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A PRACTICAL RESEARCH ON DISABILITY IN THE PROVINCE OF GÜMÜŞHANE

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Abstract

Disability, in today's world, is among the most important health problems and social problems. Rapidly aging world population is increasing the rate of disability. This situation brings importance to disability in terms of health and social policies. In this sense, quantitative data on the disabled people, material and spiritual possibilities offered to disabled people, participation of disabled people in society and self-reliance status of disabled people are the subjects of many researches. In this context, this study was carried out in Gümüşhane province and its surrounding located in the Black Sea region in our country. Thus, there is not enough information about the number of people with disabilities, the rate of different disability groups, and the socioeconomic characteristics of the disable in Gümüşhane province. This study was conducted in order to determine the number of disabled people in Gümüşhane province, to determine the socio- demographic characteristics of the disabled and to create the disability database of Gümüşhane province.

Keywords: Gümüşhane, Disability, Disability Rate, Disability Types, Disability Database.

I. INTRODUCTION

According to Law No. 2828 "Disabled" is; the case of non-compliance with the requirements of normal life; as a result of the loss of varying degrees of physical, mental, emotional and social capabilities because of any injury or accident congenitally or acquired and a person who is in need of prevention, care, rehabilitation, counseling and support services (Social Services Law, 1983). The World Health Organization's (WHO) definition of disability; refers to the situation as a result of a deficiency occurring in health and the loss or restriction of the ability to perform a business compared to a person who would be considered normal (WHO,2014). At the same time congenital abnormalities, abnormalities in the body's external appearance that can not be repaired , body's disproportional shape, disturbances in the development of tissues and organs are discussed in the concept of disability. (Sapanca, 2013:39) In addition to this, disability can be defined as social limitations, discriminatory practices and disadvantages that a person confronts because of his/her disability (Karataş, 2000:4).

There are approximately 500 million disabled people in the world. According to the World Health Organization, approximately one quarter of the world population is facing disability directly or indirectly. 80 percent of the world's disabled live in developing countries, and they do not have access to primary services (WHO, 2014; WHO, 2011; WHO, 1981).

The World Health Organization accepts disability rate as 10% for developed countries, and 12% for developing countries. According to this statement it is estimated to be 700 million disabled worldwide, and 9 million disabled in Turkey (WHO, 2014; WHO, 2011; WHO, 1981). However, it is widely accepted that disabled people have a lot of common problems waiting to be solved in every society whether advanced or not (Karataş, 2001:10-19). Increase of the number of disabled people each day revealed the need for better explaining of the concepts of disorder, disability and handicap and, WHO clarified the concepts of disorder, disability and handicap in 1980 (Yalın, 2011: 4).

Disorder: It refers to the psychological, physiological and anatomical deficiencies in the structure of individual.

Disability: It is a situation that an action that can be performed under normal conditions can not be fulfilled exactly due to a lack of physical and mental structure.

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Handicap: It is a situation that individual can not response to the expectations expected from him in terms of age, sex and socio-cultural factors due to reasons of deficiency or disability of individual (Komisyon Raporu, 1999: 74).

Disability shows quite a variety such as physical disabilities, visually impaired, hearing impaired, Asperger's syndrome, autism, spastic handicapped, genetic diseases, language and speech disorders, Deheb (attention deficit) with hyperactivity disruptive behavior disorder (Sanal,2016). The number of disabled is increasing as a result of the increase in aging population and chronic diseases. Wars, traffic accidents and other disasters are among the causes of disability. In countries where the average life expectancy is over 70 years, individuals spend as much as 11.5% or 8 years of their life with disabilities. According to the results of "Turkey Disability Survey"; impairment rate was 12.29% and disability rate was 2.58% in Turkey. The proportion of patients with chronic diseases was 9.70% (Turkey Disability Survey, 2009).

When the proportional distribution of disability varieties was investigated; the rate of hearing disability was 37 per thousand, speech and language disability was 38 per thousand, while the proportion of mental disability was 48 per thousand (Turkey Disability Survey, 2009) The rate of people who have multiple disabilities were 11.40%. The later appearance rate of disability was too high in all disability groups (Turkey Disability Survey, 2009). Disability rates increased with age. Especially today's Western societies have an increasingly aging profile and age also plays an important role in terms of disability. Hence, as it mentioned so often, the level of development setting out comparison in the different society disability rates is not a meaningful and descriptive criteria (Aysoy, 2004: 1-20).

When the issue evaluated in terms of gender, disability rates were higher in men, but chronic diseases were reported to be higher in women in populations (Turkey Disability Survey, 2009). Also in the same survey it was reported that the disability rate was higher in rural areas and the rate of chronic diseases were higher in urban areas (Turkey Disability Survey, 2009). When the distribution of disability rate by region was investigated disability rate was found higher in Black Sea region with 3.22%, and lowest in Marmara region with 2.23%. It was reported that the percentage of people with chronic diseases was highest in Marmara region with 10.90%, and lowest in Southeast Anatolian region with 7.18% (Turkey Disability Survey, 2009).

These data demonstrate that any person can become disabled; congenitally or as a result of an illness or accident by losing physical, mental, sensory and social skills in various degrees. This situation hinders the vital activities of people partially or completely and also most importantly makes it difficult to carry out their social life. There is not enough information about the number of people with disabilities, the rate of different disability groups, and the socioeconomic characteristics of the disable in Gümüşhane province.

This study was conducted in order to determine the number of disabled people in Gümüşhane province, to determine the socio demographic characteristics of the disabled and in order to create the disability database of Gümüşhane province.

II. MATERIALS AND METHODS

This study was a cross-sectional study. All households in Gümüşhane province have formed the universe and all households were included in the survey. The fieldwork was carried out between February 2013 and February 2015. This study was supported by Disability Support Program (EDES).

Necessary permissions were taken before starting the fieldwork (Governor's permission and approval of the Ethics Committee of Karadeniz Technical University). Data was collected through a questionnaire (Disability Information Questionnaire) developed by the researchers for this study. The questionnaire was used after preliminary tests and necessary corrections were made.

Interviewers were selected among students of Gümüşhane University Health High School. After the necessary theoretical and practical training on the questionnaire, interviewers applied the questionnaire by face to face interview technique. Disability Information Questionnaire was applied to disabled who was found to fulfill the World Health Organization (WHO) criteria for disability classification or who had disability report taken from any health care institution. All of the data obtained was recorded to the computer. Data was analyzed with SPSS packet program on computer and chi-square test was used for statistical analysis.

III. RESULTS AND DISCUSSION

During this study conducted in order to create the disability database of Gümüşhane province, data about 4 608 disabled was obtained and the descriptive data of the disabled was identified. The most important of these data can be listed as follows; age, gender, disability type, disability rate, causes of disability, the date that disability arose, having disability report, disability pensions, care services, equipment used, level of education, occupation, employment status, family income, their personal income, family type, household size, the status of getting out of the house on their own, relationship between parents of disabled and the person

giving care to disabled people. All of this data was transferred to the computer and must be updated at regular intervals.

According to our study general disability rate was found to be 3.4% of the population in Gümüşhane province. When we investigate the distribution of the study group by the type of disability, orthopedic disability rate was found to be 1.5%, visual disability rate 0.6%, hearing disability rate 0.3%, speech and language disability rate 0.06%, emotional disability rate 1.0% and mental disability rate 0.2%.

Disability rate was generally higher at Torul and Kürtün districts compared to the other districts. Also, visual disability rate was higher at Torul and Şiran districts compared to the other districts. It has been found out that orthopedic disability rate was significantly higher in Torul district than the other districts.

According to the Turkey Disability Survey (2002) the disability rate of Turkey is 2.58%. This rate is 3.05% for women and 2.12% for male in the general of Turkey. Disability rate is 3.22% at the Black Sea region which includes our province (Turkey Disability Survey, 2009). As seen, this rate above the average of Turkey. This situation can be explained that the ratio of elderly people living in the Black Sea Region is very high and migration is common in the region. When evaluated from this point, our results are compatible with data obtained from Turkey Disability Survey.

Table 1. The Socio Demographic Characteristics of the Disabled Identified During the Study

	Number of Disabled Identified	Number	%
		4 608	3,4
Sexuality	Male	2 281	49,5
	Female	2 327	50,5
Educational Level	Illiterate	3 097	67,2
	Literate	295	6,4
	Primary and secondary school graduate	1 170	25,4
	High school graduate	46	1,0
Family Type	Nuclear	2 161	46,9
	Large	1 378	29,9
	Seperated	1 069	23,2
Home Care	Receiving home care	1 324	28,7
	Not receiving home care	3 284	71,3
Disability Pension	Taking disability pension	1 405	30,5
	Not taking disability pension	3 203	69,5

As it is shown at Table 1; 49.5% of the disabled were men, and 50.5% were women. The rate of illiterate people (67.2%) among the disabled was a striking result. In our study, the family types of the disabled were examined, and it was found out that the majority of the disabled had nuclear families (46.9%) (Table 1). This demonstrates the importance of old age in terms of disability once again. Thus, due to advancing age, large family rate declines; the proportions of nuclear families increase dramatically.

The vast majority of disabled had no occupation. Only 2.4% of the disabled were found to be civil servants, and 4.4% were found to be workers. Still the vast majority of disabled were not working. It has been found out that only 3.2% of the disabled were working in the public sector and 3.0% were working in the private sector. Besides, 23.8% of the disabled were found to be retired.

The vast majority of disabled were living with their spouse and/or with their children. It has been found out that 8.1% of the disabled were living with their mothers and/or fathers, and 6.0% were living alone. In addition there was no relationship between the majority of the disabled parents. Besides, there was a relationship among 5.1% of the parents of disabled; their mothers and fathers were relatives.

It has been found out that 16.3% of the disabled could not get out of the house by themselves, 36.7% could get out of the house with the help of someone else, and 47.0% could get out of the house by themselves. 1 334 (28.9%) of the disabled was receiving home care services funded by the Ministry of Family and Social Policies (Refer to compare: Aydın, 2005: 14-62; İzgi, Çoban, İzgi, 2008: 43-48) It has been found out that this disabled receive home care services from their mother (33.6%), spouse (15.6%), bride (13.3%) and other relatives (20.5%) respectively.

As well as descriptive data, when evaluated sociologically, it was found that many disabled individuals feel themselves different from other members of their societies in this study and many other studies. Some disabled expressed that their impediments have not a significant impact on their self-expression. There are also

many disabled people who consider that their impediments are the flavor of their achievements in their life (Peters, 2000:583-602).

As we have seen, disability describes a case in which both individual and social problems. Economic and social conditions of the societies have shaped the dominant approaches defining the disability (Sanal:2016). As we all know, a lot of people with disabilities, due to their life conditions can not sustain their social life without support systems. The most important and modern structure used to raise the quality of life of disabled in the modern world is the social state. Thus, the social state, with social structures and social institutions aims to create social integration of people with disabilities. This also reflects the quest for social reconciliation in the modern world (Acar, 2001:64).

There are a lot of disabled people in our society. Therefore, when making regulations relating to people with disabilities, it should be considered that not only the disabled, also the needs of the family he/she was living in. As well as medical, economic and, educational assistance psychological support should also be a priority. It should be noted that people with disabilities feel a great need to support their lives with their families (Tümekaya, 2001:101).

IV. CONCLUSION AND RECOMMENDATIONS

This study was carried out in the province of Gümüşhane and its surrounding located in the Black Sea Region in our country. During this study conducted in order to create the disability database of Gümüşhane province, data about 4 608 disabled was obtained and the descriptive data of the disabled was identified. This data was transferred to a computer, and in order to be kept this data up to date an on-line disability database working across the country should be established and the data should be updated by the hospitals and by the Provincial Directorate of Family and Social Policies.

It has been found out that 3.4% of the population was disabled in Gümüşhane province. This rate is higher than the average of Turkey, within normal limits based on the average of region. This situation can be explained that the ratio of elderly people living in the Black Sea Region is very high and migration is very common in the region. When evaluated from this point, our results were compatible with data obtained from Turkey Disability Research.

The vast majority of disabled had no occupation. Only 2.4% of the disabled were found to be civil servants, and 4.4% were found to be workers. Still the vast majority of disabled were not working. The vast majority of disabled were living with their spouse and/or with their children. It has been found out that 16.3% of the disabled could not get out of the house by themselves, 36.7% could get out of the house with the help of someone else, and 47.0% could get out of the house by themselves.

The rate of disabled benefiting from home care services was found to be only 28.7%. The rate of disabled taking disability pension was also found to be only 30.5%. These data indicates us that disabled cannot benefit enough from the rights granted to them. Hence, disability should become an important item on the agenda of developing countries as well as developed ones. In the determination of the country's health and social policy, the disability should be evaluated. Qualitatively and quantitatively researches related to the subject should be carried out and the participation of disabled people in social life and work life must be maintained. Disabled people should not be alienated and, socially ostracized, they should be articulated in social life.

REFERENCES

- ACAR, Hakan,(2001). Neoliberal (Yeni sağ politikalar ve engelliler) *Ufku Ötesi Bilim Dergisi*, 1, (2), pp. 55-64.
- AYSOY, Mehmet (2004). "Engelliliğin Sosyolojisi Avrupa Birliği Sürecinde Özürlülüler Politikası", *Sosyal Politika Akademisi, Spakutufane.Blogspot.Com/P/Engelliliğin-Sosyolojisi.Html*.1-20.
- AYDIN, Dursun (2005). "Home care services", *Sağlıklı Nesiller Derneği Sağlık ve Eğitim Yayınları* 1, pp. 14-62.
- İZGİ, Mustafa Cumhur , ÇOBAN, Mustafa (2008) " Critical View to the Regulation of Home Care Services", *T Klin J Med Ethics, Law and History* 16: pp. 43-48.
- Komasyon Raporu (1999). T.C. Başbakanlık; ÖZİDA; I. Özürlüler Şurası; Özürlülerle İlgili Yönetim ve Örgütlenme; Özürlülerle İlgili Sosyal Politika Yönetim ve Örgütlenme Komasyon Raporu; Ankara, 29.11- 02.12.1999.
- KARATAŞ, Kasım (2000). *Görme Özürlülerin eğitimi*, Ankara: Körler Federasyonu Yayınları.
- KARATAŞ, Kasım (2001). "Engellilerin Topluma Kazandırılması", *Ufku Ötesi Aylık Dergi*. 5, 29, ss. 10-19.
- PETERS, Susan (2000). "Is there a Disability Culture? A syncretisation of Three Possible World Views" *Disability & Society*, 15/ 4, pp. 583-602.
- SAPANCI, Filiz(2013) *Sağlık Hizmetlerinde Engellilik Kavramı ve Engellilerin Sağlık Hizmetlerinden Yararlanmaları*, Yayınlanmamış Yüksek Lisans Tezi. İstanbul: Beykent Üniversitesi Sosyal Bilimler Enstitüsü.
- Social services law (1983). 24/05/1983 tarih ve 2828 sayılı "Sosyal Hizmetler Kanunu" (Social Services Law) (27/05/1983 tarih ve 18059 sayılı Resmi Gazetede yayımlanmıştır).
- Turkey Disability Survey (2009). T.C. Başbakanlık Devlet İstatistik Enstitüsü Başkanlığı ve T.C. Türkiye Özürlüler İdaresi Başkanlığı, Türkiye Özürlüler Araştırması, Ankara.

TÜMKAYA, Songül (2001). Engelli Çocukların Ailelerine Yönelik Psikolojik Danışma Hizmetleri Gereksinimi, *Ufkun Ötesi Bilim Dergisi*, 1 (2), pp. 95-102.

YALIN, Hayat (2011). *İnme Sonrası Hastaların Fonksiyonel Durum, Engellilik ve Yaşam Kaliteleri*, Yayımlanmamış Doktora Tezi, İstanbul: Marmara Üniversitesi Sağlık Bilimleri Enstitüsü.

WHO (1981). Disability Prevention and Rehabilitation, Report of the WHO Expert Committee on Disability Prevention and Rehabilitation, Technical Report Series 668, Geneva.

WHO (2011). World Health Organization and The World Bank. "World report on disability 2011". WHO Library Cataloguing-in-Publication Data.

WHO (2014). "Disability and Health", Fact sheet No: 352, Reviewed December.

<http://www.cetinozbey.net/?pnum=264&pt=Engel+T%C3%BCrlerinin+S%C4%B1n%C4%B1land%C4%B1r%C4%B1lmas%C4%B108.04.2016>.

<http://webcache.googleusercontent.com/search?q=cache:DIySDy8es6wj:calismatoplum.org/sayi36/sosyalhaklar.pdf+sosyal+haklar.net&cd=8&hl=tr&ct=clnk&gl=tr> 08.04.2016.