2 (14): 41-58.
7. TÜİK, 2007. 2006 Research on family structure (Aile yapısı araştırması), <http://www.tuik.gov.tr/aileyapi/menu.do>.
8. Atalay, B., Y.M. Konaş, S. Beyazıt and K. Madenoğlu, 1993. Research on Turkish family structure (Türk aile yapısı araştırması), Sosyal Planlama Genel Müdürlüğü, Ankara: DPT Yayınları.
9. Karp, D. and W. Yoels, 1982. Experiencing the life cycle: A social psychology of ageing. Charles C. Thomas.
10. Goffman, E., 1963. The presentation of self in everyday life. New York: Doubleday Anchor Books.
11. Sokolovsky, J., 1997. The cultural context of ageing worldwide perspectives, London: Bergin and Garvey, Westport, Connecticut.
12. Görgün-Baran, A., 2001. Social status of the elder and their role analysis (Yaşlılığın sosyal statü ve roller bakımından analizi). Yaşlı Sorunları Araştırma Dergisi, 1(1): 14-24.
13. Gullette, M.M., 2003. From life storytelling to age autobiography. J. Ageing Studies, 17: 101-111.
14. Karaduman, Ayşe, K. Yiğiter, Ö. Aras and Y. Yakut, 2006. Physical independence and quality of life in old age, Ageing in Turkey (in), Joseph Troisi and Yeşim Gökçe Kutsal (Ed.), Ankara: Hacettepe Üniversitesi GEBAM Yayınları, pp: 65-84.
15. Moody, H.R., 1998. Ageing, concepts and controversies. Thousand Oaks: Pine Forge Press.
16. Cengiz, K., Ö. Küçükkural and U.U. Ulaş, 2003. Discourse of ageing and age distinction (Yaşlılık söylemi ve yaş ayrımcılığı). III. Ulusal Yaşlılık Kongresi Bildirileri (İçinde), V. Kalıncara (Ed.), Denizli, pp: 194-208.
17. Kaufman, G. and H.E. Geln, 2003. Grandparenting and age identity. J. Ageing Studies, 17: 269-282.
18. Hansson, R.D. and B.N. Carpenter, 1994. Relationships in Old Age Coping with The Challenge of Transition. New York. London: The Guilford Press.
19. Gilhooly, M., P. Hanlon, H. Mowat, B. Cullen, S. Macdonald and B. Whyte, 2007. Successful ageing in an area of deprivation: Part 1-A qualitative exploration or the role of life experiences in good health in old age. Public Health, 121: 807-813.
20. Hughes, G., M. Bennett and M.M. Hetherington, 2004. Old and alone: barriers to healthy eating in older men living on their own. Appetite, 43: 269-276.

21. Harrison, T. and D. Kahn, 2004. Perceived age, social integration and disability: A case study of ageing women. *J. Loss and Trauma*, 9: 113-129.
22. Jones, A.H., 1999. Literary perspectives on ageing. *Literature and Ageing*, 354: 1.
23. Larson, C.J., 1986. *Sociological theory: from the enlightenment to present*. New York: General Hall. Inc.
24. Allan, K., 2006. *Contemporary social and sociological theory*, Thousand Oaks/ London/ New Delhi: Pine Forge Press.
25. Lemert, C., 1993. *Social theory: the multicultural and classic readings*. San Francisco. Oxford: Westview Pres Boulder.
26. Long, M.V. and P. Martin, 2000. Personality, relationship closeness and loneliness of oldest old adults and their children. *J. Gerontology*, 55: 311-319.
27. Krause, A.M. and B.E. Hanerkamp, 1996. Attachment in adult child-older parent relationships: Research, theory and practice. *J. Counseling Develop.*, 75: 83-92.
28. Takahashi, K., J. Tamura and M. Tokoro, 1997. Patterns of social relationships and psychological well-being among the elderly. *Intl. J. Behav. Develop.*, 21 (3): 417-430.
29. Shenk, D., B. Davis, R.J. Peacock and L. Moore, 2002. Narratives and self-identity in later life two rural American older women. *J. Ageing Studies*, 16: 401-413.
30. Bowling, A. and I. Steve, 2006. Which model of successful ageing should be used? Baseline findings from a British longitudinal survey of ageing. *Age and Ageing*, 35: 607-614.
31. Rowe, J.W. and R.L. Kahn, 1997. Successful ageing. *Gerontologist*, 37: 433-440.
32. Caron, C.M., 2005. *A conceptual framework for community interventions in successful ageing*, Ottawa: Published Heritage Branch, (PDF dosyası).
33. Görgün-Baran, A., 2008. Sociological analysis of successful ageing models (Başarılı yaşlanma modellerinin sosyolojik analizi), VI. Ulusal Yaşlılık Kongresi Bildirileri, (içinde) Velittin Kalıncara and Galip Akın (Ed.), Ankara, pp: 236-245.
34. Imamoğlu, O.E. and V. Imamoğlu, 1992. Life situations and attitudes of the Turkish elderly toward institutional living within a cross-culture perspective. *J. Gerontol. Psychol. Sci.*, 47: 102-108.
35. Fry, L.C., J. Dickerson-Putman, P. Draper, C. Ikels, J. Keith, A. Glascock and C.H. Harpending, 1997. Culture and the meaning of good old age. The cultural context of ageing worldwide perspectives. Sokolovsky, Bergin and Garvey, Westport (Eds.). London: Connecticut, pp: 99-122.
36. Urgan, M., 2000. *The memories of a dinosaur (Bir dinazorun anıları)*. Istanbul: Yapı Kredi Yayınları.
37. Gündüz, V., 2000. *My Mother Belkıs (Annem Belkıs)*. Istanbul: İletişim Yayınları.
38. Schopenhauer, A., 1997. *Aphorism on wisdom of life, (Yaşam bilgeliliği üzerine aforizmalar)*. Istanbul: Kabcacı Yayınevi.