The Integration of Elderly and Disabled People into Urban and Social Life: A New Model for Konya/Turkey-YEBAM

Theme: G_S Social segregation, poverty, and social policy in space


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ABSTRACT

The process of demographic change occurring around the world is also reflected in Turkey. The elderly population and thus, the number of people who are in need of care, will increase in Turkey in the future. Furthermore, approximately 13% of Turkey’s population consists of disabled people. This ratio reaches 20% when including disabilities caused by aging. Certain physical and mental disabilities due to aging make the lives of elderly people more difficult. Strengthening the connection of elderly and disabled people with life and society can only be possible by providing them with environments to spend their lives in a safe, healthy, independent and productive manner. It is not possible to solve this problem with the previous care models in Turkey. Environments that combine working, education and social possibilities, providing the elderly and disabled people with independent living areas, should be created. Despite prominent developments in recent years for the education of disabled people, they have not yet reached the desired level in social and professional areas. Therefore, there is an urgent need for a comprehensive research and application center for elderly and disabled people (YEBAM) that will provide a combination of care, rehabilitation, educational, social and cultural services. The purpose of this paper is to evaluate YEBAM, which will be the first center in Turkey providing education, care and job opportunities for elderly and disabled people, in social and spatial terms. The first section discusses the process of demographic change around the world and in Turkey and the search for new ways of care and design. The next section discusses the purpose, vision, regional and national importance, design concept and principles of YEBAM. YEBAM's layout plan and architectural plans were prepared taking social, psychological and spatial needs of elderly and disabled people in light of universal design principles. In this plan, elderly and disabled people will have the chance to live in their own houses and will take part in social activities in common areas. The care services required will be provided by trained personnel.

Keywords: Elderly and disabled people, disability, social integration, YEBAM (The Elderly & Disabled Training, Research, and Care Center)
1. INTRODUCTION

At the end of the twentieth century, life expectancy increased and birth rates decreased, especially in developed countries. This demographic change meant that the elderly population increased. In the process, from the beginning of the Republic to today, there have been positive developments in the socio-economic arena in Turkey. There have been recognizable changes to mother and child healthcare within the last twenty years, and a decrease in the infant mortality rates for babies under five years, and the birth rate per woman. These changes have shaped the final stage of a demographic transition in Turkey. Indeed, the Turkish population is no longer a young population with high fertility and mortality rates. In fact, this country has begun to have an aging population as well as lower fertility and mortality rates. With these positive changes we do see some problems arising related to the quality of life. Prevention, like access to health care services, elderly care services, and better working conditions for elder workers, and social security, are all necessary considerations. Factors such as industrialization, urbanization, migration of the labor force, decrease in fertility rate, and increase in divorce rates has had a disruptive effect on the traditional extended family structure. While household sizes have become smaller, the rate of elderly individuals living alone, especially women, has increased (TUIK, 2012).

International research indicates that the number of elderly who have chronic diseases at the rate of 1/5 or more is significantly high. The situation in Turkey is highly different from western countries. In Western countries, persons aged 60-64 is healthy, active and generally has a good economic condition. However, this is not the case in Turkey. The rate of patients with chronic illnesses in this age group is around 1-2% in western societies. In contrast, 27% of these people are categorized as disabled in Turkey and most of them are considered chronic patients. This rate increases to 54% in the 80 plus age group (Tufan, 2013). Clearly, studies that encourage and enable the elderly population in Turkey to be healthy and economically active are not a luxury but a requirement instead.

Conditions like isolation from society, losing certain ability and skills and constantly experiencing burnout syndrome in advancing age, damages the psychological well-being of elderly people. Good management of old age, providing the elderly with ways that they can remain consistently active in social life and activities will reduce the risk of social exclusion and enable them to spend the rest of their lives more comfortably. It is a social duty to provide
the elderly with such possibilities,, those who can be defined as the seniors of our communities, to give them a better place in the society so that they can lead productive and satisfying lives that make them happy in their own social environments. Therefore, the elderly need to be protected and supported by social policies (Genç & Dalkılıç, 2013).

2. CONCEPTUAL FRAMEWORK

The World Health Organization defines old age as the “Reduced ability to adapt to environmental factors.” People certainly lose certain abilities in the process of aging, however, the presence of various abilities cannot be denied despite the time that has passed. Some of these permanent abilities include knowledge, especially knowledge of foreign languages, imagination that makes planning easier, attention and concentration, the ability to make quick decisions for problem solving, and the ability to overcome problems in daily life. Certain disabilities, especially those that occur to the five senses, are unavoidable in the aging process. On the other hand, it is an undeniable gain that elderly people possess a valuable accumulation that is filtered throughout the years. The biggest advantage of old age is that the individual develops certain “crystallized” abilities. These abilities are the essence of what people have developed throughout their lives and in this sense; old age is “the start of an active and conscious life.” To what extent aging affects productivity is frequently discussed as it is known that the majority of works of art, philosophy and science were produced by people over the age of 65 (Kutsal, 2008).

The changes and developments in the quality of life have extended the average life-span and increased the number of elderly people, causing a lot of challenges for the elderly that need to be solved in the dimensions of psychological, social, cultural and economic life (Tufan, 2001; Danış, 2004 cited in Kurt et.al., 2010).

After the transformation of extended families into nuclear families, as a result of the age of modernization, elderly people face the possibility of living alone. This phenomenon has gradually becomes more common, especially in developing countries. Elderly people who live on their own tend to experience the chain of loneliness, isolation and finally social exclusion, which are the most important means to integrate and adapt individuals to the society. Loneliness and isolation causes depression and crisis in elderly people who lose their productivity, experience the feeling of uselessness, have reduced mental functions and
attention to the environment, give delayed or no reaction to new situations, experience short memory weakness, become resentful, self-centered, sometimes suspicious and who need other people’s help to continue their daily lives (Öz, 1992 cited in Genç & Dalkılıç, 2013).

Elderly people are excluded from many fields due to the developing and changing characteristics caused by old age. These fields include, but are not limited to: education, economy, and participation in the workforce, social life, sociocultural activities, shelter, health and politics. Physical changes and diminished qualifications are a natural outcome of aging that limit their participation in the workforce, and keeping them on the periphery of this circle. The elderly who cannot support themselves with their retirement pensions or who do not receive retirement pensions experience financial problems due to the perspective of the society towards aging, even if they do not experience workforce loss. As a result, they can experience malnutrition, may have to live in unhealthy conditions and naturally, their quality of life will decrease. In other words, the elderly will be excluded from the sources of the society because of economic exclusion (Genç & Dalkılıç, 2013).

Loneliness and social isolation intensifies for the elderly in today’s modern society. Rapid changes in all fields of life also affect and change social structure. Elderly people cannot keep up with the process of rapid changes in social structure. Therefore, the elderly experience considerable isolation in old age as a result and feel lonely. The process of social isolation makes life satisfaction and life of the elderly unbearable (Koşar, 1996; Kurt, 2008 cited in Kurt et.al., 2010). The problem of care for the elderly is undoubtedly one of the most important problems of old age. Joint efforts of all disciplines (medicine, social services, gerontology, sociology, psychology, anthropology, urban planning etc.) reach unanimity about solving the problem of care for the elderly. In Turkey, the elderly are generally cared for within the family. The children of the elderly who are in need of care, in other words, who are not self-sufficient, generally undertake the responsibility of caring. In cases when the children are unable to care for their elderly parents, the institutions care for the elderly. No matter where the elderly are cared for, the arising problems affect both the caregivers and the elderly (Koşar, 1996; Kurt, 2008; Yaşam Kalitesi Rehberi, 2000 cited in Kurt et.al., 2010).

Key concepts used in the new modern care concept are: demand-oriented services, self-sufficiency, and competence, independent living area within the accommodation, ability to manage one’s life and the ability to manage one’s own needs as much as possible. Research
has shown that feeling well depends on social status more than the possibilities a person has. Therefore, even when people begin to need care, they want to have their own independent homes in an environment where they can build neighborly relationships. When they need care and services, their homes should be rearranged according to their own wishes and needs and should be designed to adapt to their new needs. Similar to healthy elderly, the elderly who are in need of help want to make decisions about their own lives. Services provided, ambiance, activities and happiness, all function as a part of this plan (Devran, 2007).

The twentieth century has been a turning point in the history of mankind as far as the change that occurred in the age structure of the world population. Also, the elderly population increased dramatically especially as of the second half of 20th century. Considerable decreases observed in the birth rates in many parts of the world. So, elderly population increased dramatically. Especially in Europe, life expectancy at birth has recorded an increase of 20 years in the first half of the century. Also, this increase is expected to increase by 10 more years until 2050 (SPO, 2007).

![Figure 1. The World Population Projections for 2050](#)

The percentage distribution of age groups within the overall population over the years from 1935 to 2000 can be seen in the table 1. In Turkey, the share of the elderly population within the overall population has remained under 5 per cent until the end of the 20th century. However, the 2000 census results show that the population aged 65 and over represented 5.7 per cent of the overall population. According to population projections, current demographic trends would continue signify that the 21st century will be a century of the elderly in the

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1 **The rapidly aging world.** (a) The world today, showing in blue areas where greater than 20% of the population is over the age of 65. (b) The world in 2050, showing the huge increase in areas where the population will be over 65 years old (Petsko, 2008).
whole world and the Turkey. Together with the changing age structure, the elderly population will gain importance on social, demographic and economic terms in Turkey (SPO, 2007).

**Table 1.** Percentage Distribution of Age Groups within the Overall Population, Census Results (1935–2000) (Source: TUIK, Turkish Statistical Institute Censuses, 2002 cited in SPO, 2007).

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Population</th>
<th>0-14</th>
<th>15-64</th>
<th>65 years and above</th>
</tr>
</thead>
<tbody>
<tr>
<td>1935</td>
<td>16,158,385</td>
<td>41.4</td>
<td>54.7</td>
<td>3.9</td>
</tr>
<tr>
<td>1940</td>
<td>17,820,950</td>
<td>42.1</td>
<td>54.3</td>
<td>3.5</td>
</tr>
<tr>
<td>1945</td>
<td>18,790,174</td>
<td>39.5</td>
<td>57.1</td>
<td>3.3</td>
</tr>
<tr>
<td>1950</td>
<td>20,947,188</td>
<td>38.3</td>
<td>58.4</td>
<td>3.3</td>
</tr>
<tr>
<td>1955</td>
<td>24,064,763</td>
<td>39.2</td>
<td>57.3</td>
<td>3.4</td>
</tr>
<tr>
<td>1960</td>
<td>27,754,820</td>
<td>41.2</td>
<td>55.2</td>
<td>3.5</td>
</tr>
<tr>
<td>1965</td>
<td>31,391,421</td>
<td>41.9</td>
<td>54.1</td>
<td>4.0</td>
</tr>
<tr>
<td>1970</td>
<td>35,605,176</td>
<td>41.8</td>
<td>53.8</td>
<td>4.4</td>
</tr>
<tr>
<td>1975</td>
<td>40,347,719</td>
<td>40.6</td>
<td>54.8</td>
<td>4.6</td>
</tr>
<tr>
<td>1980</td>
<td>44,736,957</td>
<td>39.1</td>
<td>56.1</td>
<td>4.7</td>
</tr>
<tr>
<td>1985</td>
<td>50,664,458</td>
<td>37.6</td>
<td>58.2</td>
<td>4.2</td>
</tr>
<tr>
<td>1990</td>
<td>56,473,035</td>
<td>35.0</td>
<td>60.7</td>
<td>4.3</td>
</tr>
<tr>
<td>2000</td>
<td>67,803,927</td>
<td>29.8</td>
<td>64.5</td>
<td>5.7</td>
</tr>
</tbody>
</table>

Percentage distributions of age groups by census years and Turkish Statistical Institute population projections can be seen in the figure 2. When we look at the percentage change of age groups within the overall population in the 2000-2050 periods, a significant increase can be seen in the elderly population compared to other age groups. According to population projections, Turkey will have an elderly population of approximately 16 million in 2050 (SPO, 2007).

![Figure 2. Percentage Distribution of Age Groups, Turkey 1935–2050 (SPO, 2007).](image-url)
“The issue of ageing in Turkey remains behind that of industrialized western societies on account of demographic, economic and socio-cultural structure related reasons. Nevertheless, this does not mean that there are no problems in this respect. As it is forecasted that in 2000s the elderly population of Turkey, as a developing EU candidate country, will double that of developed countries, the required measures have to be taken before ageing becomes a major problem of the society. Ensuring that the independent living units to be planned for elderly people take into consideration the dependence needs of elderly individuals; offering elderly people various choices for alternative dwelling and accommodation facilities and letting them choose the most suitable one for them from among them. The choices should involve independent houses and apartments offering a minimum level of support services in appropriate social environments based on the principle of mutual dependence, as well as accommodations or nursing homes offering a higher level of services, operated in a manner taking into consideration the dignity of elderly people, their privacy, control, companionship and development rights” (SPO, 2007).

Despite the increasing number of dependent populations in society, the population rate is gradually decreasing. As a result, meeting the needs of the elderly such as health, shelter, working, income, diet, transport and rehabilitation causes major problems, especially in countries with limited resources (Kurt et al., 2010).

3. THE INTEGRATION OF ELDERLY AND DISABLED PEOPLE INTO THE URBAN AND SOCIAL LIFE: A NEW MODEL FOR KONYA/TURKEY

In parallel to the rapid increase in elderly and pensioner population in Turkey, there is an urgent need for “old age policies” that will produce definite solutions to the needs of this population, the problems they encounter in processes of adaptation to old age and retirement, and the social, cultural and economic difficulties they face. Solutions by which the elderly will more actively participate in the society should be developed within the framework of local policies and national old age policies. These arrangements should comply with the changing conditions and possess modern characteristics (Kurt, 2008).

Current institutions for the elderly and disabled in Turkey, such as nursing homes, senior centers and rehabilitation centers, are insufficient in many ways. New models are needed to ensure the integration of elderly and disabled individuals into society, and create
environments where they can still be productive and improve their quality of life. The way that the elderly and disabled, in developed countries, are able to make a commitment to a healthy and quality life, while also making a contribution to their countries because of their productivity, should also be accessible in Turkey. This new model should be developed and used for the care of the elderly and disabled in Turkey, in order to take place among civilizations which implement and adopt global criteria. With these goals in mind, YEBAM (The Elderly & Disabled Training, Research, and Care Center) aims to combine educational services, living spaces, and production and rehabilitation centers, all in one place.

3.1. The Regional Importance of YEBAM

YEBAM aims to create a modern living center in which education, research and practice for the elderly and disabled can be performed together. This is first in Turkey; YEBAM also aims to assess this practice as a pilot project*. In this regard, the vision of YEBAM is as follows:

- to create a new model in the enterprise and management of elderly and disabled care in cooperation with the state, non-governmental organizations, the local administration and university,
- to develop an elderly and disabled education system as an on-site, boarding and distance learning, and to apply and extend these education systems,
- to focus on the elderly and disabled’s existing rather than lost potentials and to enable them to be productive in life,
- to create a suitable environment for the elderly and disabled’s further individual development and facilitate self-sufficiency,
- to train "the Elderly and Disabled Care Giver Personnel" who are needed in Turkey, and internationally as well, at the Associate Degree, Undergraduate, and Masters levels,
- to develop a model (administrative, legal, physical, social, spatially and financially) that can be applied nation-wide as a result of this pilot project and
- to make the society-at-large an indispensable actor in this process.

The aim of YEBAM is to create a home and working place of volunteers. The experimental project will be a sample center that consists of a 500-people capacity facility (total number of

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*This part of paper is developed according to unpublished YEBAM-YEBAV 2013 Project Research Report.
elderly and disabled residents) that includes rooms with beds, education, rehabilitation, manufacturing, culture and recreational spaces. The advantages of Selcuk University will be profited and an efficient system will be established for the education, care and treatment of the elderly and disabled. In this sense: The potential trained human power (School of Health Sciences, Faculty of Health Sciences, Faculty of Medicine etc.) will have significant contributions to rehabilitation, application and working areas. Participation of the elderly and disabled in various activities of faculties, schools, institutes and research centers, will be ensured according to their interest areas. YEBAM will be integrated into experimental studies (Agriculture, Veterinary, Engineering etc.) of other faculties at Selcuk University and will be more productive (plant, vegetable, fruit, floral, breeding, workshops etc.). Efforts to be initiated under the leadership of Selcuk University can be adapted for other institutions over time. The most important one among all these studies is to train the elderly and disabled caregiver personnel within the experimental project from the first day of their training to their graduation. The fundamental principles of this profession are "humanity" and "tolerance-patience." In this educational model, students will experience every kind of problem and its solution that may be encountered in real life. Activities will be conducted in cooperation with the Ministry of Family and Social Policies in order to work within a legal and responsible framework and to ensure that this population participates fully in their lives.

Project Shareholders of YEBAM are Selcuk University, YEBAV and Selçuklu Municipality. Selcuk University: Under the body of Selcuk University, YEBAM will ensure the coordination between shareholders, conduct studies and ensure sustainability. YEBAV will form the "social society" component of this large and comprehensive social responsibility project. Selçuklu Municipality takes part in project responsibility as a local administrative component.

YEBAM is a pilot project and model that can be applied nation-wide in terms of its position and objectives. In addition, it will serve the KOP (Konya Region Project include Aksaray, Karaman, Konya and Nigde cities) provinces, especially Konya. The project will have indirect contributions as a model for other practices in Turkey and the world, yet it will have direct contributions to the KOP provinces. These contributions can be summarized as follow:

- Many elderly and disabled people will take shelter in this center; they will be cared for and provided with a comfortable life.
• Those who are in need of education will be trained as boarding or day students. Business opportunities will be provided for some within the center and these people will be reintroduced to life.
• The prior target area for distance education and developing business opportunities will be the KOP provinces.
• YEBAM will conduct academic studies on the participation of the elderly and disabled in KOP administration activities and thus, continuously contribute to practical operation and management of the process.

3.2. The Main Units of YEBAM

At YEBAM, manufacturing centers and workshops have been designed to enable the elderly and disabled to work according to their interest and skills in order to continue to be productive members of society. In this way, they can live independently and their life, and ties with society will improve. Accordingly, the main units which are planned for YEBAM are as follow:

1. In order to train the elderly and disabled care giver personnel: To sustain education and practice activities under the body of the Faculty of Health Sciences at the School of Health Sciences, education structures at; associate degree, undergraduate and master levels were designed. At the first stage, there is a need for approximately 25 m² indoor education blocks in which five different programs will be conducted.

2. Education, rehabilitation and working areas for the elderly-disabled: There is a 20.000 m² indoor space reserved for services such as sports and fitness, water therapy, music therapy, distance education and working, workshops, places of worship, social facilities etc.

3. 100-unit capacity elderly care (experimental) and housing area: Approximately 10.000 m2 indoor spaces are needed for a unit consisting of recreation and housing areas with different size beds.

4. 400-unit capacity disabled care (various categories) housing, care-giving, and rehabilitation and education units: There is need for approximately 40.000m² indoor spaces for a center to serve the mental, physical, visual and hearing-impaired.

5. Hobby and recreation areas: Flower, fruit, vegetable cultivation areas, animal feeding shelters and farm-dairy (production areas), tour and recreation areas

6. Distance Education for the disabled and Volunteers' Center: There is a need for approximately 200 m² indoor space for units where vocational education activities will be
performed, especially for the disabled within distance education centers. These centers will be located close to the living quarters.

7. Administrative Units: YEBAM stipulates a complex construction with a total of 82,000 m$^2$ indoor space, 5000 m$^2$ of which will be constructed at the first stage.

3.3. Design Concept and Principles of YEBAM Layout Plan

Elderly people in almost all countries do not want to stay in retirement homes. This is because of various psychological, sociological and cultural reasons. Particularly, the negative image towards retirement homes, perspective of the society towards retirement homes and psychological effects of separation from people’s environment are the primarily the reasons for negative attitudes towards retirement homes. The care sector around the world has been in a process of searching for solutions and remaining in transition with regard to these issues for decades. Every country attempts to protect their elderly by developing an appropriate care model according to the conditions of their country. The former concept of elderly care used to include accommodating elderly people in small rooms in a large institution. These types of institutions have some common areas like the cafeteria; however, the occupants of these institutions spent their time sitting in their rooms, halls and cafeteria, while the duty of personnel was to provide the elderly with all kinds of services. Today, this perception is replaced by idea of independent living. The new care concept is based on keeping the elderly active in life rather than separating them from life. An elderly person can self-care, take his/her decision, however he/she needs other people’s surveillance, rather than being people who are constantly in need of other people’s service (Devran, 2007).

According to the analyses on the YEBAM design area with regard to transportation, the facility is 20.6 km away from Aladdin Peak, 15.7 km away from the airport, 11.4 km away from the bus terminal and 22.1 km away from the train station.
1/500 layout plans were designed within a 100,000 m$^2$ area allocated for YEBAM at Selcuk University Campus. The planning area, which is on Istanbul-Konya highway, is in an easily accessible location. Moreover, YEBAM can use the facilities offered by Selcuk University Campus. Located within the Selcuklu Medical Faculty, access to healthcare services is one of the advantages for the elderly and disabled people who live at YEBAM.

Figure 3: The Location of Konya City and Selcuk University Campus

Around 500 elderly and disabled people are expected to live at YEBAM. With this number in mind, the land and environmental data were evaluated and a program was prepared for the needs of the center. The concept of “an accessible wellness center” was adopted as a general planning approach. Pedestrian circulation was ensured. Required arrangements for access to socio-cultural, sport, health and religious activities were made.

Figure 4: The Location of YEBAM (The Elderly & Disabled Training, Research, and Care Center) within Selcuk University Campus
In this complex there are care and rehabilitation areas for adults (boarding and day), education and rehabilitation units for the disabled between the ages of 3-25 years, a meeting center, library, places for worship, social facilities and hobby gardens, workshop areas where the disabled and elderly can easily work (hobby rooms, manufacturing centers, farm, restaurant, printing house etc.) and sports center.

Furthermore, an education center which provides post-graduate level training for personnel to take care of the elderly and disabled, which uses the potential of educated instructors at Selçuk University, will be the most remarkable difference of YEBAM compared with other centers. This center will export qualified human power all across the world (within the framework of activities launched via the International Elders Platform). The macro target of the center is to supply qualified personnel to provide services to the elderly and disabled populations “humanely”.

Working in a job is a significant part of keeping the elderly engaged in all of life’s activities while addressing age-related social and psychological challenges. Having a healthy and active life in accordance with their power and potentials is very important for elderly people in terms of their quality of life. Alternative solutions are needed to maintain the productivity of elderly people. It is very hard for people whose social status changes, physical activity decreases, for whom working defined the meaning of life, to accept this situation.

When the elderly and disabled continue to be productive members of society, their age-related social and psychological problems will be minimized. The wish for productivity and maintaining a respectable status in society is the fundamental desire of all human beings— including the elderly and disabled. The elderly and disabled who participate in a working life contribute to their family economy, specifically, and in general, to the nation’s economy. When elderly and disabled people work, it prevents them from being excluded from the society; in other words, work provides social and psychological remediation. Of utmost importance is the fact that this kind of employment will provide many personal, social and economic benefits. In the end, elderly and disabled individuals who want to be beneficial to the society by working will be living without dependency and will continue to have strong relationships within the society.
4. CONCLUSION

Achieving the participation of elderly and disabled people in social and urban life is a requirement and duty of modern society. Elderly and disabled people are connected to life and become fruitful individuals for themselves, their families and countries as long as they are productive. In this context, activities should be carried out to strengthen the connections of elderly and disabled individuals in social, urban and economic areas. This paper proposes the YEBAM model in which elderly and disabled individuals will be provided with care, education and job opportunities.

YEBAM was established to provide training for elderly and disabled care professionals who are highly crucial in Turkey. Firstly, a complex consisting of educational institutions to offer associate degree programs, bachelor’s degree programs and post-graduate programs for elderly and disabled care professionals; an elderly village, disabled village and service centers consisting of treatment, care, working, hobby, resting and educational facilities etc. was designed to be opened. Fulfilling this aim in collaboration with civil society (YEBAM), local administration (Selçuklu Municipality) and Central Authority (Ministry of Family and Social Security) was adopted as the priority objective. YEBAM will strengthen participation of the elderly and disabled in social and urban life; it will further strengthen their connection with life and their communities.

YEBAM will make significant contributions to the implementation of more advanced models in elderly and disabled care centers in Turkey similar to those in developed countries, diffusion of these services at country scale and rehabilitation, social and cultural development of the elderly and disabled. Furthermore, the most prominent difference between YEBAM and other such existing complexes will be the addition of an education center that is designed to train the personnel to care for the elderly and disabled. This educational facility will make use of the competent faculty at Selçuk University. In addition to providing capable support staff to the center itself, the educational facility will export competent professionals around the world (within the framework of the activities initiated with the world elderly platform). YEBAM’s macro purpose is to supply trained individuals who can provide “humanistic” services to elderly and disabled individuals.
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