




Turkish Young-Old Adults' Self-Perceptions of Aging

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Abstract

In this study, we examined the self-perception of aging of young-old adults living in Turkey's Central Anatolia Region within the scope of aging anxiety and future time perspective dimensions. This research is a descriptive study and in this study, phenomenology, a qualitative research method, was employed. The study group was selected by snowball and purposeful sampling methods. Participants were identified through the elderly relatives of the author/authors (snowball sampling). At the same time, purposeful sampling was used to ensure that the participants were in the 65–74 age range. The study group was composed of a total of 37 old individuals aged between 65 and 74 years living in Turkey. The interview instrument was a semi-structured questionnaire and included both open and close ended questions. The interviews conducted within the framework of the 'personal information form' and 'semi-structured interview form' administered to the participants and the data obtained by transcribing these interviews into written text were analysed by theoretical thematic analysis method by the researchers. The findings showed that aging anxiety, future time perspective and loneliness represent different sub-dimensions of self-perception of aging. The results of this study showed that the self-perceptions of aging of 65–74-year-old young-old adults living in Central Anatolia Region in Turkey are negative, and that these perceptions differ according to living arrangements but do not differ according to gender.

Keywords Aging · Self-perceptions of aging · Young-old adults · Turkey

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Introduction

Ageing is generally considered a period of deterioration in physical, cognitive and psychosocial health and a period of changes leading to structural and functional inadequacies (Townsend, 2015). The World Health Organization defines ageing as an individual's decline in potential regarding his or her ability to adapt to environmental factors (WHO, 2015). According to Erikson, who discusses old age from a psycho-social perspective, individuals aged 65 years and older examine their lives. Examining one's life includes going back and looking at, evaluating, interpreting and, most of the time, reinterpreting his or her own life experiences. Events such as loss of physical power, retirement and death of peers cause the individual to examine his or her life and review the past. At this stage, he or she often asks questions of "Did I have a full life?" and "Could I have led a happier life?". The answers to these questions might be positive for the old individual. If this is the case, the thoughts and memories emerging from the examination of the past will create a well-lived life image, and the old individual will reach self-integrity. However, if the old individual negatively analyses one or more of his or her past life periods, the thoughts about the total value of his or her life and past will be negative, and the individual will have feelings of despair and depression. Thinking that they did not get what they want from life, these old people will be afraid of death. They will not want to die since their expectations were not met (Santrock, 2013; Yıldız, 2013). In terms of developmental tasks, old individuals are expected to achieve developmental tasks such as adapting to their decreasing physical power and deteriorating health status during their old age, completing the tasks that they should be able to do, taking care of their health, adapting to the possible negative situations, such as meaninglessness, emotional and physical exhaustion, loss of roles, adapting to a reduced income that may emerge with retirement, and accepting the death of their spouses, establishing closeness/friendship with their peers, fulfilling their social responsibilities and making contextual organizations for an easier life (Bacanlı, 2001).

Old age is a long period of time. From the beginning of history to this day, the maximum number of years a person can live has been approximately 120–125 years. In the last hundred years, the developments in the fields of medicine, nutrition, exercise and lifestyle have increased life expectancy. Accordingly, some developmental researchers define 65–74 years as *young-old*, 75–84 years as *old-old*, and 85 years and older as *oldest-old* (Santrock, 2013). Since old adults reach the age of 85 and move on to the oldest category, they exhibit different characteristics than the young-olds. In particular, young-old adults typically live independent lives with higher levels of psychological and physical health, whereas the oldest-old adults are physically and mentally more vulnerable with a higher prevalence of disease and functional disorders in addition to a higher need for intensive care (Chai & Jun, 2017). However, even though they have more health problems, individuals aged 75 years and older evaluate their health more positively than those aged 65–74 years (Martin, Palmer, Rock, Gelston & Jeste, 2015). Hempel, Taylor, Connolly, Alpass and Stephens (2017) expressed that increasing anxiety, independent of demographic variables, decreases mental-physical health and quality of life in young-old adults.

Self-Perceptions of Aging

Self-perceptions of aging are defined as a form of self-knowledge about one's development in adulthood (Diehl, Wahl, Brothers, & Miche, 2015). The self-perception of aging includes one's thoughts, values and attitudes about aging. During the aging process, a person experiences some cognitive, physical and social changes. These changes may vary from person to person depending on one's lifestyle, habits, hereditary characteristics or physical and mental disorders. The fact that these changes occur in different ways in each person changes the person's perspective towards aging (Levy, 2003). At the same time, a person's self-perception of aging depends not only on the person's own experience of aging, but also on the messages of his or her social environment about aging. Levy's (2009) stereotype embodiment theory states that individuals have been exposed to negative stereotypes about old people from a very young age, gradually internalizing them and thus perceiving their own aging processes negatively. In addition, development of negative self-perception of aging due to negative stereotypes about old people cause people to withdraw from social life and close relationships (Levy, 2009). Therefore, old people's self-perception of aging is affected by many factors such as the stereotypes created by the society, the age group in which the person lives, and the physiological and sociological changes that occur in him or her (Keller, Leventhal, & Larson, 1988).

Recent literature has reported that many old adults perceive themselves ageing successfully despite physical, cognitive, and psychosocial deterioration (e. g. Fougner, Bergland, Lund & Debesay, 2019; Kim & Park, 2017; Martin et al., 2015;) and that perceiving themselves ageing successfully was strongly associated with psychological well-being (Strawbridge, Wallhagen & Cohen, 2002). The well-being of successfully ageing individuals will give them the opportunity to be an active part of society. Otherwise, with the decrease in well-being, depression and similar psychological problems might lead to much more severe consequences such as malnutrition, health deterioration and even suicide, and it is even possible that the individual may require constant care in an institution (Binstock, 1997). Kim, Kim, Boerner and Han (2018) state that self-perception of aging consists of two dimensions: Aging anxiety and future time perspective. Aging anxiety is based on anxiety about age-related changes in a person's physical appearance and the belief that old age is a stage of life in which physical health problems, pain, sensory loss and cognitive decline are inevitable (Shaw & Langman, 2017). The future time perspective refers to focusing on opportunities and on time limitation. According to the Socioemotional Selectivity Theory (Carstensen, Fung & Charles, 2003), a key mechanism in goal selection is time perspective. When time is perceived as open-ended (as is often the case with youth), broader goals are chosen. When limitations in time are perceived, emotionally meaningful goals are probably chosen, as there is no future prospect of time. People who perceive time as limited pursue emotional goals because of a search for solace in meaning rather than emotional goals. In their study with couples at the end of their middle age, Kim et al. (2018) found that the couple's health problems were more associated with time limitation for both spouses, and the health problems of family members (i.e., parents, spouse and children) were only associated with women's perception of aging. They also found that higher spousal support was associated

with a more positive perception of aging for both men and women, and marital difficulties were associated with higher levels of aging anxiety in men.

Studies on Self-Perception of Aging in Turkey

The elderly population constitutes 8.9% of the world's population. The first three countries with the highest proportion of an elderly population are Monaco with 31.3%, Japan with 27.3% and Germany with 21.8%. Turkey ranks 66th amongst the 167 countries in the ranking, with 8.3%. Males constitute 43.9% of the elderly population in Turkey, and females constitute 56.1%. While the ratio of widowed old males is 12.7%, the ratio of widowed females is 50.4%. Life expectancy is 75.3 for males and 80.7 for females. There are also 5232 elderly people over the age of 100 (Turkish Statistical Institute, 2017). There are a limited number of studies examining self-perception of aging in Turkey. In these studies, it was found that especially the old people living in nursing homes perceived themselves as lonely, useless and dependent people, and that their depression scores were high (Aksüllü & Doğan, 2004; Bahar, Tutkun & Serbaş, 2005; Özdemir Akdemir & Akyar, 2005). Özyurt, Tunç and Hatipoğlu (2012) determined that age affected age-related attitude, and that as the age increases, the physical, cognitive and social losses seen in the elderly also increases, and thus the perceptions of young-old people aged 65–69 about aging are more positive compared to other age groups. In some other studies, it was found that there is a relationship between how the person perceives old age and the level of depression, and that people who do not believe that they are useful have higher depression levels (e. g. Ekşioğlu Ahad, 2016). In the study conducted by Demircan et al. (2005) to determine the views of the old people about old age, 87.5% of the old people defined old age as the end of life, 90% of them preferred to live in the past, 62.5% of them saw old people as always complainant and socially isolated, 85% of them did not expect a fulfilled life. Also, 92.5% stated that others should benefit from their experiences, and 87.5% thought that they should live in their own homes.

It is believed that more studies in Turkey due to the growing proportion of the elderly population (Turkish Statistical Institute, 2017). Especially taking into consideration the relationship between self-perception of aging and psychological health (Strawbridge et al., 2002), it is believed that the development of effective psychological counseling services geared towards old client population in Turkey is needed for personnel working in institutions, psychological counsellors, old individuals and their families.

The Present Study

As is known, individuals' self-perceptions of aging may vary. Some perceive old age as a period of challenge and new possibilities (positive), while others perceive old age as a curse (negative). As explained in detail above, there can be many variables affecting individuals' self-perception of aging (e.g. gender, aging experiences, stereotypes, life arrangements). In this study, we (a) examined the self-perception of aging of young-old adults living in Turkey's Central Anatolia Region within the scope of aging anxiety and

future time perspective dimensions proposed by Kim et al. (2018), (b) We also tried to compare self-perceptions of aging according to gender (female and male) and living arrangements (with their adult children, with their spouse and alone).

Turkey, in general, tend to have a traditional and Islamic culture with a collectivist orientation (McConatha, Hayta, Rieser-Danner, McConath & Polat, 2004). The social structure is based on strictly connected family relationships. Despite the recent social change and increase in urbanization, parents often continue to support their children during adulthood. Similarly, children continue to respect their parents and take responsibility taking care of children in old age (İmamoğlu & İmamoğlu, 1992). Central Anatolia Region of Turkey differs from other regions in terms of economic prosperity and westernization level. The Central Anatolia Region is a more traditional region, and the elderly population is denser (Turkish Statistical Institute, 2017). Thus, it will be interesting to examine the self-perception of aging of young-old adults who are living with their adult children, with their spouses and alone in Central Anatolia Region.

Method

Information Bu akrabalarregarding self-perception is subjective, and qualitative inquiry approaches provide more details about the perspectives of older adults on aging. This research is a descriptive study aiming to examine the perceptions of young-old adults' self-perceptions about aging. In this study, phenomenology, a qualitative research method, was employed. Phenomenological studies focus on the phenomena that we are aware of but do not have an in-depth and detailed understanding (Yıldırım & Şimşek, 2006).

Participants

The study group was selected by snowball and purposeful sampling methods. In this method, a reference person is selected for the subject of the study and other people are reached through this person. The process is repetitive by necessity. The participants direct the researchers, and the sample grows. The reason for preferring this sampling method was to reach older individuals who did not stay in a nursing home. Participants were identified through the elderly relatives of the researchers since these persons and their home addresses were unknown. The elderly non-family relatives of the researcher/researchers were appealed to identify the first participants as the reference person. The relatives helped the researchers gain entry to the population but they were not part of the study. At the same time, purposeful sampling was used to ensure that the participants were in the 65–74 age range. The study group was composed of a total of 37 old individuals aged between 65 and 74 years living in a city centre in Central Anatolia Region of Turkey. The participants volunteered for the study, and none of them had any communication problems that might have hindered the data collection process.

Instruments

The interview instrument was a semi-structured questionnaire and included both open and close ended questions. Interviews based on a specific form provide both systematic

and comparable information from different individuals. When preparing the interview questions, it had been stated that easy questions that would encourage the interviewee to talk should be developed first. Then, researchers should pay attention to asking focused questions that go from the specific to the general (Yıldırım & Şimşek, 2006). For this reason, in this study, the researchers paid attention to asking preparative questions (age, profession, people they lived with, number of children, hometown, education status, and health status) first and focused questions later. Some questions included probes for use when necessary. It is not necessary to ask all the probes, but if the interviewee does not provide sufficient explanation, they give the researcher an opportunity to obtain details from the questions (Yıldırım & Şimşek 2006).

The questions in the interview form can be addressed in four sections: (1) *Demographic information summarized in Table 1.* (2) *Questions about old age anxiety (for example, What does aging mean for you? Do you have difficulties, problems you have been experiencing these days? If there are, what are these?).* (3) *Questions about the future time perspective (for example, How do you spend your day? What do you expect from the future? What do you want in your life to change?).*

Data Analyses

The interviews conducted within the framework of the personal information form and ‘Semi-Structured Interview Form’ administered to the participants and the data obtained by transcribing these interviews into written text were analysed by the researchers. Every interview was recorded with a sound recorder and later analysed after being transcribed (the whole sound recording) by the researchers. In this study, theoretical thematic analysis was used since we examined the self-perception of young-old adults. According to Braun and Clarke (2006), in thematic analysis, themes or patterns in data can be identified in one of two basic ways: inductive or deductive (theoretical). An inductive approach means that the identified themes are strongly linked to the data. On

Table 1 Socio-demographic status of the young-old adults

Status	Sample information
Gender	22 of the participants were female, and 15 of them were male
Age	The average age of the participants was 71 (between 65 and 74)
Marital status	21 of the individuals participating in the study were married, and 16 participants were widowed
Education status	10 of the participants were illiterate, 9 were elementary school graduates, 9 were middle school graduates, 6 were high school graduates and 3 were university graduates.
Occupation status	Homemaker (20 young-old female participants); Currently working (4 young-old male participants); Retired (11 young-old male participants, 2 young-old female participants)
Living arrangements	10 lived with their spouses, 8 lived with their adult children (young-old female participants-widow), 8 lived alone (6 young-old female participants, 2 young-old male participants), 11 lived with their children together with their spouses.
Number of children	While 22 of the participants had up to four children, 13 of them had five or more children. There were two participants with no children.
Health status	The number of participants who mentioned that they had a health problem negatively affecting them at that time was 30.

the contrary, “theoretical” thematic analysis will tend to be influenced by the researcher’s theoretical or analytical interest in the field, and thus depends more specifically on the analyst. This form of thematic analysis tends to provide a more detailed analysis of some aspects of the data, rather than providing an intensive description of the overall data set. Before the analysis, we read the data repeatedly and then determined the themes by taking into consideration the dimensions of self-perception of aging (Aging anxiety and future time perspective) stated in the literature and the purpose of the study. By paying attention to the consistency between the codings made by the researchers, the validity and reliability of the study findings were supported by adherence to the principles of time invariance and intercoder reliability. For intercoder reliability in this study, the formula described in Miles and Huberman: $\text{reliability} = \frac{\text{number of agreements}}{\text{number of agreements} + \text{disagreements}}$ (Tavşancıl & Aslan, 2001) was used and the consistency between coders was 91%.

Procedure

Ethics approval was obtained from the Ethics Committee of Niğde Ömer Halisdemir University before starting the interviews. The interviews were conducted in the participants’ homes when they were alone. Before the interviews were conducted, the purpose and importance of the study were explained to the old individuals; more explanations on how their personal information would be kept confidential were provided; and the informed consent forms, developed by the researchers within the framework of the research ethics committee approval, were signed by the participants. The interviews with each old individual lasted an average of 40 min.

Results

In this study, we identified the themes corresponding to aging anxiety and future time perspective dimensions proposed by Kim et al. (2018) from the data obtained from young-old adults in Turkey. We also identified the theme that extended the original framework; this reflected loneliness (Fig. 1). We first discussed the analysis results under each theme. Then, for comparison we divided the quotations into three parts according to gender and living arrangements: Quotations from male and female participants who lived with their adult children, with their spouse and alone.

Aging Anxiety

Young-old participants talked about their aging experiences related to health problems and progress, physical power loss, and the availability of power sources. Most young-old adults are experiencing increasing health problems, cognitive deficiencies, decreased power sources, and loss of physical strength, which make them anxious (e.g. having one foot in the grave, being dependent on others and needing to be cared for, and burdening their children). The participants did not experience any discomfort or anxiety about looking old (changes in physical appearance). Even

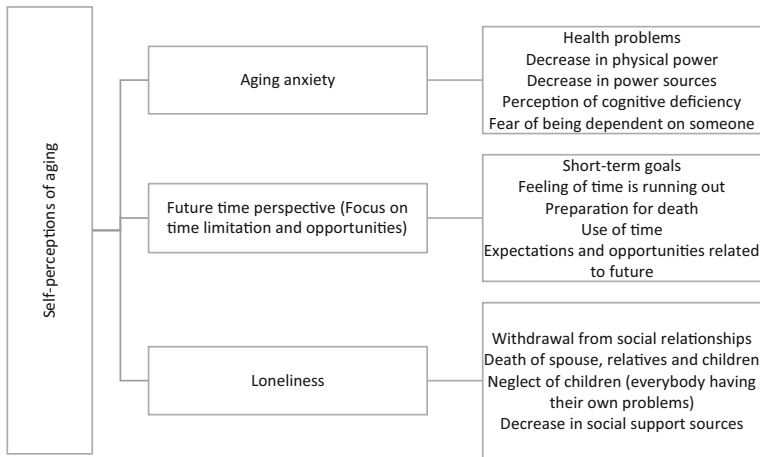


Fig. 1 Main themes and categories

though they are in the early stages of aging, they already seem to have accepted to look old.

Young-Old Adults Who Live Alone

".. My health is not good, my head is constantly spinning, I take medicine every day, I do not talk to anyone in case I make a mistake... I'm afraid to get worse and to wet myself .." (70-year-old male participant-widow).

".. My aches and pains have increased, I can't go out, I sit all day long like this. Maybe these are from old age, and I've started to forget, let's see what will happen... May God grant us to die without being dependent on anyone, without being flat on our backs .." (72-year-old female participant-widow).

Young-Old Adults Who Live with their Adult Child

".. I am a cardiac patient, I go to the doctor all the time, I use medicine, I wish God a good death, without burdening my children .." (72-year-old female participant).

".. It is good if one's health is good, but my health is not good, old age is difficult. I'm good with my bride, my son, my grandchildren, but I hope they don't get tired of me .." (69-year-old female participant).

".. I want to die before my wife, because I look hearty right now, I don't have any illnesses, but if I become needy in the future I have no one to look after me. We live with my son and daughter-in-law, we are helpful to them right now, they work and we take care of our grandchildren all day long, but they won't look after us if we become needy .." (67-year-old male participant).

".. I'm old now, I am diabetic, I am a cardiac patient, I have high blood pressure, I can not stand anymore, I can not walk comfortably as I did before, I have palpitations, I have slight loss of vision ... my son, my daughter-in-law, my grandchildren, my wife are constantly trying to give me morale, but I realize that I became old .." (70-year-old male participant).

Young-Old Adults Who Live as a Couple

".. I am diabetic and have high blood sugar but I am strong and I am a fighter. I am thankful that I am standing and can do everything .." (69-year-old female participants).

".. My knees hurt a lot, sometimes I can't even get up from my place, my wife is worse than me if you say, the whole load of the house is on my shoulders, it is difficult, after this age what the power is looking for this senile .." (70-year-old female participant).

".. Thank God I don't have any illnesses. I am strong. I can even work in the field. But I became old, I am not what I used to be ..." (68-year-old male participant).

".. My biggest problem is old age. These days, the man who runs and jumps like a harpoon is gone and an old man arrived. My wife and I live together helping each other ..." (72-year-old male participant).

When the three groups were compared in terms of aging anxiety, it was seen that those who lived alone had more anxiety about subjects like health problems, loss of physical power, decreased power sources, perception of cognitive deficiency and being dependent on others (becoming worse). Anxiety of people living with their adult children often appear to be related to their children. On the one hand, they are worried about being a burden on their children, while on the other hand they are worried about being rejected by them when they need care. Anxiety about other issues also increase in the case of loss of physical strength amongst those living with their spouse. Anxiety of female and male participants were similar.

Future Time Perspective (Focus on Time Limitation and Opportunities)

Young-old participants talked about their aging experiences related to future expectations, opportunities and goals, preparation for death and time use. Most young-old adults seem to have limited their time to daily chores and worship. They extensively experience the feeling that time is running out and are preparing for death by worshipping. Therefore, it is seen that their personal expectations and goals for the future are good death (without being a burden on their children, without needing anyone). On the one hand, they acknowledge that death is inevitable and on the other, they fear death (such as suffering greatly). Young-old participants often express their expectations about the well-being and happiness of their children. The only opportunity they take to realize these expectations is to worship and pray.

Young-Old Adults Who Live Alone

".. As you can see, I sit from morning to night like this, pray and read the Quran, I do not do anything else, at this age and when you are alone, life is very limited. After my husband died I had no expectations from this life. Our time is over, I hope God blesses me with good death..." (72-year-old female participant).

".. My day is spent taking medicine and sleeping, sometimes I go to the garden and take care of the flowers. My blood pressure is high, my eyes don't see well, so I can't watch TV, I can't go outside (to the market, to friends). I'm old, I have no expectations from life, I'm good like this... May God give a good death, May God don't make me

suffer, May God give me an easy death. I want to die without disturbing anybody... ”. (70-year-old male participant).

Young-Old Adults Who Live with their Adult Child

“.. I wake up in the morning, prepare breakfast, take care of grandchildren, cook dinner, then spend time with neighbors. I am always busy. I have a single son, I want him to get married. I don’t want anything else. If I see the happiness of my children and grandchildren, I would not want anything else from this life.... Everyone will die one day. It is important that we die without needing anyone, without being a burden on our children...” (68-year-old female participant).

“.. I do whatever task/work (repair, shopping) I have during the day and then I go to the mosque. I try to do all my prayers in the mosque.... I have no expectations about myself in the future, it is enough that my children are good, that they don’t leave the path of right. Their future is my future ... Death reminds me of salvation, reminds me of reaching God and I am filled with peace. Even though I fear death because of my past mistakes, I am relieved because I hope God will forgive me...” (69-year-old male participant).

Young-Old Adults Who Live as a Couple

“.. I wake up early in the morning to pray, I take a walk, then do house work, I meet with my friends... I want nothing to change in my life, I am happy like this... All I want is for my children to be happy and I want to go on a pilgrimage... We were born, we will die one day, it’s either today or tomorrow. I’m not afraid of death. Would it be better if I don’t die and be a burden on my children? I am ready for everything that comes from God, but I fear suffering greatly in the grave, I pray at every prayer ...” (69-year-old female participant).

“.. I pray, I go out for a bit. We talk/remember old memories with my wife.... What can I expect from life? Thank God I’m not hungry, I have roof over my head. After that, all I want is my children to be good and to protect my health until the end of my life without needing anybody... Death is God’s command, when your time comes, you go to the other realm, everyone will go. Why would we fear death? The important thing is life after death, May God make us not suffer in the grave. You need to prepare for this, you need to pray. So, you won’t be afraid to die. Our age has come. May God does not give death to young people...” (72-year-old male participant).

When the three groups were compared in terms of future time perspective, the participants who live alone spent their days passively (such as eating, sleeping, praying), while the participants living with their spouse and adult children spent their day actively by doing daily chores (housework, shopping, repairing, cooking, looking after grandchildren). The feeling that time is running out, that they use their remaining time by praying for their children to be good and happy, and that their personal expectations and goals are to die without burdening their children, without needing anybody are similar for both women and men, and also for three groups.

Loneliness

The young and old participants talked about their aging experiences related to withdrawal from social relationships, deaths of spouses, peers and children, children having their own life problems and related to social support resources. Most young-old adults experience loneliness from time to time due to lack of neighbourly relationships and family support, and the death of their peers. The presence of spouses and children protects young-old participants from loneliness.

Young-Old Adults Who Live Alone

".. Being alone is harder than anything. I have no one left. When I lost my husband and my son, I was on my own. When I have a problem, I have no one to go to..." (72-year-old female participant-widow).

".. It's hard to be alone when I close my door. It's hard not to have a husband. Thank God I have children, I have neighbours, but I don't go to see them. No one is like a husband..." (70-year-old female participant-widow).

".. Loneliness is difficult. They tell me to get married but how can I marry? How can I fulfil my wife's wishes? I have been living by myself for twenty years...." (71-year-old male participant-widow).

".. I have a daughter and two sons. The boys have never asked what I have been doing. You even get no change out of children. I don't see anyone. I don't talk to anybody in case I make a mistake. I just see my daughter, talking to her reduces my annoyance..." (70-year-old male participant-widow).

Young-Old Adults Who Live with their Adult Child

".. We are as we saw from our parents. Our family ties are very strong. We grew up with this tradition. I'm very good with my children and grandchildren. My husband is a bit stubborn and cold. My problems are mostly with him. I'm so glad I have my children..." (72-year-old female participant).

".. Everybody, my sisters, my children respect me. They hold me in high esteem. I have great life. I am pleased with everyone..." (69-year-old female participant).

".. I communicate the least with my wife. We can't agree on many things. But I am very good with my children. It is good to talk to them and share my problems..." (70-year-old male participant).

".. Our family relationships are good, I can talk everything with my children and my wife. We are not distant. I don't have a problem, I can share it with all of them when I have one, they listen to me, they don't judge me. In terms of love, I need my wife, so I want to die before my wife..." (67-year-old male participant).

Young-Old Adults Who Live as a Couple

".. Our family ties are strong. I talk to everyone and share my troubles. I like hosting guests and talking with them. Thank God, they don't leave me alone..." (69-year-old female participant).

".. All my siblings are deceased. I don't have any children. I don't have much conversation with my husband, he loves his roosters more than me. As you can understand, I have no one..." (70-year-old female participant).

"..The children have their own things to do. Many of my friends are dead. Sometimes the neighbors call. Everyone has their own problems, I don't talk to anyone other than my husband, we live supporting each other, Thank God, I have her..." (72-year-old male participant).

When the three groups were compared in terms of loneliness, those who lived alone felt more alone because they withdrew from social relationships. Those who live with their spouses experience a sense of loneliness depending on their relationship (conflicting or lack of communication). Those who live with their adult children do not experience loneliness as a result of living together with their children regardless of their couple relationship. In terms of gender, the presence of children seems to be important for women and the presence of the spouses for men.

Discussion

In this study, we examined self-perceptions of young-old adults living in Central Anatolia in Turkey using theoretical thematic analysis. As a result of the analysis, Kim et al. (2018), we identified three themes. The findings showed that aging anxiety, future time perspective and loneliness represent different sub-dimensions of self-perception of aging. The results of this study showed that the self-perceptions of aging of 65–74-year-old young-old adults living in Central Anatolia Region in Turkey are negative, and that these perceptions differ according to living arrangements but do not differ according to gender. This finding is consistent with previous studies showing that young-old individuals aged 65–74 years have more negative perceptions of aging than those aged 75 years or older (Hempel et al., 2017; Martin et al., 2015).

Consistent with previous research (e.g. Barret & Toothman, 2018; Bodner, Shrira, Bergman, Cohen-Fridel & Grossman, 2015; Tovel, Camel & Raveis, 2019), the participants reported aging anxieties related to increasing health problems, cognitive deficiencies, loss of physical power and decreased power resources. These anxieties included fears such as having one foot in the grave, needing others to care for them and being a burden for their children. Previous studies have shown that intense aging anxiety contributes to self-perception of aging (Bodner et al., 2015). It was determined that the participants who lived alone were more anxious about aging. On the one hand, participants who lived with their adult children were anxious about a burden on their children, while on the other hand they are worried about being rejected by them when they need care. Participants who lived with their spouses had increased anxiety with physical power loss. An interesting finding is that participants did not experience any anxiety about changes in physical appearance. In previous studies (e.g. Kim et al., 2018; Shaw & Langman, 2017), it was stated that concerns about changes in physical appearance are a symptom of aging anxiety. In the Turkish sample, looking old did not create anxiety, but on the contrary, it was accepted (*"I am old, of course I will look old"*).

When the findings are evaluated in terms of the future time perspective, the participants extensively experience the feeling that time is running out and are prepared

for death by praying. Parallel to the finding of this study, in their study conducted with old people living in nursing homes, Aydın ve İşleyen (2004) determined that 83% of them wait death without any expectations, 17% of them expected health, tranquility, happiness and peace. When the participating old individuals' views on their feelings and thoughts about death were carefully examined, it was observed that the young-old individuals had a more natural accepting approach towards death. Indeed, they described death using religious connotations such as salvation, going to God and tranquillity. Santrock (2013) argued that religion helped old individuals recognize their own existence and see meaning in life by making them confront the approaching death. He also argued that religion helped them maintain this feeling and accept the inevitable losses of advanced age. Furthermore, it was stated that the old individuals who prayed more evaluated their health as good (Şentepe, 2015) and that religion was an important factor for them to cope with the troubled moments of life (Koenig, 2000). The presence of religious activities such as praying in the daily activities of the participants might have made it easier for them to face and accept death. When the participants' fears about death were examined, they feared dying in need, not being able to emotionally cope with some past regrets, having feelings of uncertainty and helplessness and being punished after death. The main factor causing fear of death was the individual's sense of death and the meaning he or she gave to death. On the one hand, they accepted that death was inevitable. On the other hand, the uncertainty about what will happen after death (the difficulty/ease of death, suffering after death, decaying, uncertainty of going to heaven or hell) was the basis for fear of death (Özen 2008; Öztürk 2010; Şenol 1989). Therefore, participants accepted death as a natural result of the aging process ("We were born, we will die one day, today or tomorrow, I am not afraid of death at all") and as a way to approach a better life, to get rid of the existing pain ("*Death reminds me of salvation, reminds me of reaching God and I am filled with peace*") but feared life after death because of their religious beliefs ("*The important thing is life after death, May God make us not suffer in the grave*").

The findings of this study showed that young-old adults in Turkey follow emotional goals and use emotion-oriented coping strategies. The future expectations and goals of young-old participants are mostly related to the well-being and happiness of their children. The only opportunity they take to realize these expectations is to worship and pray. According to Socioemotional Selectivity Theory (Carstensen et al., 2003), as people get older, they realize that time is running out in a sense, and they start to focus on the present instead of the future. Since old people perceive time as limited, they pursue emotional goals to seek salvation in a sense. A limited time perspective can also lead to an increase in emotion-oriented coping strategies. This type of coping relieves them. Therefore, worshipping and praying in Turkey may decrease young-old individuals' aging anxieties, death anxiety and anxieties related to their children and comfort them. Another finding is that the participants who live alone spent their days passively, while the participants living with their spouse and adult children spent their day actively because of responsibilities such as housework, shopping, repairing, cooking and looking after grandchildren. It is interesting that those who live alone have more personal time, but are more passive, as if they are desperately waiting for death ("*I sit from morning to night like this, pray and read the Quran, I do not do anything else, at this age and when you are alone, life is very limited*"). Participants who live alone also experience intense anxiety and feelings of loneliness. According to Barret and

Toothman (2018), intense aging anxiety is associated with stress, while better social relationships reduce aging anxiety. Both lack of social relations and intense aging concerns may lead the participants who live alone to a passive life. In Turkey, there are no studies on this subject. We think that studying the subject will provide information that will enable old individuals to participate in life more actively. Old individuals are happier when they are active, energetic and productive instead of detaching themselves from life (Santrock, 2013).

Participants generally associated aging with loneliness. Especially the lack of neighborliness, friends and family relationships increases loneliness. Those who live alone feel more alone when they withdraw from social relations, and those who live with their spouse feel more alone when they experience problems with their spouse. Those who live with their adult children do not experience loneliness as a result of living together with their adult children, regardless of couple relationships. In addition, the presence of children for women and the presence of spouses for men seem to be a protective factor for loneliness. In the formation of the feeling of loneliness, the level of satisfaction from social relationships is more important than the number of people in his or her social relationships. Social isolation (Booth, 2000), one of the dimensions of loneliness, points to the absence of objects in the individual's social network (typically friends, family members, neighbours, colleagues or other important individuals in a person's life) or points to limited relationships (Palmer, Newson & Rook, 2016). In addition, in their meta-analysis on the relationship between old age and loneliness, Pinquart and Sörensen (2001) argued that loneliness has gradually increased over a period of 10 years in young-old individuals aged 62–72 years. The most important reason for this is that the loss of the spouse and peers causes loss of social roles, which reduces young-old individuals' ability to maintain social relationships (Pinquart & Sörensen, 2001; Melkas & Jylha 1996: 103; Nyqvist, Cattan, Andersson, Forsman, & Gustafson 2013; Stephens, Alpass, Towers & Stevenson, 2011; van Baarsen, 2002).

Research has shown that individuals without spouses tend to have a more isolated life than others (Melkas & Jylha 1996: 103). Research has also shown that older people living in nursing homes are more hopeless than their peers living with their relatives (Aksayan, Yıldız & Ergün 1998). In the Turkish literature, it was determined that old individuals living with their spouses or spouses and children perceived more social support than those living alone or living with their children (Aksüllü & Doğan, 2004; Altıparmak, 2009; Eker, Arkar & Yaldız, 2001; Polat & Kahraman, 2013). Respecting the elderly, sharing the same house and showing them feelings of love, compassion and devotion are an important part of Turkish culture. Sayings and proverbs that the Turkish people give importance to (Rumi: What young people cannot see on the mirror, old people can read on a brick; At mealtime, the children should be the ones who get water first, but the adults should be the first ones who begin to eat and converse) and some of the ayahs in the Quran (Surah Al-Isra, Ayahs 23–25: Your Lord has decreed: Do not worship any but Him; Be good to your parents; and should both or any one of them attain old age with you, do not say to them even "fie" neither chide them, but speak to them with respect, and be humble and tender to them and say: Lord, show mercy to them as they nurtured me when I was small.) show that old people hold a respected position

in Turkey. Although generally maintained in Turkey, this position has transformed into something else and has led to a decrease in old people's social support networks for various reasons, such as the spread of the nuclear family, downsizing of houses due to the spread of nuclear family, the houses not being appropriate for the old people, young people's perceptions of old people, an intergenerational communication gap and old people's deteriorating health.

Suggestions

The study participants consisted of young-old individuals aged between 65 and 74 years old. Ageing can be perceived negatively in the coming years with the increase in health problems and the passing of the spouses. Therefore, cross-sectional studies with old individuals aged between 65 and 74, 75 and 84, and 85 and older are needed.

Most of the studies have shown that ageing is perceived more negatively with increasing age and that negative perceptions of ageing negatively affect health. Therefore, providing protective/preventive psychological counselling services to old individuals early is believed to be important for them to be active and adequate in their social relationships and communication, to maintain their psychological abilities and skills, to use their life experiences effectively and to be compatible with the environment. In every country, providing psychological counselling to the old population, a portion of the population that is rising rapidly in the world and in Turkey, is a necessity that cannot be ignored in terms of stress factors specific to this period of life. Within this framework, studies on old age counseling and the development of effective counselling services are needed around the world and in Turkey for staff working in institutions, old individuals themselves and their families.

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Compliance with Ethical Standards

Conflict of Interest On behalf of all authors, the corresponding author states that there is no conflict of interest.

Informed Consent Informed consent was obtained from all individual participants included in the study.

Ethical Approval All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

Appendix

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