

Successful Aging Management in Social Work

DOI: 10.26466/opus.714226

*

Fahri Özsungur *

* Dr., Adana Alparslan Türkeř Üniversitesi, İřletme Fakültesi, Adana/Türkiye
E-Mail: ticaretsicili@gmail.com ORCID: [0000-0001-6567-766X](https://orcid.org/0000-0001-6567-766X)

Abstract

This study aims to identify the factors related to successful aging management in social work and to make recommendations to policymakers and practitioners in this context. The study was carried out based on active aging, social conflict, business-life, and satisfaction in aging. A systematic literature review method was applied in the study. The study consists of research methodology, theoretical framework, issues related to successful aging, and successful aging management, respectively. Issues related to successful aging were determined as subjective well-being, quality of life, and organizational support. Elements of successful aging management in social work were determined as policy management, healthcare management, social security, education management, psychology management, ergonomics and technology, employment management, and equality management. Within the scope of these elements, recommendations were made to policymakers and practitioners. The study contributes to social work, which is an academic discipline, in the context of introducing the elements of successful aging management.

Keywords: *Successful aging, social work, employment management, equality management, social security, policy management*

Sosyal Hizmette Başarılı Yaşlanma Yönetimi

*

Öz

Bu çalışmanın amacı sosyal hizmette başarılı yaşlanma yönetimine ilişkin unsurları belirlemek, politika belirleyicilere ve uygulayıcılara bu bağlamda önerilerde bulunmaktır. Çalışma aktif yaşlanma, sosyal çatışma, yaşlılıkta iş hayatı ve tatmini teorileri esas alınarak gerçekleştirildi. Çalışmada sistematik derleme methodu uygulandı. Çalışma sırasıyla araştırma metodolojisi, teorik çerçeve, başarılı yaşlanma ile ilişkili konular, ve başarılı yaşlanma yönetimi konularından oluşmaktadır. Başarılı yaşlanma ile ilişkili konular subjektif iyi oluş, yaşam kalitesi, örgütsel destek, gerontososyoloji olarak tespit edildi. Sosyal hizmette başarılı yaşlanma yönetiminin unsurları politika yönetimi, sağlık yönetimi, sosyal güvenlik, eğitim yönetimi, psikoloji yönetimi, ergonomi ve teknoloji, istihdam yönetimi, ve eşitlik yönetimi olarak belirlendi. Bu unsurlar kapsamında politika belirleyicilere ve uygulayıcılara önerilerde bulunuldu. Çalışma, academic discipline olan sosyal hizmet bilimine başarılı yaşlanma yönetiminin unsurlarının ortaya konulması bağlamında katkıda bulunmaktadır.

Anahtar Kelimeler: *Lüks Marka İletişimi, Dijital Dönüşüm, Artırılmış Gerçeklik*

Introduction

The roles of individuals in society, increasing their social functionality and the welfare of society are possible with social work (Reisman, 2001). This discipline concerns many fields in education and social sciences (Payne, 2014). Social work, which concerns fields such as law, economics, politics, public health, social security, sociology, is an interdisciplinary field where important initiatives are performed for the individual's aging process (Johns, 2020). This field concerns all members of a society who presents an important support element in their old age and provides social and state support through policy and legal developments.

Groups, social classes, virtual social formations gain significant momentum in the lives of older individuals through social work (Dudley, 2020). Social work covers all of the efforts required to ensure and improve the social welfare of individuals on issues such as social, health, safety and education (Oliver and Sapey, 1999). These efforts have a significant impact on the lives of older individuals. Contributions made with social support, social security and policy development reveal the benefits of social work for the aging process (Scharlach et al., 2000). Successful aging is a condition in which this process is manifested by the elderly individual with many factors (Havighurst, 1963).

Successful aging is a positive and efficient process management of elderly individuals who are in a social, physical and pathological cycle (Olson and Shultz, 2019). Social work, on the other hand, is a discipline that supports elderly individuals about their deficiencies due to their decline, helps policy development, and performs the necessary research and initiatives to increase the welfare and social functionality of individuals (Yağcıoğlu, 2009). Based on this, management in the successful aging process is an important and current problem that needs to be examined depending on which factors are related to social work. On the other hand, ensuring social welfare and equality and identifying the factors that affect the successful aging of the elderly is important in the context of social work (Berkman, 2000). Therefore, The study aims to identify the elements related to successful aging management in social work and to make recommendations to policymakers and practitioners in this context. The target audiences of the

study are regarding the fields of social work, aging, social gerontology, and human and social sciences.

Research Methodology

In this study, a systematic review method was adopted. This method involves the analysis of comprehensive research, inspired by a social problem, in a systematic way (Komba and Lwoga, 2020). The research is carried out with the literature review. The findings and knowledge are classified according to the topics. The draft text obtained is reviewed for integrity (Pawson et al., 2005). The texts under the titles are reclassified according to their level of interest. Then each topic is evaluated according to the previous and next topic (Petticrew and Roberts, 2008). The resulting work is evaluated and reported in the context of the flow. The report creates the contents of the discussion and conclusion sections. These stages were applied respectively in this study. The research question was determined as follows: What is successful aging management? What are the elements of successful aging management in social work?

Theoretical Framework

In this section, active aging/activity theory, social conflict theory, work-life and satisfaction in aging topics are explained. These theories explain successful aging. They also form the basis of the relationship between social work and successful aging.

Active Aging / Activity Theory

The active aging theory was developed in 1960 by Robert Havighurst. This theory is based on regular activities, social roles, and social engagements. Robert Havighurst's Kansas City Studies of Adult Life (1963, 1968) concluded "The more activities, the more successes". According to this theory, unlike withdrawal from life, individuals can enjoy life as long as they are active (Havighurst, 1961; Havighurst, 1968). This theory, which encourages individuals to engage in activity and active participation in the life, is based

on the idea that age differences are not important, and that the activity will contribute to the individual's life (Joung and Miller, 2007).

Active aging is an aging approach that emphasizes the relationship between activity and health, encourages elderly individuals to participate in society, and aims to sustain social, economic and cultural participation with the individual's participation in physical activities and working/business life (Daatland, 2005; Townsend, 2007). The purpose of active aging is the well-being of the elderly. Taking measures to prevent elderly discrimination (ageism) in the development of employment and education policies and ensuring active participation of elderly individuals in many areas of social, economic, educational, cultural, artistic and life are important in successful aging (Foster and Walker, 2015; Corsi and Samek, 2011). This approach is based on the idea that successful aging is not only about healthy aging, but active participation in life will contribute to the individual's emotional and mental life (Walker, 2008).

Active aging, in addition to the benefits of active participation in the elderly, may lead to inappropriate results such as overcoming the purpose of the well-being of the elderly, attaching importance to physical activity, harmony problems caused by ignoring mental and physical decline, the emergence of negative thoughts about the elderly as a result of developing positive discriminatory policies in favor of elderly individuals (Holstein and Minkler, 2007; Barrett and McGoldrick, 2013; Calasanti, Slevin, and King, 2006).

Passive tendencies of behaviors in society are negative behavior patterns that are not considered appropriate and isolate people from society. The fact that the elderly individual is in passive tendencies will push her/him to social isolation, negative emotions, unhappiness (Petersen and Gasimova, 2019). For this reason, passive behaviors containing negative tendencies should be prevented and the elderly should be directed to positive tendency activities (Hooyman and Kiyak, 1999). Transforming the situations into an activity that leads to passivity, such as unemployment and retirement, leads the individual to happiness and satisfaction (Voss et al., 2019).

The ability of the elderly to be socially compatible with the society depends on the policies that will lead the elderly to the activity. In a study conducted by Hooyman and Kiyak (1999), they found that individuals who were active in their lives were happier, physically and mentally healthier

than others. However, the criticism of the theory was that it could not prove the situations of passive but happy, active but unhappy individuals (Hendricks and Hendricks, 1986).

Social Support Network

Individuals are the biological and social entities within the social classes. The family and friends circle is important in the formation of the social support network of individuals (Adelman, 1988). The individuals can be motivated through social networks and stabilize the complex emotions they experience in their cognitive processes (Charles, Mather, and Carstensen, 2003).

Individuals actively affect the social environment (Seeman et al., 2001). Community psychology, subgroups, cultural and social influences affect people's decisions and relationships. Social environmental factors affect successful aging in the aging process (Ward, La Gory, and Sherman, 1988).

Psychological Factors

Psychological factors have a positive effect on states such as self-esteem and cope with depression (Hankin et al., 2004; Cousins, 2003). Psychology is an important factor affecting mental processes. Research has provided findings that social psychology has a positive effect in terms of depression and mental health (Barbour and Blumenthal, 2005).

Resilience and Flexibility

Resilience and flexibility are the basic research paths in activity theory. These paths involve holding on to life resulting in death, taking the risks of life, research to provide the necessary conditions for healthy living. Richardson (2002) explains this research as 3 stages:

1. Protective factors: for social and personnel success = assets and quality,
2. Coping with stress,
3. To pursue a healthy life (Richardson, 2002).

Social Conflict Theory

Social conflict theory in aging emphasizes the effects or negative views regarding aging and prejudice and discrimination against the elderly (Rubin, Pruitt, and Kim, 1994). According to this view, some harmful consequences emerge as a result of the work of elder individuals. In terms of health, more problems arise than younger employees, and because of their seniority, they impose high compensation obligations for employers. Besides, due to their physical, psychological and mental decline, their productivity is lower than younger employees (Baron, 1986). For this reason, the distinct differences between the young and the older population bring about conflict. Conflict theory also emphasizes inequality in ethnicity, gender and social class issues (Hooyman and Kiyak, 2011).

Conflict theorists criticize these theories, arguing that the withdrawal and activity theory cannot explain why the level or type of social interaction in the aging period should change. The withdrawal and activity theory excludes the effects of social stratification and social classes on elder individuals (Engeström, 1999). This has excluded the existence of individual and social conflicts among people and provided to reveal a deficit in the aging direction via the conflict approach.

Conflict theorists take into account classifications such as age, economy, and culture that can be emerged in society. Elderly individuals are those who have lost physical and mental losses, some of whom try to sustain their lives with fixed income such as retirement, widows and orphans pension, some of them try to make a living with the support of their families or social services (MacDonald, 2009). This situation pushes them to the result of being subjected to social separation economically and socially. Thus, their social status mostly decreases. Therefore, conflict theorists approach older individuals as victims of social classes and capitalism (Turner and Reynolds, 2001).

Selective Adaptation Approach

Selective adaptation approach is important in the cognitive process. The individuals can reveal their preferences by selecting. This selection process provides an insight into the evaluation of physical change and the limitati-

ons of older individuals. Because the individual can eliminate the trivial ones to realize the activities s/he deems important and can choose a balanced selection strategy to protect her/his existing resources. In the case of decreasing the activity, which is an important issue for conserving resources, the individuals may prefer the activity to their well-being (Hammarström and Torres, 2012). The balancing selective adaptation approach, which was put forward in response to the theory of activity developed by Havighurst (1968), advocated by the evaluation of the withdrawal theory of Cumming and Henry (1961), predicts that activities may also result from environmental factors (Havighurst, 1968).

Work Life and Satisfaction in Aging

Job satisfaction is the individual's self-assessment regarding the work, the level of positive assessments about the effects of job roles on the employee, and the total of positive thoughts about work in the business-life (Remondet & Hansson, 1991). There are studies regarding the significant relationship between successful aging and job satisfaction in the literature (Hansson et al., 1997; Butt and Beiser, 1987). The existence of this relationship arises with the introduction of new roles, and the development of positive relationships with colleagues (Yeatts, Folts, and Knapp, 2000). Yeatts, Edward Folts, and James Knapp (2000) found that employees with high job satisfaction had a positive effect on their intention to stay in the workplace. Cheung and Wu (2013) revealed that perceived organizational support positively affected successful aging in workplaces, and job satisfaction was associated to remain in the workplace, both directly and through mediating effect.

Issues Related to Successful Aging

Issues related to successful aging are positive well-being, quality of life, and organizational support. Clarifying the management in successful aging depends on the explanation of these issues.

Subjective Well-Being

Experiences related to subjective well-being generally include cognitive assessments such as emotional and life satisfaction (Hammarström and

Torres, 2012; Windle and Woods, 2004). Researches have demonstrated that their physical functions are important in determining the well-being of the elderly (Windle and Woods, 2004). However, controversy continues on the objectivity of health-related measurements (Gabriel and Bowling, 2004; Braungart et al., 2007). Social support, friendship, and family relationships affect the psychological and social well-being of the individual (Lang and Heckhausen, 2001). Get involved in social participation and social activities increases the individual's well-being (Walker, 2008). Social classes, gender, financial and economic resources, education level, retirement, and social rights can be determinant factors in subjective well-being (Arber, 2004). Besides, situations such as the environment, good neighborly relations, the location of the house and the spacious of the house affect well-being (Gabriel and Bowling, 2004). However, a negative relationship between family support and subjective well-being among these effects was revealed by Silverstein, Chen, & Heller (1996) (Hammarström and Torres, 2012).

Subjective well-being is under the influence of factors such as individual beliefs, individual control, self-efficacy, personal judgments, and self-esteem, which are dominant in the cognitive aspect (Hammarström and Torres, 2012). The reason for this is that the belief and respect of the individual, his values and judgments are accepted as on social facts (Braungart et al., 2007; Arber, 2004).

Quality of Life

Life satisfaction may vary depending on the place of residence for the elderly individual. The fact that elderly people living in nursing homes have high support expectations, and being more sensitive about their emotional vulnerability in the transition from their normal life to their nursing home life affects their quality of life (Parker et al., 2002). Leung, Famakin, and Kwok (2017) determined that issues such as resting room, guiding signs, balustrades, ventilation, access to doors and windows, lighting were important factors that provide psychological health, and social relationships could be improved by lighting and ventilation. This determination shows that the quality of life can vary according to the place of residence and the conditions of elderly individuals.

In a study conducted with elderly people in Singapore, it was revealed that three demographic variables consisting of individual health conditions, family ties and public safety were the determinants in the quality of life of the elderly (Wong, 2003). For this reason, it was suggested by Wong (2003) that the quality of life of the elderly should be evaluated in a socio-cultural context. In light of this information, the quality of life of the elderly consists of four basic dimensions: physical and psychological health, living environment and social relations.

Organizational Support

Perceived organizational support is the individual's belief in the organization and its value to the organization (Shore and Shore, 1995). When an individual conceives that the organization values individuals and their lives, it can be mentioned that there is perceived organizational support (Eisenberger et al., 2002). Especially the existence of this support in workplaces is more important by individuals (Rhoades and Eisenberger, 2002). Issues such as career opportunities, social, health, and financial benefits, unemployment salaries, retirement benefits, beliefs that complaints will result in equity in incidents within the organization, the expectation of ethical leadership behavior, organizational climate, organizational culture, correct functioning of reward and penalty systems and punishment systems are related with the perceived organizational support (Wayne et al., 2002; Eisenberger et al., 2002). Organizational support theory enables one to reveal the concrete or moral situation that occurs as a result of comparing the inputs provided by the individual with the output of the organization (Kurtessis et al., 2017). Research shows that organizational support is associated with attitude outputs such as emotional and normative organizational commitment, family-work balance, job satisfaction (Riggle, Edmondson, and Hansen, 2009; Rhoades & Eisenberger, 2002). Besides, it is revealed in the literature that the perception of organizational support increases work performance, the desire to stay in the workplace, job and professional satisfaction, and contributes to the perception of organizational support of the colleagues (Kurtessis et al., 2017). Guzzo & Noonan (1994) found that individuals with high organizational support perception reduced their withdrawal behavior (Guzzo, Noonan, and Elron, 1994).

Organizational support ensures that the employee continues to work and remain at work (Nye and Witt, 1993). According to the findings of Robson et al. (2006), it is effective in determining the duties of health care professionals and coping with the changes in their jobs. This idea is associated with Feldman's (1995) determination of the health status of the employee to continue to work in the workplace and Angle and Perry (1981)'s determination that the adaptation behavior of the employee to the environment decreases the tendency to withdraw. The great importance of organizational support in the successful aging of employees in business life, which forms part of life, clearly reveals the impact of the social factor.

Successful Aging Management

Management is a predetermined process, execution of a subject with rules and principles, keeping the individuals under control and organizing, taking the foreseen measures about the problems that arise at this process (Birkinshaw, Hamel, and Mol, 2008). Successful aging requires the management of negative or positive situations that will arise in the reflections of the experiences gained by the individual in the aging process (Freund and Baltes, 1998). Negative situations should be managed for success in old age and positive situations should be managed for sustainability. Social work provides an interdisciplinary effect in this process. Therefore, successful aging management in the context of social work involves management in policy, health, social security, education, psychology, ergonomics, technology, employment, and equality (Oliver and Sapey, 1999).

Policy Management

The policy is related to the management of a country or community (Baldwin, 2017). The population of the elderly in a community or country, the rate of population growth, the distribution of the population by province or region is important for policymaking (Gallo, 1983). The decline and needs arising from aging should be determined by policymakers and necessary measures should be taken. Policy management, which includes multi-factor management styles such as health, technology, education, social secu-

ity, and employment, is related to meeting a different need in successful aging (Harmell, Jeste, and Depp, 2014).

The creation of laws, enforcement of rules, control of executive bodies are under the control of governments and politicians. Elderly discrimination (ageism) in society and unfair practices in the distribution of resources can be prevented through policymakers (Bytheway, 1994). Elderly discrimination is an important intergenerational problem and affects the elderly individual psychologically and socially in the successful aging process (Flores-Sandoval and Kinsella, 2020). Discrimination is related to the effects of elderly people's perspectives on life and differences in their behavior on other people (Bratt, Abrams, and Swift, 2020). On the other hand, the physical, cognitive, psychological and financial decline of the elderly reduces the adaptation to society. Social cohesion enables older individuals to affiliate with the social classes (Hagestad and Uhlenberg, 2005). Social conflicts are reduced with the emergence of younger-elderly interaction. Thus, empathy takes place at the forefront. Policy management plays an important role in developing emotional empathy and ensuring the adaptation of the elderly to the society (Powell, 2001).

A driving force is often needed to take care of the needs of the elderly. Rules that are a fact of social life and obeying these rules emerge with this driving force. This power is the power of the legislature. The mission of the legislature is to prevent conflicts in society, to establish social rules, to provide necessary actions according to changing conditions and to develop economic situations (Merrill, 2010). This mission becomes functional with the philosophy of managing diversity. Diversity such as age, race, gender, language, religion should be considered in policy management (Barak, 2016). In particular, the role of elderly individuals in the community, family and social relationships, physical and psychological needs, and health status should be considered at this level of management. The power, which has become functional with the authorization it is received from the legislature, is the executive body (Rockman, 1984). The executive ensures the enforcement of the rules through the received authorization by the legislature. The protection and provision of their legal rights in meeting the current needs of the elderly, the supervision of the institutions and organizations that care for the elderly are ensured through executive bodies. Policy management ensures the efficient execution of the legislature and executive bodies (Lindley,

1975). Productivity outcomes in the performance of these bodies lead to the development of trust, commitment and loyalty emotions among older people regarding the rights they are granted. Thus, the political trust gained by elderly individuals in the successful aging process will be at a high level.

Healthcare Management

One of the most important factors affecting successful aging is health problems. Strengthening the metabolism of the individual, whose health controls gradually deteriorate, is important for the prevention of diseases (Walshe and Smith, 2011). Methods of protection against viruses that threaten health, especially the elderly population, such as COVID 19, HIV are addressed in the context of health management. The immune system weakens with increasing age, thereby reducing body resistance in the context of disease prevention. Necessary measures should be taken in terms of society to protect the elderly from diseases. Government, non-governmental organizations, families, individuals, public institutions and organizations should have social responsibility awareness regarding these measures (McLaughlin and Olson, 2008).

Health management involves anticipating all disease threats that occur with aging and taking necessary measures. On the other hand, how to treat the priority patients due to possible natural events is important in this context (Mendelson and Schwartz, 1993). Especially in underdeveloped and developing countries, these measures are of great importance. Personal hygiene, sanitation, corporate emergency action plans, corporate health services, nursing, home care are the services included in health management (German, Shapiro, and Skinner, 1985). A certain strategy is constituted in the execution of these services.

In the successful aging of the elderly, health management should provide efficiency in the distribution of resources. Health screenings/checkups of elderly individuals living in institutions such as nursing homes should be done regularly (Hochhalter, Smith, and Ory, 2011). Necessary hygiene measures should be taken within the institution, and necessary training should be provided for the personal hygiene of individuals. Financial resources transferred to the institution for health expenditures should be distributed equally to each individual and following the emergency health require-

ments (Jones et al., 2018). In emergencies that threaten public health, necessary information flow should be provided on time through executive bodies and health institutions. Besides, the health management unit should be separate in every institution that provides elderly care. Since successful aging will occur with a healthy body, this issue should be given utmost importance for social responsibility and the health of the individual.

Nurses ensure home care services. In this service, the assistant staff assists the nurse and the elderly individual in providing the necessary service (Taylor and Donnelly, 2006). For this reason, these employees should also have the necessary information to ensure the hygiene and health of the elderly. In health management, the healthcare practitioner and assistant personnel must act together, perform the information flow quickly and take protective measures (Banerjee and Macdonald, 1996). Therefore, planning, implementation, and feedback is important in health management. The plan involves considering the current health rules and policies, implementation of these rules correctly to the individuals, and feedback involves recording the problems and success level in the post-implementation service.

Social Security

Social security is a policy-protected by legal guarantee to ensure justice in accessing resources to ensure social welfare (Gruber and Wise, 2008). The unjust situations that occur for the unemployed, the disabled, the retired and the elderly can be eliminated with social security. Income imbalances significantly prevent meeting the consumption needs in the society (Diamond and Gruber, 1999). Especially increasing age-related physical barriers and health problems create an unsuitable situation for older individuals to work in a workplace. Diseases such as dementia, Alzheimer's, sarcopenia cause loss of labor and activity. Therefore, individuals need financial and social support due to these losses as they age. Financial and social support is crucial in the context of active participation in the successful aging process (Berkman, 1983). Social security systems of societies aim to eliminate imbalances that arise due to these declines.

Social security systems vary based on the cultural, geographic and population of the societies (Orszag, and Stiglitz, 2001). The varied consumption habits of elderly individuals, the necessities arising due to innovations in the

medical field, increasing migration, mortality rates, natural events such as earthquake and flood, climate changes, epidemic diseases require social security policies (Van Ginneken, 2003). These policies ensure the elimination of inequalities in utilizing the available resources of the elderly. Elimination of inequalities positively affects the successful aging of the individual by ensuring active participation in life (Muuri, 2010). Social welfare occurs with constituting a system in which each individual is socially accepted with their differences (Alesina and Stantcheva, 2020). Therefore, social security is an essential system in ensuring social welfare. Thus, social conflicts of interest can be minimized.

Education Management

Education is an increasing need with advancing age and is crucial for successful aging (Boulton-Lewis, 2010). Technological, political, social, cultural and many related developments are transferred to individuals through education. The memory and perception problems that arise due to the increasing age of elderly individuals reveal the importance of education (Hurley and Roth, 2000). Education provides important awareness in older individuals on issues such as memory, understanding, psychological resilience, social connectedness, and loneliness (Snider, 1980). For this reason, education management should be applied efficiently for the successful aging of the elderly.

Training can be provided by non-governmental organizations or government. However, the training of older individuals should be carried out with a sense of social responsibility. Training for social welfare should be provided to older individuals at a certain frequency (Risi, 2009). In this context, it is required for crucial responsibilities for families and friends of the elderly individual. Providing social benefit is the duty of not only the state but also of all individuals. Training involving intergenerational cooperation programs are especially useful for older individuals (Babnik and Trunk Širca, 2014).

In education management, a certain process is followed considering successful aging. Demographic information, educational purpose, and scope of the elderly individuals targeted in educational management are determined in advance. A program for training is determined, then location, instructor

and participants are selected. After the training is planned to be announced on platforms such as social media or public spots, the fitness and performance of the training are managed. For this, feedback should be provided by the elderly.

Values education is another important issue in educational management. Respecting and prioritizing the elderly is required. Formal and informal education starting from the family is of great importance (Eroğlu, 2012). Gaining cultural and social values, giving the elderly people the necessary attention, reducing age discrimination depends on values education. Individuals can form their personalities, transform their knowledge and experience into behavior, and educate each other with believing conscientious values for a social structure in which they express their innovative ideas (Çağlar, 2014). Education is the process of gaining values and actions that start before school and continue until death. Therefore, the successful management of the aging process depends on a sense of social responsibility.

Psychology Management

Psychology is related to the mental and spiritual state that affects mental characteristics and behavior (Solso, MacLin, and MacLin, 2005). Therefore, successful aging is possible by managing the psychological state. The declines (physical, social, health, financial, etc.) that occur during the transition from adult to old age negatively affect the psychology of the individual (Jopp and Smith, 2006). Obtaining psychological resilience enables the individual to experience the aging process successfully (Fletcher and Sarkar, 2013). Stress, anxiety, depression, loneliness, social isolation, discrimination/ageism revealing negative moods affect psychological resilience in the successful aging process (Jeste et al., 2013). Psychology management aims to control the effects of these negative moods.

The psychological state varies by gender. Stress-related to business-life and the prostate that occurs with aging create a negative psychological state in men (Gustafsson et al., 1995). On the other hand, in women, health conditions such as menopause, gynecological diseases, and breast cancer affect psychology negatively (Lee, 1998). For this reason, it is necessary to follow the post-menopausal period for women and provide psychological resilience for both women and men.

Psychology management is essential for the patient and elderly care (Mellor et al., 2008). The psychology of palliative patients should be managed in an institutional context due to the effects that occur with aging (Kelly, McClement, and Chochinov, 2006). Measures to provide psychological support should be taken for the elderly who continue their treatment in hospitals to cope with the disease (Severs and Wilkins, 1991). In particular, psychiatric service should be given to these patients. The psychological state of the elderly living in a nursing home is also important (Kasser and Ryan, 1999). Elderly individuals who do not get support from their families or live alone are forced to live in nursing homes. For the successful aging of individuals in these life units, the factors that negatively affect their psychology should be identified and necessary measures should be taken. Activities that will ensure active participation in social life, sports, exercises, psychological support and consultancy, teamwork, intergenerational activities are important in psychology management.

Ergonomics and Technology

Ergonomics is the design or adaptation of the tools and devices used by individuals to provide the necessary comfort and efficiency in the work environment (Hendrick, 2000). Tools and technological devices used in daily life should be suitable for the use of individuals (Anshel, 2007). Vehicles that do not meet the usability, convenience, comfort, efficiency and performance criteria are not ergonomic. Usage difficulties caused by physical declines can be eliminated with ergonomics (Roper and Yeh, 2007).

During the aging, bone and muscle structure and active mobility are weakened. Perception, weakening, and dysmnnesia are among these declines. Ergonomics are the designs and arrangements for features that will eliminate these declines (Elbert, Kroemer, and Hoffman, 2018). Smart home systems, smartphones for the elderly, patient lifts, virtual applications for emergencies are ergonomic tools and technologies (Hofvenschiold, 2002). Technology should be designed following the individual's perceptual and mental state (Smith, 1997). It is an important requirement that the devices used by individuals with dysmnnesia and weakness in perception are improved in this context. The rapidly growing elderly population of the world reveals this requirement. On the other hand, successful aging is rising

thanks to the products and devices that prevent the individual's decline from affecting daily life negatively or that positively affect the quality of life (Guse and Masesar, 1999).

Employment Management

The proportion of the elderly population employed is lower than the young population worldwide (Thornton and Lunt, 1997). For this reason, financial decline occurs depending on the increasing age. Post-retirement quality of life, social participation, and satisfaction level of needs decrease due to this decline (Crown, 1996). Therefore, it is necessary to provide financial support for the elderly. This requirement is mandatory for social justice.

Pension systems are implemented by governments to eliminate social inequalities (Settergren, 2001). Successful aging of older individuals depends on high expectations of life and fair financial support. In particular, low employment rates in the elderly population are an important policy problem (Aquino et al., 1996). Adopting a compulsory system for the employment of older individuals can eliminate this problem (Keck and Saraceno, 2009). The loss of muscle and bone strength and cognitive decline should not prevent working in the elderly. Success in old age can be achieved through active participation in life. Individuals can achieve psychological resilience with active participation in social life (Takahashi et al., 2016). State-supported elderly employment policies benefit the macroeconomy by ensuring the successful aging of the individual. Especially by transferring past experiences to business executives and employees, the emergence of new initiatives can be possible with the employment of elderly individuals (Barr, Johnson, and Warshaw, 1992).

Employment management should be organized according to the demographic and cultural characteristics of the elderly, health, physical declines, psychological state, cognitive and mental states (Crown, 1996). Elderly individuals to be employed in health institutions should be employed by taking into account the hygiene and service provision characteristics. Because the hospital climate may threaten the health of the elderly due to a weakened immune system. Attention should be paid to the fact that elderly individuals to be employed in public institutions and organizations provide services in units where communication and interaction with people are intense (To-

nin and Vlassopoulos, 2015). In businesses, it is important to employ older individuals in counseling and teamwork such as entrepreneurship, creating ideas, sharing experiences, group work, coaching and mentoring. Considering the muscle and bone weaknesses, importance should be given on employing older individuals in talent-weighted jobs where body strength is not required.

Equality Management

Equality is the provision of conditions for different individuals in terms of rights, status, and opportunities (Miller, 1996). Social policy ensures that these rights are equally distributed in the social context. Social isolation and loneliness caused by the decline of the elderly take them away from active life (Wenger et al., 1996). Individuals who move away from active life cannot or do not benefit from opportunities and rights. To eliminate these problems, positive discrimination should be implemented in favor of the elderly. Positive discrimination (positive action/affirmative action) is a privilege in favor of individuals who are discriminated against in accessing resources (Baltrunaite, Casarico, and Profeta, 2015).

Significant difficulties are encountered in accessing opportunities and resources for older individuals in employment, entrepreneurship, consumption, health and many more. These difficulties are affected by many factors such as aging of the individual, ageism, legal barriers, employment policies and preferences of business owners. Equality management involves distributing all rights and resources equally to everyone and creating a balance in accessing them (Metcalf and Woodhams, 2008). Lack of information caused by physical, cognitive and social weakness is taken into account in this context. Social policies should be carried out to benefit the elderly people from rights and resources, whose social network is weakened and the possibility of access to current developments from the internet or social media is weak (Rothstein and Uslaner, 2005). These policies should involve providing the elderly with the necessary information and training when necessary. Training should be provided especially in the areas of assistive technology, financial resource management, and social security (Brezna, 2010).

It is an important fact that making the conditions of loans to be provided by banks to elderly individuals more difficult, having problems with emp-

loyment, elderly individuals who have been abandoned by their families or have no family, experience financial resources problems. Necessary measures are taken with social policy to eliminate these difficulties (Thompson, 2016). On the other hand, the implementation of the rights provided by law to all individuals against the elderly in practice requires equality management (O'Brien, 2011). Equality management requires the supervision of the equal implementation of laws in the provision of rights. If the law providing equal rights that cause problems in practice, positive discrimination provisions should be implemented by the law in favor of the elderly (Cheetham, 1982).

Discussion and Conclusion

Successful aging is a situation in which individuals successfully experience their decline in aging processes in health, social, physical, cognitive, psychological, financial and legal terms. The individual manages this process with individual determination, awareness, and psychological resilience. On the other hand, organizational support is required to manage the process successfully. Important support elements are functional in the context of successful aging in the workplace, living spaces, nursing homes, hospitals, neighborhood relations. For this reason, successful aging should be considered in the context of gerontosociology.

Gerontosociology helps to explain the effects of social interactions of older individuals on successful aging. The individual, which is a part of society, provides the most important support from social factors in their decline due to aging. Therefore, gerontosociology is an important field to be considered in successful aging. Social work, on the other hand, is an interdisciplinary field that involves many topics, including this field. Supporting individuals in the context of social policy in managing the aging process contributes to the successful aging process. Therefore, social work is necessary and important for the successful aging process.

Managing successful aging in the context of social work depends on the policy, health, social security, education, psychology, ergonomics and technology, employment, equality management. These 8 key factors are essential for successful aging management. These findings obtained according to the results of the systematic literature review reveal the importance of social

work policy in successful aging. Individual efforts to overcome the decline in the aging process alone are not enough. Social support and policy are key factors in the successful execution of this process. Studies in the field of social work in the literature are not taken into account the need for management in the successful execution of the aging process. On the other hand, the importance of social work has not been emphasized in studies related to successful aging. This important gap in the literature has been filled with this study. The need for social support of an individual who is a member of the society is an important fact. This fact reveals the importance of social work for older individuals. For this reason, it is recommended to increase the studies with successful aging and social work issues for future studies.

The decline and needs arising due to aging, elderly discrimination and unfair practices in the distribution of resources should be determined by policymakers and necessary measures should be taken. The roles, family and social relationships, physical and psychological needs, health conditions of older individuals in the society should be researched and recorded in the context of social work. To ensure equality, it is recommended to develop and improve positive discrimination in favor of the elderly, to identify the problems experienced in the implementation of legal rights and to take necessary measures. These measures should be taken by all public institutions and organizations. Besides, as required by social responsibility, non-governmental organizations and individuals should report illegal practices to relevant institutions. It is recommended to ensure the sustainability of the necessary training of healthcare personnel for the efficient management of health management, which is an important issue in successful aging. On the other hand, health and psychological problems, which vary according to gender, should be taken into consideration by nursing homes, staff working of home care services, nurses, caregivers, and families. Awareness trainings are recommended in this direction. Adaptation to changing technology and ergonomics should be taken into account by the manufacturing companies. It should not be forgotten that elderly individuals are also consumers.

For the economy to develop and individuals to contribute to the country's economy, it is necessary to encourage entrepreneurial ideas and behaviors of elderly individuals and to make positive discrimination in employment for elderly individuals. Active participation in life can be realized by older individuals who are not withdrawn from social life and not

isolated by society. It is important to develop the necessary policies in this regard.

Kaynakça / References

- Adelman, M. B. (1988). Cross-cultural adjustment: A theoretical perspective on social support. *International Journal of Intercultural Relations*, 12(3), 183-204.
- Alesina, A. F., and Stantcheva, S. (2020). *Diversity, Immigration, and Redistribution* (No. w26620). National Bureau of Economic Research.
- Angle, H. L., and Perry, J. L. (1981). An empirical assessment of organizational commitment and organizational effectiveness. *Administrative science quarterly*, 1-14.
- Anshel, J. R. (2007). Visual ergonomics in the workplace. *AAOHN Journal*, 55(10), 414-420.
- Aquino, J. A., Russell, D. W., Cutrona, C. E., and Altmaier, E. M. (1996). Employment status, social support, and life satisfaction among the elderly. *Journal of counseling psychology*, 43(4), 480.
- Arber, S. (2004). Gender, marital status, and ageing: Linking material, health, and social resources. *Journal of Aging Studies*, 18(1), 91-108.
- Babnik, K., and Trunk Širca, N. (2014). Knowledge creation, transfer and retention: the case of intergenerational cooperation. *International journal of innovation and learning*, 15(4), 349-364.
- Baldwin, M. (2017). *Care management and community care: Social work discretion and the construction of policy: Social work discretion and the construction of policy*. Routledge.
- Baltrunaite, A., Casarico, A., and Profeta, P. (2015). Affirmative action and the power of the elderly. *CESifo Economic Studies*, 61(1), 148-164.
- Banerjee, S., and Macdonald, A. J. (1996). Mental disorder in an elderly home care population: associations with health and social service use. *The British Journal of Psychiatry*, 168(6), 750-756.
- Barak, M. E. M. (2016). *Managing diversity: Toward a globally inclusive workplace*. Sage Publications.
- Barbour, K. A., and Blumenthal, J. A. (2005). Exercise training and depression in older adults. *Neurobiology of aging*, 26(1), 119-123.
- Baron, R. S. (1986). Distraction-conflict theory: Progress and problems. In *Advances in experimental social psychology* (Vol. 19, p. 1-40). Academic Press.

- Barr, J. K., Johnson, K. W., and Warshaw, L. J. (1992). Supporting the elderly: Workplace programs for employed caregivers. *The Milbank Quarterly*, 509-533.
- Barrett, G., and McGoldrick, C. (2013). Narratives of (in) active ageing in poor deprived areas of Liverpool, UK. *International journal of sociology and social policy*.
- Berkman, L. F. (1983). The assessment of social networks and social support in the elderly. *Journal of the American Geriatrics Society*.
- Berkman, L. F. (2000). Social support, social networks, social cohesion and health. *Social work in health care*, 31(2), 3-14.
- Birkinshaw, J., Hamel, G., and Mol, M. J. (2008). Management innovation. *Academy of management Review*, 33(4), 825-845.
- Boulton-Lewis, G. M. (2010). Education and learning for the elderly: Why, how, what. *Educational gerontology*, 36(3), 213-228.
- Bratt, C., Abrams, D., and Swift, H. J. (2020). Supporting the old but neglecting the young? The two faces of ageism. *Developmental Psychology*.
- Braungart Fauth, E., Zarit, S. H., Malmberg, B., and Johansson, B. (2007). Physical, cognitive, and psychosocial variables from the disablement process model predict patterns of independence and the transition into disability for the oldest-old. *The Gerontologist*, 47(5), 613-624.
- Breznau, N. (2010). Economic equality and social welfare: Policy preferences in five nations. *International Journal of Public Opinion Research*, 22(4), 458-484.
- Butt, D. S., and Beiser, M. (1987). Successful aging: A theme for international psychology. *Psychology and Aging*, 2(1), 87.
- Bytheway, B. (1994). *Ageism*. McGraw-Hill Education (UK).
- Calasanti, T., Slevin, K. F., and King, N. (2006). Ageism and feminism: From "et cetera" to center. *NWSA journal*, 13-30.
- Charles, S. T., Mather, M., and Carstensen, L. L. (2003). Aging and emotional memory: the forgettable nature of negative images for older adults. *Journal of Experimental Psychology: General*, 132(2), 310.
- Cheetham, J. (1982). Positive discrimination in social work: Negotiating the opposition. *Journal of Ethnic and Migration Studies*, 10(1), 27-37.
- Cheung, F., and Wu, A. M. (2013). Older workers' successful aging and intention to stay. *Journal of Managerial Psychology*. 28(6), 645-660.
- Corsi, M., and Samek, L. (2011). Active ageing and gender equality policies. *EGGSI report for the European Commission, DG Employment, Social Affairs, and Equal Opportunities, Brussels*.

- Cousins, S. O. B. (2003). Grounding theory in self-referent thinking: Conceptualizing motivation for older adult physical activity. *Psychology of Sport and Exercise*, 4(2), 81-100.
- Crown, W. H. (1996). *Handbook on employment and the elderly*. Westport, CT: Greenwood Press.
- Çağlar, T. (2014). Yaşlılık ve sosyal hizmet: Yaşam destek merkezi. *Toplum ve Sosyal Hizmet*, 25(2), 145-162.
- Daatland, S. O. (2005). Quality of life and ageing. Teoksessa Malcolm L. Johnson (ed.) *Age and Ageing* (p. 371-377).
- Diamond, P., and Gruber, J. (1999). Social security and retirement in the United States. In *Social security and retirement around the world* (p. 437-473). University of Chicago Press.
- Dudley, J. R. (2020). *Social work evaluation: Enhancing what we do*. Oxford University Press, USA.
- Eisenberger, R., Stinglhamber, F., Vandenberghe, C., Sucharski, I. L., and Rhoades, L. (2002). Perceived supervisor support: contributions to perceived organizational support and employee retention. *Journal of applied psychology*, 87(3), 565.
- Elbert, K. K., Kroemer, H. B., and Hoffman, A. D. K. (2018). *Ergonomics: how to design for ease and efficiency*. Academic Press.
- Engeström, Y. (1999). Activity theory and individual and social transformation. *Perspectives on activity theory*, 19(38).
- Eroğlu, S. E. (2012). Values: Great challenge for construction of social structure with social institutions. *Journal of Human Sciences*, 9(2), 82-90.
- Feldman, G. (1995). Workplace power and collective activity: The supervisory and managerial exclusions in labor law. *Ariz. L. Rev.*, 37, 525-562.
- Fletcher, D., and Sarkar, M. (2013). Psychological resilience: A review and critique of definitions, concepts, and theory. *European psychologist*, 18(1), 12.
- Flores-Sandoval, C., and Kinsella, E. A. (2020). Overcoming ageism: critical reflexivity for gerontology practice. *Educational Gerontology*, 1-12.
- Foster, L., and Walker, A. (2015). Active and successful aging: A European policy perspective. *The Gerontologist*, 55(1), 83-90.
- Freund, A. M., and Baltes, P. B. (1998). Selection, optimization, and compensation as strategies of life management: correlations with subjective indicators of successful aging. *Psychology and aging*, 13(4), 531.

- Gabriel, Z., and Bowling, A. (2004). Quality of life from the perspectives of older people. *Ageing & Society*, 24(5), 675-691.
- Gallo, F. (1983). The effects of social support networks on the health of the elderly. *Social Work in Health Care*, 8(2), 65-74.
- German, P. S., Shapiro, S., and Skinner, E. A. (1985). Mental health of the elderly: use of health and mental health services. *Journal of the American Geriatrics Society*, 33(4), 246-252.
- Gruber, J., and Wise, D. A. (2008). *Social security and retirement around the world*. University of Chicago Press.
- Guse, L. W., and Masesar, M. A. (1999). Quality of life and successful aging in long-term care: Perceptions of residents. *Issues in mental health nursing*, 20(6), 527-539.
- Gustafsson, O., Theorell, T., Norming, U., Perski, A., Öhström, M., and Nyman, C. R. (1995). Psychological reactions in men screened for prostate cancer. *British journal of urology*, 75(5), 631-636.
- Guzzo, R. A., Noonan, K. A., and Elron, E. (1994). Expatriate managers and the psychological contract. *Journal of Applied psychology*, 79(4), 617-626.
- Guzzo, R. A., and Noonan, K. A. (1994). Human resource practices as communications and the psychological contract. *Human resource management*, 33(3), 447-462.
- Hagestad, G. O., and Uhlenberg, P. (2005). The social separation of old and young: A root of ageism. *Journal of social issues*, 61(2), 343-360.
- Hammarström, G., and Torres, S. (2012). Variations in subjective well-being when 'aging in place'—A matter of acceptance, predictability and control. *Journal of Aging Studies*, 26(2), 192-203.
- Hankin, B. L., Abramson, L. Y., Miller, N., and Haefel, G. J. (2004). Cognitive vulnerability-stress theories of depression: Examining affective specificity in the prediction of depression versus anxiety in three prospective studies. *Cognitive therapy and research*, 28(3), 309-345.
- Hansson, R. O., DeKoekkoek, P. D., Neece, W. M., and Patterson, D. W. (1997). Successful aging at work: Annual review, 1992–1996: The older worker and transitions to retirement. *Journal of vocational behavior*, 51(2), 202-233.
- Harmell, A. L., Jeste, D., and Depp, C. (2014). Strategies for successful aging: a research update. *Current psychiatry reports*, 16(10), 476.
- Havighurst, R. J. (1961). Older people: A test of life satisfaction. *Gerontologist*, 1, 8-13.

- Havighurst, R. J. (1963). Successful aging. *Processes of aging: Social and psychological perspectives*, 1, 299-320.
- Havighurst, R. J. (1968). Personality and patterns of aging. *The gerontologist*, 8(1_Part_2), 20-23.
- Hendrick, H. W. (2000). The technology of ergonomics. *Theoretical Issues in Ergonomics Science*, 1(1), 22-33.
- Hendrick, C., and Hendrick, S. (1986). A theory and method of love. *Journal of personality and social psychology*, 50(2), 392-402.
- Hochhalter, A. K., Smith, M. L., and Ory, M. G. (2011). Successful aging and resilience: Applications for public health and health care. In *Resilience in Aging* (p. 15-29). Springer, New York, NY.
- Hofvenschild, E. (2002). Cultural issues in human computer interaction and ergonomics and the design of smartphones. *Contemporary ergonomics*, 372-378.
- Holstein, M. B., and Minkler, M. (2007). Critical gerontology: Reflections for the 21st century. *Critical perspectives on ageing societies*, 13-26.
- Hooyma, N.R. and Kiyak, H.A. (1999). *Social gerontology: a multidisciplinary perspective* (5th ed.). , Boston, MA: Allyn & Bacon.
- Hooyma, N. R., and Kiyak, H. A. (2011). The growth of social gerontology. *Social Gerontology: A multidisciplinary perspective*, 3-42.
- Hurley, B. F., and Roth, S. M. (2000). Strength training in the elderly. *Sports Medicine*, 30(4), 249-268.
- Jeste, D. V., Savla, G. N., Thompson, W. K., Vahia, I. V., Glorioso, D. K., Martin, A. V. S., ... Depp, C. A. (2013). Association between older age and more successful aging: critical role of resilience and depression. *American Journal of Psychiatry*, 170(2), 188-196.
- Johns, R. (2020). *Using the law in social work*. Learning Matters.
- Jones, C., Finkler, S. A., Kovner, C. T., and Mose, J. (2018). *Financial Management for Nurse Managers and Executives-E-Book*. Elsevier Health Sciences.
- Jopp, D. and Smith, J. (2006). Resources and life-management strategies as determinants of successful aging: On the protective effect of selection, optimization, and compensation. *Psychology and aging*, 21(2), 253.
- Joung, H. M., and Miller, N. J. (2007). Examining the effects of fashion activities on life satisfaction of older females: Activity theory revisited. *Family and Consumer Sciences Research Journal*, 35(4), 338-356.

- Kasser, V. G., and Ryan, R. M. (1999). The Relation of Psychological Needs for Autonomy and Relatedness to Vitality, Well-Being, and Mortality in a Nursing Home 1. *Journal of Applied Social Psychology*, 29(5), 935-954.
- Keck, W., and Saraceno, C. (2009). *Balancing elderly care and employment in Germany* (No. SP I 2009-401). WZB Discussion Paper.
- Kelly, B., McClement, S., and Chochinov, H. M. (2006). Measurement of psychological distress in palliative care. *Palliative Medicine*, 20(8), 779-789.
- Komba, M. M., and Lwoga, E. T. (2020). Systematic Review as a Research Method in Library and Information Science. In *Handbook of Research on Connecting Research Methods for Information Science Research* (p. 80-94). IGI Global.
- Kurtessis, J. N., Eisenberger, R., Ford, M. T., Buffardi, L. C., Stewart, K. A., and Adis, C. S. (2017). Perceived organizational support: A meta-analytic evaluation of organizational support theory. *Journal of management*, 43(6), 1854-1884.
- Lang, F. R., and Heckhausen, J. (2001). Perceived control over development and subjective well-being: Differential benefits across adulthood. *Journal of Personality and Social Psychology*, 81(3), 509.
- Lee, C. (1998). *Women's health: Psychological and social perspectives*. Sage.
- Leung, M. Y., Famakin, I., and Kwok, T. (2017). Relationships between indoor facilities management components and elderly people's quality of life: A study of private domestic buildings. *Habitat International*, 66, 13-23.
- Lindley, C. (1975). Changing policy management responsibilities of local legislative bodies. *Public Administration Review*, 35, 794-797.
- MacDonald, K. (2009). Evolution, psychology, and a conflict theory of culture. *Evolutionary Psychology*, 7(2), 147470490900700206.
- McLaughlin, D. B., and Olson, J. R. (2008). *Healthcare operations management* (Vol. 4). Chicago, IL: Health Administration Press.
- Mellor, D., Davison, T., McCabe, M., and George, K. (2008). The management of depressed elderly care recipients: family perspectives on the skills of professional carers. *Journal of community health nursing*, 25(1), 44-61.
- Mendelson, D. N., and Schwartz, W. B. (1993). The effects of aging and population growth on health care costs. *Health Affairs*, 12(1), 119-125.
- Merrill, T. W. (2010). The Disposing Power of the Legislature. *Columbia Law Review*, 452-478.
- Miller, D. (1996). Equality management—towards a materialist approach. *Gender, Work & Organization*, 3(4), 202-214.

- Metcalfe, B. D., and Woodhams, C. (2008). Critical perspectives in diversity and equality management. *Gender in Management: An International Journal*.
- Muuri, A. (2010). The impact of the use of the social welfare services or social security benefits on attitudes to social welfare policies. *International Journal of Social Welfare*, 19(2), 182-193.
- Nye, L. G., and Witt, L. A. (1993). Dimensionality and construct validity of the perceptions of organizational politics scale (POPS). *Educational and Psychological Measurement*, 53(3), 821-829.
- O'Brien, M. (2011). Equality and fairness: Linking social justice and social work practice. *Journal of Social Work*, 11(2), 143-158.
- Oliver, M., and Sapey, B. (1999). *Social work with disabled people*. Macmillan International Higher Education.
- Olson, D. A., and Shultz, K. S. (2019). Lifespan perspectives on successful aging at work. In *Work across the Lifespan* (pp. 215-234). Academic Press.
- Orszag, P. R., and Stiglitz, J. E. (2001). Rethinking pension reform: Ten myths about social security systems. *New ideas about old age security*, 17-56.
- Parker, C., Barnes, S., McKee, K., Morgan, K., Torrington, J., and Tregenza, P. (2004). Quality of life and building design in residential and nursing homes for older people. *Ageing & Society*, 24(6), 941-962.
- Pawson, R., Greenhalgh, T., Harvey, G., and Walshe, K. (2005). Realist review-a new method of systematic review designed for complex policy interventions. *Journal of health services research & policy*, 10(1_suppl), 21-34.
- Payne, M. (2014). *Modern social work theory*. Oxford University Press.
- Petersen, E., and Gasimova, L. (2019). Elderly people's existential loneliness experience throughout their life in Sweden and its correlation to emotional (subjective) well-being.
- Petticrew, M., and Roberts, H. (2008). *Systematic reviews in the social sciences: A practical guide*. John Wiley & Sons.
- Powell, J. L. (2001). Theorizing gerontology: The case of old age, professional power, and social policy in the United Kingdom. *Journal of Aging and Identity*, 6(3), 117-135.
- Reisman, D. (2001). *Richard Titmuss; Welfare and Society: Welfare and Society*. Springer.
- Remondet, J. H., and Hansson, R. O. (1991). Job-related threats to control among older employees. *Journal of Social Issues*, 47(4), 129-141.
- Rhoades, L., and Eisenberger, R. (2002). Perceived organizational support: a review of the literature. *Journal of applied psychology*, 87(4), 698-714.

- Richardson, G. E. (2002). The metatheory of resilience and resiliency. *Journal of clinical psychology*, 58(3), 307-321.
- Riggle, R. J., Edmondson, D. R., and Hansen, J. D. (2009). A meta-analysis of the relationship between perceived organizational support and job outcomes: 20 years of research. *Journal of business research*, 62(10), 1027-1030.
- Risi, E. (2009). Learning against Ageing: Training Opportunities for the Elderly to Learn New Technologies. *European Papers in New Welfare*, 13(1), 74-89.
- Robson, S. M., Hansson, R. O., Abalos, A., and Booth, M. (2006). Successful aging: Criteria for aging well in the workplace. *Journal of Career Development*, 33(2), 156-177.
- Rockman, B. A. (1984). Legislative-executive relations and legislative oversight. *Legislative Studies Quarterly*, 387-440.
- Roper, K. O., and Yeh, D. C. (2007). Ergonomic solutions for an aging workforce. *Journal of Facilities Management*.
- Rothstein, B., and Uslaner, E. M. (2005). All for all: Equality, corruption, and social trust. *World politics*, 58(1), 41-72.
- Rubin, J. Z., Pruitt, D. G., and Kim, S. H. (1994). *Social conflict: Escalation, stalemate, and settlement*. McGraw-Hill Book Company.
- Scharlach, A., Damron-Rodriguez, J., Robinson, B., and Feldman, R. (2000). Educating social workers for an aging society: A vision for the 21st century. *Journal of social work education*, 36(3), 521-538.
- Seeman, T. E., Lusignolo, T. M., Albert, M., & Berkman, L. (2001). Social relationships, social support, and patterns of cognitive aging in healthy, high-functioning older adults: MacArthur studies of successful aging. *Health psychology*, 20(4), 243.
- Settergren, O. (2001). The automatic balance mechanism of the Swedish pension system. *Wirtschaftspolitische Blätter*, 4, 2001.
- Severs, M. P., and Wilkins, P. S. W. (1991). A hospital palliative care ward for elderly people. *Age and ageing*, 20(5), 361-364.
- Shore, L. M. , and Shore, T. H. (1995). Perceived organizational support and organizational justice. In R. Cropanzano & K. M. Kacmar (Eds.), *Organizational politics, justice, and support: Managing the social climate of the workplace*: 149-154. Westport, CT: Quorum Books.
- Silverstein, M., Chen, X., and Heller, K. (1996). Too much of a good thing? Intergenerational social support and the psychological well-being of older parents. *Journal of Marriage and the Family*, 970-982.

- Smith, M. J. (1997). Psychosocial aspects of working with video display terminals (VDTs) and employee physical and mental health. *Ergonomics*, 40(10), 1002-1015.
- Snider, E. L. (1980). Awareness and use of health services by the elderly: A Canadian study. *Medical Care*, 1177-1182.
- Solso, R. L., MacLin, M. K., and MacLin, O. H. (2005). *Cognitive psychology*. Pearson Education New Zealand.
- Takahashi, K., Sase, E., Kato, A., Igari, T., Kikuchi, K., and Jimba, M. (2016). Psychological resilience and active social participation among older adults with incontinence: a qualitative study. *Aging & mental health*, 20(11), 1167-1173.
- Taylor, B. J., and Donnelly, M. (2006). Risks to home care workers: Professional perspectives. *Health, risk & society*, 8(3), 239-256.
- Thompson, N. (2016). *Anti-discriminatory practice: Equality, diversity and social justice*. Macmillan International Higher Education.
- Thornton, P., and Lunt, N. (1997). Employment policies for disabled people in eighteen countries: A review.
- Tonin, M., and Vlassopoulos, M. (2015). Are public sector workers different? Cross-European evidence from elderly workers and retirees. *IZA Journal of Labor Economics*, 4(1), 11.
- Townsend, P. (2007). Using human rights to defeat ageism: Dealing with policy-induced 'structured dependency.'. *Critical perspectives on ageing societies*, 27-44.
- Turner, J. C., and Reynolds, K. J. (2001). The social identity perspective in intergroup relations: Theories, themes, and controversies. *Blackwell handbook of social psychology: Intergroup processes*, 4, 133-152.
- Van Ginneken, W. (2003). Extending social security: Policies for developing countries. *Int'l Lab. Rev.*, 142, 277.
- Voss, M. W., Merryman, M. B., Crabtree, L., Subasic, K., Birmingham, W., Wadsworth, L., and Hung, M. (2019). Late-career unemployment has mixed effects in retirement. *Journal of Occupational Science*, 26(1), 29-39.
- Walker, A. (2008). Commentary: The emergence and application of active aging in Europe. *Journal of Aging & Social Policy*, 21(1), 75-93.
- Walshe, K., and Smith, J. (2011). *Healthcare management*. McGraw-Hill Education (UK).
- Ward, R. A., La Gory, M., and Sherman, S. R. (1988). *The environment for aging: Interpersonal, social, and spatial contexts*. University of Alabama Press.

- Wayne, S. J., Shore, L. M., Bommer, W. H., and Tetrick, L. E. (2002). The role of fair treatment and rewards in perceptions of organizational support and leader-member exchange. *Journal of applied psychology, 87*(3), 590-598.
- Wenger, G. C., Davies, R., Shahtahmasebi, S., and Scott, A. (1996). Social isolation and loneliness in old age: review and model refinement. *Ageing & Society, 16*(3), 333-358.
- Windle, G., and Woods, R. T. (2004). Variations in subjective wellbeing: The mediating role of a psychological resource. *Ageing & Society, 24*(4), 583-602.
- Wong, G. K. (2003). Quality of life of the elderly in Singapore's multi-racial society. *International Journal of Social Economics.30*(3), 302-319.
- Yağcıoğlu, R. (2009). Sağlıklı yaşlanma ve sosyal hizmetler. *The Journal of Turkish Family Physician, C, 3*, 30-38.
- Yeatts, D. E., Folts, W. E., and Knapp, J. (2000). Older Workers' adaptation to a Changing Workplace: Employment Issues for the 21st Century. *Educational Gerontology, 26*(6), 565-582.

Kaynakça Bilgisi / Citation Information

Özsungur, F. (2020). Successful aging management in social work. *OPUS–International Journal of Society Researches, 15*(10. Yıl Özel Sayısı), 5277-5307. DOI: 10.26466/opus.714226