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SOCIO-ECONOMIC PROBLEMS OF VISUALLY DISABLED

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Abstract

Visual disability is an important public health problem with serious social and economic effects associated with decreased quality of life and increased dependency on adults worldwide. The study was carried out to assign the social and economic problems experienced by visually disabled people, to draw attention to the problem and to encourage other studies to be done. This study is a retrospective cohort study. All patients who applied to the state hospital, which is the only hospital in Gümüşhane province for a period of 5 years were included in the study. 1325 people whose visual disability was detected by scanning "disability reports" and based on clinical data were included in the study. All data obtained were recorded to the computer. The data were analyzed with a statistical package program on the computer. The majority (46.6%) of the seeing disabled were illiterate. While the great majority (90.5%) of the visually disabled were taking disability support payment, only 32.4% of the disabled were taking disability support payment, only 32.4% of the disabled were taking disabilities do not sufficiently benefit from the rights granted to them and need more social support. For this reason, a national disability policy and action plan should be created and public awareness should be raised.

Keywords: Disability, Visually Disabled, Blindness, Socio-economic Problems, Disabled Salary.

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1. Introduction

Visual disability is an important public health problem with serious social and economic effects associated with decreased quality of life and increased dependency on adults worldwide (McCarty et al.,2001, 324; Ramrattan et al.,2001, 1790). This problem is a multidimensional field that concerns not only people with disabilities and their families but also economic and social fields such as education, employment and social security (Şahinöz et al., 2013, 113).

Disability is the event that a healthy person cannot do the work that they can do without needing someone elses help, the inability to do as a result of any inborn or later deficiencies in their physical or mental abilities and the person who encounters such a situation is called disabled (United Nations, 2020, 15).

Disabled; is a person who has been unable to comply with the needs of normal life as a result of any disability or accidental loss of physical, mental, spiritual, emotional and social abilities by birth or afterwards, and as a result, needs protection, care, rehabilitation, counseling and support services (Şahinöz et al., 2013, 115).

Disability limits one's vital activities and makes it difficult for them to continue their lives. Disability is perceived as a means of helplessness, indulgence, weakness, helplessness, pity and begging in the world (Şahinöz et al., 2013, 121).

Disability rates increase at older ages. 77.80% of the disabled population do not participate in the labor force at all. It is stated that the disability rate is higher in males and in rural areas (Türkiye Özürlüler Araştırması, 2002, 22).

According to the data of Turkey Disability Survey (2002); the proportion of the disabled is 3.22% in the Black Sea region, where our city is located (Türkiye Özürlüler Araştırması, 2002, 28).

In our previous research, 3.4% of the society was found to be disabled in Gümüşhane province (Şahinöz et al., 2016, 1319). According to the Turkey Disability Survey, seeing disability rate was 60 per ten thousand in Turkey (Türkiye Özürlüler Araştırması, 2002, 32).

The sense of sight is very important in human life due to the rich sense inputs it provides. It provides about 80% of the information someone gains throughout human life with the sense of seeing. Visual disability negatively affects motor learning, interaction ability and perception of spatial status (Warren, 1995, 879; Salive et al., 1994, 290; Haymes et al., 2002, 82). Visually disabled people are prone to a sedentary lifestyle and their physical activity levels are quite low (Oh et al., 2004, 41).

For the visually disabled, finding buildings, streets and avenues and reaching where they want to go is quite a stressful and difficult task. Problems such as unsuitable structures, pavements, and lack of guidance make accessibility more difficult.

Accessibility covers the possibility of education, working, benefiting from health services, participating in social, cultural, sports and economic activities. Disabled people who have difficulties getting out of their home when there are no suitable environmental conditions for the disabled cannot even use education, health and rehabilitation services sufficiently, they have to live away from social and cultural living areas, parks and gardens, and social life in short (Çağlar, 2012, 561).

In our country, there are necessary legal regulations regarding accessibility for disabled people, but implementation is not sufficient; buildings, pavements and means of transportation are the most important problems. In addition, parking of vehicles in front of pavements and ramps and the use of parking lots reserved for disabled people create social barriers (Salar, 2011, 125).

Negative emotions, thoughts and behaviors in the society for the disabled cause them to be excluded from the society. Studies conducted in recent years show that there are positive developments in this regard (T.C. Başbakanlık Özürlüler İdaresi, 2008, 11). Visually disabled, have a sense of insecurity, fear of falling and bump, and fear of being watched; panic in the face of difficulties. Therefore, self-efficacy and coping skills are not developed sufficiently in self-development and social life (Özkubat, 2010, 24).

Visual disability do not only cause difficulties in performing daily life activities; it also causes addiction and social isolation. Visually disability has been reported to restrict participation in social life and negatively affect school functionality and overall quality of life (Wong et al., 2009, 509); Alma et al., 2012, 89). Therefore, it is essential to support the social participation of the visually disabled. Social participation is defined as interpersonal interaction (Alma et al., 2012, 90). According to WHO; social participation is the inclusion in the society that people need to solve their problems. Social participation motivates people, provides awareness and solidarity (WHO, 2002, 12).



In the studies based on interviews, it was observed that congenital blind people felt more fortunate than those who lost their vision afterwards. The reason for this is that people with congenital visual disability did not have any sense of loss as they did not have an idea of what was seen. The situation is automatically accepted in congenital loss of vision. Psychological trauma and depression are often accompanied by the adaptation periods of individuals who subsequently experienced vision loss (Schinazi, 2007, 18; Thurston et al., 2010, 96).

There are quite a few studies on socio-cultural issues of visually disabled individuals in Turkey. This research is a study covering the entire province and the visually disabled in Turkey is qualified to give accurate information about the socio-economic problems. The results of this research are very important in terms of knowing the socio-economic problems of the visually disabled and determining the right policies for the measures to be taken.

The study was carried out to assign the social and economic problems experienced by visually disabled people, to draw attention to the problem and to encourage other studies to be done. The added value of this study is to determine the needs and expectations of disabled people, to meet these needs as much as possible, and to provide community-based rehabilitation of the visually disabled.

2. Materials & Methods

This study is a retrospective cohort study. The study was conducted in Gümüşhane located in the north-east of Turkey, a province of about 160 000 inhabitants. All patients who applied to the state hospital, which is the only hospital in Gümüşhane province for a period of 5 years were included in the study. 1325 people whose visual disability was detected by scanning "disability reports" and based on clinical data were included in the study. Persons with partial or no vision in one or both eyes, those with color blindness and/or night blindness, and those using eye prostheses were considered disabled.

These people were visited at their homes between 01 May 2015 - 31 December 2018 and field work was carried out. Ethics committee approval dated 10.04.2015 and numbered 2015/4 was obtained from Gümüşhane University Ethics Committee before starting the research. Medical data of the disabled were obtained from the disability reports provided by the hospital, and socio-demographic data were obtained through a questionnaire developed by the researchers and was applied by face-to-face interview technique.

All data obtained were recorded to the computer. The data were analyzed with a statistical package program on the computer.

3. Results

The rate of men among the visually disabled (51.3%) was higher than that of women, and the rate of those aged 65 and over was higher than other age groups (48.4%).

The majority (46.6%) of the seeing disabled were illiterate, 24.6% were primary school graduates and only 1.0% were graduated from the university.

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Demographic Characteristics		Number	%
Gender	Male	680	51.3
	Female	645	48.7
Age Groups	≥65	641	48.4
	55-64	243	18.3
	25-34	125	9.4
	35-44	122	9.2
	45-54	117	8.8
	15-24	64	4.8
	<15	13	1.0
Educational Level	Illiterate	618	46.6
	Primary School	326	24.6
	Literate	259	19.5
	Secondary School	109	8.3
	University Associate Degree +	13	1.0
	Rural	307	23.2
Residential Place	Urban	1018	76.8

76.8% of the disabled in the research group lived in urban areas.

Table 1. The Demographic Characteristics of the Seeing Disabled Assigned During the Study

While the great majorities (90.5%) of the visually disabled were not working, 6.5% were retired, 1.3% were working at private sector and 1.2% were working at public sector.



While 24.9% of the seeing disabled were taking disability support payment, 32.4% of the disabled were taking disabled salary.

Economic Characteristics		Number	%
Working Status	Not working	1199	90.5
	Retired	93	7.0
	Working at public sector	17	1.3
	Working at private sector	16	1.2
Disabled Salary	Taking disabled salary	429	32.4
	Not taking disabled salary	896	67.6
Disability Support Payment	Taking disability support payment	330	24.9
	Not taking disability support payment	995	75.1

Table 2. The Economic Characteristics of the S	Seeing Disabled	Assigned During th	e Study
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It has been determined that the vast majority of the visually disabled individuals (76.2%) were married, 12.0% of their spouses have died, 8.5% have never married, and 0.2% have been divorced or lived separately from their spouse. It was also determined that 79.2% lived in the nuclear family, 11.4% in the extended family and 9.4% in the separated family.

It has been determined that the majority of visually disabled individuals live with their spouse and / or children (81.8%), secondly with their mother and / or father (9.0%), and unfortunately some of them live alone (5.1%).

It has been determined that 10.8% of the visually disabled individuals cannot go out of their house alone, 32.1% can go out of their house with the help of someone else and 57.1% can go out of their house on their own.

24.9% of the visually impaired received state-finance home care services; it has been determined that 20.0% of these disabled people are cared for by their spouses, 19.7% by their mothers and 17.6% by their bride.

		0	
Social Characteristics		Number	%
	Married	1010	76.2
Marital Status	Spouse died	159	12.0
	Never Married	112	8.5
	Divorced	3	0.2
	Not in the age of marriage	41	3.1
	Nuclear	1049	79.2
Family Type	Extended	151	11.4
	Separated	125	9.4
	Spouse/ Children	1084	81.8
	Mother/ Father	119	9.0
With whom he/ she lives	Alone	68	5.1
	Brother/ Sister	48	3.6
	Caretaker	5	0.4
	Nursing home	1	0.1
	On their own	757	57.1
Getting Out of Their Home Status	With help	425	32.1
	Can not	143	10.8
Home Care	Receiving home care	330	24.9
Home Care	Not receiving home care	995	75.1
	Spouse	66	20.0
Caretaker	Mother	65	19.7
	Bride	58	17.6
	Daughter	40	12.1
	Son	8	2.4
	Father	5	1.5
	Brother/Sister	14	4.2
	Other relatives	64	19.4
	Others	10	3.0

Table 3. The Social Characteristics of the Visually Disabled Assigned During the Study

The households where people with disabilities lived were visited one by one, and the data such as physical changes to be made in order to bring the disabled into the society, the current situation of the

disabled, the tools and devices they need, their own preferences and suggestions, and the tools and devices used were detected.

It has been determined that 339 (25.6%) of 1325 visually disabled people use walking stick, 34 (2.6%) eyeglasses, 26 (2.0%) navigation device (seeing eye device) and 3 (0.2%) use white cane. Rehabilitation devices used and needed by visually disabled individuals are shown in Table 4.

	Used		Neede	d
Device Name	Number	%	Number	%
Walking Stick	339	25.6	26	2.6
Eyeglasses	34	2.6	9	0.7
Navigation	26	2.0	12	0.9
White Cane	3	0.2	4	0,3

Table 4. Rehabilitation Devices Used and Needed by Visually Disabled Individuals

4. Discussion

When the demographic characteristics of the visually impaired individuals in the research group are examined; it is seen that men (51.3%) are slightly more than women, 65 and over (48.4%) are significantly higher than other age groups, and the majority (76.8%) live in urban areas.

It is already a known fact that the rate of disability in our country is higher in men and living in the rural areas (Türkiye Özürlüler Araştırması, 2002, 23). Although it is an expected result that visually impaired individuals are mostly in older age groups, these rates can be reduced with healthy aging policies. The reason why the majority of visually impaired individuals live in the urban area is thought to be related to the country's overall rural-urban population ratio.

It has been determined that the educational level of visually impaired individuals are quite low, and there is almost no university or higher graduates. It is an important social problem that the visually impaired individuals do not have a good educational level, nearly half (46.6%) are illiterate and university education (1.0%) is almost non-existent.

In our country, the majority of the visually disabled (83%) can get education up to primary school level, but only a few (2%) can receive university education (Türkiye Özürlüler Araştırması, 2002, 45). In the United States, almost two thirds of even advanced visually disabled people are trained up to high school (National Federation of the Blind, 2020, 11).

Although the thoughts of overall society is positive for disabled in Turkey; there is hidden exclusion, such as pity, isolation from certain settings, and asking them to get education in separate schools (T.C. Başbakanlık Özürlüler İdaresi, 2008, 17). We think that negative environmental and social factors cause education of visually disabled individuals to be inadequate. As a matter of fact, in a qualitative research, the statements of a visually impaired support this idea: "I finished primary school. I really wanted to continue my education, but I couldn't attend school for both family and social reasons. Being visually disabled and negative environmental conditions prevented me from continuining my education. In addition to my visual disability I also felt insufficient all my life when I have a lack of education" (Özkan, 2013, 29).

Legislation on the disabled encourages equality in education and the provision of educational conditions suitable for the disabled (Engelliler Hakkında Kanun, 2005, 1). Despite this legal infrastructure, it is unacceptable that the educational level of the visually disabled is poor. It is necessary to make more intense efforts on this issue, to develop effective and comprehensive solution strategies and to implement them as soon as possible (T.C. Aile ve Sosyal Politikalar Bakanlığı, 2019, 1). The establishment of "disabled units" in schools and universities will facilitate this aim (Özkasap, 2009, 24).

The most important factor affecting the quality of life of visually disabled individuals is income and, accordingly, the socioeconomic level (Brown and Barrett, 2011, 368). Our country is one of the countries with the lowest participation rate of disabled people to labour force (World Health Organization, 2011, 26). It is stated that the participation rate of individuals with disabilities in the workforce is 35.4% in men and 12.5% in women and 22.1% in total (T.C. Aile ve Sosyal Politikalar Bakanlığı, 2019, 1). Visually disabled individuals are not able to work because of their disability and therefore have economic difficulties and are in need of more social support (Askari et al., 2010, 37).

In our study, it was found that the majority of the visually disabled individuals (90.5%) did not work. Legislation on the disabled clearly states the proportion of disabled people who must be employed, measures to facilitate the employment of the disabled, physical arrangements to be made at the workplace, guidance and professional counseling services. According to the provisions of this legislation, it is



compulsory to employ 3% disabled people in workplaces with more than 50 employees and 4% in public institutions (Engelliler Hakkında Kanun, 2005, 1; Devlet Memurları Kanunu, 1965, 1; Engelli kamu personel seçme sınavı ve engellilerin devlet memurluğuna alınmaları hakkında yönetmelik, 2014, 1). As a result of these obligations; the number of disabled civil servants employed has increased approximately 7 times in the last 20 years and the number of disabled workers employed in the private sector has increased approximately 2.5 times (T.C. Aile ve Sosyal Politikalar Bakanlığı, 2015, 2).

However, the planned goal in the employment of disabled people has not been reached (Toplumsal Haklar ve Araştırmalar Derneği, 2015, 15).

Although there are sufficient legal arrangements for the disabled to participate effectively in business life, there are social and socially rooted obstacles on this issue (Çınarlı, 2010, 7). In a study conducted in our country; it is stated that 70% of individuals with disabilities face difficulties in obtaining jobs and professions (Burcu, 2007, 15).

If we look at the positive side, it is gratifying that 7% of disabled individuals retire, 32.4% of them receive disability pension and 24.9% of them benefit from home care services, in other words, 65% of them have an income. Although home care support is not counted as the direct income of the disabled, it indirectly contributes to the economic situation of the disabled because it is paid to the relatives.

In Turkey salaries referred to as the 2022 pension is paid in the three-months period if the disability rate is over 40% and if the disabled is poor. The measure of poverty here is; the total income of the household is divided by the persons over the age of 16, and if the amount obtained is less than 1/3 of the net minimum wage, it is considered as powerty. Close relatives who provide 24-hour continuous care of the disabled are paid by the state at a monthly net minimum wage. In order to benefit from home care services, per capita income should be less than 1/3 of the net minimum wage and the disabled should be in need of care (Özdamar & Çakar, 2015, 173).

The fact that the majority of visually diasabled individuals (76.2%) are married, 79.2% live in the nuclear family, and the majority of them live with their spouse and / or children (81.8%) is a very positive situation in terms of socio-economy. As a matter of fact, in a qualitative research on the visually disabled; in case of a problem, it is stated that visually disabled individuals consult their family and those they trust before deciding, even if the problem is not solved, this support relieves the disabled and receiving family support always gives confidence to the disabled person (Özkan, 2013, 32). However, visually disabled people who have never married (8.5%) and had to live alone (5.1%) are deprived of family support and pose an important social problem.

Being visually disabled also negatively affects psychological and physiological well-being; it causes loss of sense of independence, stress and fears. Fear of falling reduces the desire to go out of the house alone. Finding streets, buildings and addresses is a difficult and stressful task for the visually disabled. In addition, problems such as unsuitable buildings, pavements, and lack of guidance make accessibility more difficult. When environmental conditions suitable for disabled people are not created; disabled people cannot even use education, health and rehabilitation services adequately, they have to live far from social and cultural living areas, parks and gardens, and social life in short (Wong et al., 2009, 510, Alma et al., 2012, 89). It has been reported that visually disability significantly causes social withdrawal and 46% of the visually disabled individuals experience significant problems in social participation (Ress et al., 2010, 2893). Social participation is the involvement of people in the society they need to solve their problems. Social participation motivates people, increases awareness and solidarity (WHO, 2002, 14). In our research, it was found that one out of 10 visually disabled people could not go out of the house alone, and three were able to go out of the house with the help of someone else. This may be an indication that the environment is not sufficiently organized for the disabled and that disabled people are not technologically supported enough. According to a study supporting this idea; the most important problem of visually disabled individuals is negative environmental conditions. In this study, it has been stated that the problems of getting on and getting off public transportation, lack of audio signs, the height of the pavements and the buildings not being suitable for the disabled are the most important difficulties and therefore individuals with visual disabilities do not want to go out on their own (Burcu, 2007, 17).

Although there are necessary legal arrangements for making environmental regulations suitable for the disabled, implementation is not sufficient. In addition, parking of vehicles in front of pavements and ramps and the use of parking lots reserved for disabled people are also social obstacles (Salar, 2011, 129).

In our country, the strategy of providing care of disabled individuals with families at home was adopted, and it was envisaged to provide financial support, caregiver support, guidance and counseling



services to the family for home social care service (T.C. Aile ve Sosyal Politikalar Bakanlığı, 2019, 2). Social care service at home; is a social service model provided to support the disabled person in his / her social environment, provide community-based rehabilitation, ensure a happy and peaceful life, and alleviate the burden of care in the family (Karaman et al., 2015, 352).

In our study, it was determined that 24.9% of the visually disabled individuals benefited from home care services. Social care services at home financed by the state are considered numerically sufficient. As a matter of fact, the rate of benefiting from care services is compatible with the rates in scientific research (Sahinoz et al., 2010, 690). However, social care services at home are not at the desired level in terms of quality and competence. Because the vast majority of disabled people in our research group are cared for by their spouse and / or mother. This situation is very necessary and desired in terms of love and care and financial support for the family, but it is insufficient in terms of knowledge and skills of the caregivers.

With the technological opportunities provided for the disabled, the level of disability can be reduced and they can do their daily activities without being dependent on anyone else. In our study, it was determined that 339 (25.6%) of 1325 visually disabled people used walking stick, 34 (2.6%) eyeglasses, 26 (2.0%) navigation device (seeing eye device) and 3 (0.2%) white cane.

In a study on the visually disabled; it has been determined that the most important problems are getting to know the environment, pedestrian transportation, home life, education and access to information. It has been stated that 80.5% of the visually disabled people want to use a technological product that "introduces the environment in which they are located" (Altı Nokta Körler Vakfı, 2011, 21). In another study examining the use of assistive devices of individuals with low vision; it is stated that individuals with disabilities use eyeglasses (64%), white canes (36%) and walking sticks (46%), respectively (Özkan, 2013, 22).

5. Conclusion

It has been determined that the educational level of visually disabled individuals are quite low, and there is almost no university or higher education graduates. It is an important social problem that almost half of the visually impaired individuals are illiterate and those who have university education are almost nonexistent.

This result shows that visually disabled individuals cannot benefit from educational services sufficiently. For this reason, necessary physical and social studies should be carried out for individuals with visual disabilities to benefit more from formal education. In addition, open education system should be used and developed for this purpose.

It was determined that the majority of the visually impaired individuals (90.5%) were unemployed, 7% were retired and 32.4% received disability pension.

It was found that the vast majority of visually disabled individuals were married, 8.5% were never married, the vast majority live with their spouse and / or children (81.8%) and a minority live alone (5.1%), 10.8% cannot leave the house alone, 32.1% can go out of the house with the help of someone else.

For the visually disabled individuals who cannot get out of their house, they need to be provided with a professional education service at home. Relevant institutions should work on this issue.

It has been determined that 24.9% of visually disabled individuals benefit from state-financed home care services and the vast majority are cared for by their spouse and / or mother. This is a very necessary and desired situation in terms of love and attention, and financial support to the family, but it is a negative situation in terms of insufficient knowledge and skills of the caregivers.

It has been determined that 339 of 1325 visually impaired people used walking stick, 34 of them use eyeglasses, 26 of them use navigation device (seeing eye device) and 3 of them use white cane.

Visual disability not only causes difficulties in performing daily life activities; it also causes addiction and social isolation. Therefore, it is needed to support the social participation of the visually disabled.

Disabled people who can get out of the house with the help of someone else should use the technological opportunities to move without being dependent on anyone. Necessary institutional arrangements and bureaucracy should be reduced in order to expand these services. In addition, inventory should be created to ensure efficiency in rehabilitation devices.

The care of the disabled should be provided by specialist care staff. In this regard, the maintenance staff graduated from the relevant departments of the universities should be employed by the state. In addition, organizations providing professional home care services should be encouraged.



Efforts should be given to provide training to meet the needs of the disabled, to gain skills and to create a suitable living space for the disabled. These studies are; identification of disabled people should include care and rehabilitation, family education, family counseling and social benefits.

The main goal should be to prevent disability as much as possible, to make rehabilitation services efficient and effective, and to ensure the full participation of disabled people in normal life. The main purpose of the studies to be carried out in this regard should be to ensure that people with disabilities access all the opportunities of the society and benefit from services equally.

The physical, mental and social skills of the disabled individual should be developed and this disabled person should be brought to the society as a working and producing individual. Visually disabled constitutes the most active group among disabled groups. Many visual disability benefit greatly from optical correction. Eyeglasses and related services should be increased. Eye donation works well in some corneal blindness. Therefore, necessary trends and campaigns should be organized to increase eye and organ donations.

As a result; these findings show that people with disabilities do not sufficiently benefit from the rights granted to them and need more social support. For this reason, we believe that researchs should be supported in order to collect reliable data on the problems of individuals with disabilities, create a national disability policy and action plan and raise public awareness.

REFERENCES

5378 sayılı ve 01.07.2005 tarihli Engelliler Hakkında Kanun (Law on Disabled People No. 5378 dated 01.07.2005). *T.C. Resmi Gazete (T.R. Official Newspaper)*, 7 Temmuz 2005 (July 7, 2005), Sayı (Issue): 25868.

657 sayılı ve 14 Temmuz 1965 tarihli Devlet Memurları Kanunu (Civil Servants Law No. 657 dated 14 July 1965). T.C. Resmi Gazete. Tarih: 23 Temmuz 1965 (T.R. Official newspaper, Date: 23 July 1965), Sayı (Issue): 12056.

Alma, M.A., Van der Mei, S.F., Groothoff, JW, & Suurmeijer, TP (2012). Determinants of social participation of visually impaired older Adults. *Quality of Life Research*, 21: 87–97.

Altı Nokta Körler Vakfı (Six Dots Foundation for the Blind). (2011). Görme Engellilerin Günlük Yaşama ve Eğitime Katılum Projesi (Project for the Visually Impaired Participation in Daily Life and Education). Erişim Tarihi (Access Date): 29 Haziran 2013 (29 June 2013) http://www.6nokta.org.tr

Askari, S., Safaroudi, N., Kamali, M., Khalafbeigy, M. (2010). Environment and Blindness situation in Iran. Iranian Rehabilitation Journal, 8(11): 34-42.

Brown, R. L., Barrett, A. E. (2011). Visual impairment and quality of life among older adults: an examination of explanations for the relationship. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 66(3): 364–373

Burcu, E. (2007). Türkiye'de Özürlü Birey Olma: Temel Sosyolojik Özellikleri ve Sorunları Üzerine Bir Araştırma (Being a disabled person in Turkey: Basic Characteristics and Sociological Problems of Research). 1. baskı (1st edition), Hacettepe Üniversitesi Yayınları (Hacettepe University Press), Ankara.

Çağlar, S. (2012). Engellilerin Erişebilirlik Hakkı ve Türkiye'de Erişebilirlikleri (Accessibility Rights of Persons with Disabilities and Accessibility in Turkey). Ankara Üniversitesi Hukuk Fakültesi Dergisi (Journal of Ankara University Faculty of Law), 61 (2): 541-598. DOI: 10.1501/Hukfak_0000001666

Çınarlı, S. (2010). Türkiye ile Bazı Avrupa Birliği Ülkelerinde Engellilik Kavramı ve Engelli İstihdamı ile ilgili Düzenlemelerin İncelenmesi (Some European Union and Turkey Analysis of Regulations on Employment of Disabled Disability Concept and in the country). ÖZ-VERİ Dergisi (ÖZ-VERİ Journal), 7.

Engelli kamu personel seçme sınavı ve engellilerin devlet memurluğuna alınmaları hakkında yönetmelik (Regulation on public personnel selection exam for the disabled and the recruitment of disabled people to the civil service). *T.C. Resmi Gazete,* Tarih: 7 Ocak 2014 (T.R. Official Newspaper. Date: January 7, 2014), Sayı (Issue): 8906

Haymes SA, Johnston AW, Heyes AD. (2002) Relationship between vision impairment and ability to perform activities of daily living. *Ophthalmic and Physiological Optics*, 22(2): 79–91

Karaman, D., Kara, D., Atar, N.Y. (2015). Evde Sağlık Hizmeti Verilen Bireylerin Hastalık Durumlarının ve Bakım Ihtiyaçlarının Değerlendirilmesi: Zonguldak Örneği (Assessment of Disease Conditions and Care Needs of Individuals Who Are Given Home Health Care: The Example of Zonguldak). Gümüşhane Üniversitesi Sağlık Bilimleri Dergisi (Gümüşhane University Journal of Health Sciences), 4(3): 347-359.

McCarty, C.A., Nanjan, M.B., Taylor, H.R. (2001). Vision impairment predicts 5 year mortality. Br J Ophthalmol, 85:322-26.

National Federation of the Blind. https://archive.nfb.org/blindness-statistics. Erişim tarihi (Date of Access): 10.2.2020

Oh, H.K., Öztürk, M.A., Kozub, F.M. (2004). Pyhsical activity and social engagement patterns during physical education of youth with visual impairments. RE VIEW, 36(1): 39-48.

Özdamar, M, & Çakar, E. (2015). Muhtaç Yaşlılar ile Engellilere Aylık Bağlanması ve Bunların Bakımını Üstlenenlere Evde Bakım Ücreti Ödenmesinin Şartları (Conditions for Paying the Elderly and Disabled People Monthly and Paying Home Care Fee to Those Who Take Care of Them). *İş ve Hayat (Work and Life)*, 1(2): 169-183.

Özkan, E. (2013). Kör ve az gören erişkin bireylerde özyeterlilik, sosyal kaygı, baş etme becerileri ve çevrenin toplumsal katılıma etkisinin incelenmesi (Investigation of self-efficacy, social anxiety, coping skills and the impact of the environment on social participation in adult blind and low vision individuals). Hacettepe Üniversitesi (Hacettepe University), Sağlık Bilimleri Enstitüsü (Health Sciences Institute), Yüksek Lisans Tezi (Master Thesis), Ankara, 2013.

Özkasap, M. (2009). An Exploration of Self-Efficacy Beliefs for Self-Regulated Learning and Perceived Responsibility for English Learning of EFL Students in a Turkish University. Master's Thesis, Bilkent University the Department of Teaching English as a Foreign Language, Ankara Özkubat, U. (2010). Görme Engelli, Zihinsel Engelli ve Olağan Gelişim Gösteren Çocukların Sosyal Becerilerinin Karşılaştırılması (Comparison of



Ramrattan, R.S., Wolfs, R.C., Panda-Jonas, S., et al. (2001). Prevalence and causes of visual field loss in the elderly and associations with impairment in daily functioning: the Rotterdam Study. *Arch Ophthalmol*, 119: 1788–94.

Ress, G., Tee, H.W., Marella, M., Fenwick, E., Dirani, M., & Lamoureux EL (2010). Vision-Specific Distress and Depressive Symptoms in People. *Ophtalmology & Visual Science*, 51(6): 2891-2896.

Sahinoz, S., Sahinoz, T., Eker, H. H., & Unlu, S. E. (2010). Assessment of Medical Home Care Needs in Turkish Population. Pakistan Journal of Medical Sciences, 26(3): 688-691.

Şahinöz, S., Şahinöz, T., Köroğlu, M. A., Köroğlu, C. Z. (2016). A Practical Research On Disability in The Province of Gümüşhane. Uluslararası Sosyal Araştırmalar Dergisi / The Journal of International Social Research, 9(43): 1317-21.

Şahinöz T, Öncel M, Şahinöz S, et al. (2013). *Engelli Sağlığı (Disability health)*. Gümüşhane: Gümüşhane Üniversitesi Yayınları (Gümüşhane University Publications).

Salar, S. (2011). Omurilik yaralanması olan kişilerde çevresel faktörlerin toplumsal katılım ve yaşam memnuniyetine etkisi (The effect of environmental factors on social participation and life satisfaction in people with spinal cord injury). Yüksek Lisans Tezi (Master Thesis). Hacettepe Üniversitesi Sağlık Bilimleri Enstitüsü (Hacettepe University Institute of Health Sciences), Ankara.

Salive, M. E., Guralnik, J., Glynn, R. J., Christen, W., Wallace, R. B., & Ostfeld, A. M. (1994). Association of visual impairment with mobility and physical function. *Journal of the American Geriatrics Society*, 42(3): 287-292.

Schinazi, V. R. (2007). *Psychosocial implications of blindness and low-vision*. Centre for Advanced Spatial Analysis University College London - Working Papers Series.

T.C. Aile ve Sosyal Politikalar Bakanlığı (T.R. Ministry of Family and Social Policies) (2019). *Engelli ve Yaşlı İstatistik Bülteni (Disabled and Elderly Statistics Bulletin)*. https://ailevecalisma.gov.tr/media/9085/buelten-haziran2019-son.pdf Erişim tarihi (Date of Access): 10.02.2020

T.C. Aile ve Sosyal Politikalar Bakanlığı (T.R. Ministry of Family and Social Policies). 2019-2023 Stratejik Planı (2019-2023 Strategic Plan). http://www.sp.gov.tr/upload/xSPStratejikPlan/files/HIP8i+ACSHB_2019-2023_Stratejik_Plan.pdf Erişim Tarihi (Date of Access):14.02.2020

T.C. Aile ve Sosyal Politikalar Bakanlığı, Engelli ve Yaşlı Hizmetleri Genel Müdürlüğü (T.R. Ministry of Family and Social Policies, Disabled and Elderly Services General Directorate) (2015). Engelli ve yaşlı bireylere ilişkin istatistiki bilgiler (Statistical information about disabled and elderly individuals). Yıllık İstatistik Bülteni (Annual Statistics Bulletin).

T.C. Başbakanlık Özürlüler İdaresi (T.R. Prime Ministry Disability Administration) (2008). Özürlülük Eğitimi: Toplum Özürlülüğü Nasıl Anlıyor Temel Araştırması (Disability Education: How Community Understands Disability Basic Research). Ankara. https://www.ailevecalisma.gov.tr/media/2622/toplum-ozurlulugu-nasil-anliyor-arastirma-projesi-sonuclari.pdf. Erişim Tarihi (Date of Access): 14.02.2020

Thurston M, Thurston A, McLeod J (2010). Socio-emotional effects of the transition from sight to blindness. British Journal of Visual Impairment, 28(2): 90-112.

Toplumsal Haklar ve Araştırmalar Derneği (Social Rights and Research Association) (TOHAD), İstanbul Bilgi Üniversitesi (İstanbul Bilgi University). Engelli Hakları İzleme (Monitoring Disabled Rights) (2015). *Mevzuattan Uygulamaya Engelli Hakları İzleme Raporu 2014* (*Report on the Rights of Disabled Persons from Legislation to Implementation 2014*). 1. Baskı (1st Edition), Ankara.

Türkiye Özürlüler Araştırması (Turkey Disability Survey) (2002). Başbakanlık Özürlüler İdaresi Başkanlığı (Prime Ministry Disability Administration), Devlet İstatistik Enstitüsü Başkanlığı (State Statistics Institute)

United Nations. *Convention on the Rights of Persons with Disabilities*. New York: 200. http://www.un.org/disabilities/convention/conventionfull.shtml. Erişim tarihi: 27.01.2020

Warren M (1995). Providing Low Vision Rehabilitation Services with Occupational Therapy and Ophthalmology: A Program Description. *The American Journal of Occupational Therapy*, 49(9): 877-883.

WHO (2002). Community Participation. (Erisim Tarihi (Date of Access): 14.02.2020) https://apps.who.int/iris/bitstream/handle/10665/107341/E78652.pdf

Wong, H. B., Machin, D., Tan, S. B., Wong, T. Y., & Saw, S. M. (2009). Visual impairment and its impact on health-related quality of life in adolescents. *American Journal of Ophthalmology*, 147(3): 505-511.

World Health Organization, World Bank. World Report on Disability. Geneva: WHO; 2011. http://www.who.int/disabilities/world_report. Erişim tarihi: 10.02.2020