

JOURNAL OF AWARENESS



International Peer-Reviewed and Open Access Electronic Journal

Uluslararası Hakemli ve Açık Erişimli Elektronik Dergi

E-ISSN : 2149-6544

DOI : 10.26809/joa



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VOLUME/CİLT: 7

ISSUE/SAYI: 2

YEAR/YIL: 2022



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Volume / Cilt: 7

Issue / Sayı: 2

April / Nisan 2022

Web: <https://journals.gen.tr/joa>

E-mail: joa.editorial@gmail.com

Address: Sarıcaeli Köyü ÇOMÜ Sarıcaeli Yerleşkesi No:29, D.119 Merkez
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Derginin yayın dili Türkçe ve İngilizce'dir.

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ARAŞTIRMA MAKALESİ/RESEARCH ARTICLE

Peyzaj analizinde değer elemanının irdelenmesi

Examination of value element in landscape analysis

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Özet

Çalışma, tasarımcı adaylarına verilen bir proje konusunun tasarımcıların sahip olduğu tinsel yaklaşımlar ile değerlendirilmesi üzerine kurgulanmıştır. Tasarımcılar kendilerine verilen konuyu temel tasarım elemanlarından biri olan “değer” ilkesini kullanarak çalışma alanına yönelik yapılan alan analizini tinsel yaklaşımlarla değerlendirerek iki farklı alan analiz modeli (renkli ve renksiz) geliştirmişlerdir. Çalışmada tasarımcılardan istenilen soyut düşünceleri somutlaştırarak peyzaj mimarlığı projelerinin ilk aşamasında kullanılan alan analizine farklı bir kavramsal açıdan ele almalarıdır. Bu doğrultuda ele alınan alan analizi yaklaşımlarında tasarımcıların doğaya sıklıkla öykündüğü gözlemlenirken sahip oldukları tinsel yaklaşımlarında rahatlıkla tasarıma aktarabildikleri görülmüştür. Sonuç olarak bireylerin sahip olduğu tinsel yaklaşımının hem peyzaj mimarlığı eğitiminde verilen proje tasarım eğitimi ile birleştirebildikleri hem de tasarımlarında “doğaya öykünme ile bireysel özgünlük” ün bir arada kullanılabilecekleri görülmüştür.

Anahtar kelimeler: Temel tasarım, değer elemanı, tinsel yaklaşım, tasarım, alan analizi

Abstract

The study is based on the evaluation of a project subject given to designer candidates with the spiritual approaches of the designers. Using the principle of “value”, which is one of the basic design elements of the subject given to them, the designers have developed two different field analysis models (colored and non-coloured) by evaluating the field analysis for the study area with spiritual approaches. The aim of the study is to embody the abstract ideas required from the designers and to approach the field analysis used in the first stage of landscape architecture projects from a different conceptual perspective. In the field analysis approaches discussed in this direction, it

Citation/Atf: BOGENÇ, Ç. & BEKCI, B. (2022).Peyzaj analizinde değer elemanının irdelenmesi. *Journal of Awareness*. 7(2): 57-63, DOI: 10.26809/joa.7.2.01

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has been observed that designers often emulate nature, while it is seen that they can easily transfer their spiritual approaches to design. As a result, it has been seen that the spiritual approach of individuals can be combined with the project design education given in landscape architecture education, and that “imitation of nature and individual originality” can be used together in their designs.

Keywords: Basic design, value element, spiritual approach, design, field analysis

1. TASARIM FELSEFESİ

Doğaya alternatif özgün bir yaklaşım olan tasarım, estetik felsefesi olarak da adlandırılabilir. Estetik felsefesi (Fry, 1999) tasarım biliminde bir yaratma süreci olarak ele alınırken tüm bilimlerin temelini de oluşturmaktadır (Tunalı, 2020). Tasarımda yaratıcı süreç, daha çok tasarımcının zihninde oluşan zihinsel bir imgenin keşfedilmesi ve onu dışsal bir temsile dönüştürmesinden oluşan içsel bir süreç olarak tanımlanır (Demirkan, 2010). Bir ideanın somutlaştırılması sürecinde mimarlar tasarladıkları yapıları, peyzaj mimarları açık yeşil alanları, şehir bölge planlamacıları planladıkları kentin plan ve çizimlerini oluştururken kavramsal şemalar kullanırlar. Düşünmenin ve onu aktarmanın bir yolu olan kavramsal şemalar, tasarım stüdyolarında sıklıkla kullanılmaktadır. Sadece form kaygısının ön plana çıktığı yaklaşım yerine çalışmanın anlamı, yeri, tarihi ve kültürü gibi verileri içeren tasarımlarda bu şekilde yapılabilmektedir (Bogenç 2021). Bu süreçte tasarımcı geçmişe ait deneyimleri ve anlatımların da etkisinde kalarak tasarımın biçimsel kaygılarına da katkıda bulunur (Potteiger, 1998). Ayrıca tasarımın uygulamalı insan davranışlarını inceleyen sosyal bağlamlarındaki teorik soyutlamalar da oldukça önemlidir (Love 2000). Kısacası diyebiliriz ki mekânsal tasarımlarda “mekânsal anlatı”, “çevresel kalıplar” ve “mekân bilimi” mekânın kültürel bilgisiyle bağlanan kavramsal bir çerçevedir (Silbernagel, 2005).

2. TASARIM VE PLANLAMA

19. yy. da tüm doğa bilimleri yeni bir ivme kazanarak insanın öz varlığının göz ardı edildiği makinelerin hakim olduğu bir sürece girmiştir (Nas, 2015). Modernite olarak adlandırılan bu dönemde toplumda insana verilen değer sevebilme kabiliyeti, mantığı ya da sanatsal yaratıcılığıyla değil dış görünüşü ile belirlenmekteydi

(Fromm, 2004a; 13,14). Bu süreçte teknolojide yaşanan gelişmeler insanların, yaşama, çalışma, iletişim kurma ve öğretme şekli gibi hayatın neredeyse her alanını etkilemiştir (Yang ve diğerleri, 2019). Özellikle Endüstri devrimi, üretimin işleyişinde önemli bir değişikliğe yol açarak sanat eğitimini usta-çırak döngüsünden eğitim ortamına taşıyarak zanaatkarlar sınıfını etkileyerek tasarım anlayışının üretim ile birlikte düşünülmesini sağlamıştır (Ranjan, 2005). Bu dönemde sanat ve tasarım arasında ilişki kurulmaya çalışılırken üretimde çeşitlendirilmeye de gidilmiştir (Boucharenc, 2006). Bu süreç beraberinde “Nasıl tasarlıyoruz?” sorusunu da gündeme getirerek uzmanların tasarım araştırmalarına yoğunlaşmasına neden olup tasarımın uygulanmasına yönelik araçların geliştirilmesine de imkan sunmuştur (Cooper, 2019). Yakın gelecekte günümüze Modern zamanların bir uzmanlığı olarak resmileşen tasarım, bağlam olarak da bu zamanların modernist bilimsel paradigmalarından da etkilenmiştir (Güneş ve Kesti 2018).

3. TEMEL TASARIMDA DEĞER ELEMANI

Maurice de Sausmarez 1964 yılında yazmış olduğu “Görsel biçimin dinamikleri” kitabının girişinde Temel Tasarımı şöyle karakterize eder: “... bir yöntem değil, bir zihin tutumu ... Yeni bir sanat biçimi değil, bir sorgulama biçimi ... kesin olarak kendi başına bir amaç değil, bireyi emrindeki ifade kaynaklarının daha keskin bir şekilde farkına varmanın bir yolu; bir merakın beslenmesi ...” şeklinde anlatmıştır. Zihinde canlandırılan biçim veya fikir olan tasarım, bir biçim, bir obje, bir oluşum veya bir form olabilir. Görsel sanatlarda eserin temel yapıtaşı olan tasarım öge ve ilkelerinin hepsi bir arada kullanılabileceği gibi bir kaç da bir arada kullanılabilir (Yardımcı and Güvenç, 2016). Tasarımcının zihninde canlanan fikir eğitim ve aynı zamanda eğlence amaçlı

olabileceği gibi bir problemin çözümüne yönelik olabildiği gibi bir ihtiyacın çözümlenmesi için düşünülmesi de olasıdır. Dolayısıyla bu biçimin veya bu tasarımın ortaya konması için bir süreç ihtiyaç duyulmaktadır. Bu süreç tasarım süreci olarak adlandırılabilir (Tokman, 1999).

4. ÇALIŞMANIN GENEL TANIMI

Bu makale, doğa bilimlerinin kuramsal olarak ortaya koyduğu doğruların peyzaj mimarlığında tasarım ve planlamaya yansımalarına ilişkin elde edilen sonuçların ampirik yöntem kullanılarak irdelenmesini içermektedir. Çalışmada “değer” ilkesinin tasarımlara konu olan “mekanları oluşturan sert dokular, mekanları oluşturan yumuşak dokular, topografik yapı, kıyı şeridi, yapı adaları” ile nasıl bir etkileşim içerisinde olduğu belirlenmektedir. Bu bağlamda temel tasar dersini alan öğrencilere konu olarak verilen “değer” ilkesinin hem peyzaj mimarlığında en sık kullanılan mekanlardaki ilk algıları hem de (renkli ve renksiz tasarım yaklaşımları ile) bu mekanların birbirleri ile olan etkileşimi bütüncül bir yaklaşımla ele alınmıştır. Tunali (2020)’nin tasarımlara olan tinsel bakış açısından esinlenerek kurgulanan çalışmada farklı niteliklere sahip alanların tasarımcılar üzerindeki ilk algısını “değer” ilkesini kullanarak yorumlamaları (noktalama ve çizgisel ifadelerle) istenmiştir. Böylece tasarımcının bilgi birikimi ve hissettiği tinsel yaklaşımların tasarıma aktarılması sağlanarak peyzaj tasarımının ilk aşamasını oluşturan sörvey çalışmasına yeni bir bakış açısı kazandırılmaya çalışılmıştır.

5. ARAŞTIRMANIN YÖNTEMİ

Kentlerin planlanmasında üst ölçekten alt ölçeğe kadar kentsel planlama ve tasarımın her aşamasında kullanılan değer kavramı tasarımcıların algısı ile oluşturulabilse de kullanıcılar tarafından hissedilememektedir. Gerçekte tasarımcının tasavvurunda var olan, tasavvuru biçimlendiren, onu renklendiren, ona derinlik katan ve fikrin somutlaştırılmasında güçlü bir etki gerekir. Temel tasarımda günümüze kadar gelmiş çalışmaların pek çoğu öykünme kavramı üzerine yoğunlaşmıştır. Tıpkı bir midye kabuğundan, bir yapraktan, bir meyveden, bir hayvandan ya da jeolojik kayaçlardan yararlanarak tasarıma öykünme yolu ile yaklaşmak gibi. Oysaki somut

varlıkların yanı sıra çoğu zaman algılayamadığımız öykünme şekilleri mevcut ekolojik sistemler içerisinde de vardır. Tasarım sürecinde tonlama olarak kullanılan bu eleman doğanın içerisinde karşımıza sıklıkla çıkmaktadır. Doğa içerisinde küme şeklinde bulunan varlıklar ekosistem servisleri içerisindeki fenomenlerle şekillenir. Bu fenomenler doğadan kopuk yaşayan kent insanı tarafından algılanmaz. Halbuki geçmişte doğa ile iç içe yaşayan insanlar yaşam ortamlarını doğal süreçlere göre şekillendirebilmekteydi. Doğayı sonsuz bir varlık olarak görmeyip ihtiyacı olduğu kadar kullanan insanlar dünyanın doğal sürdürülebilir yapısında korumaktadırlar. Oysaki insanlar bu yaşam biçimini kentlerdeki yaşam alanlarına taşıyabilselerdi günümüzde yaşanan ekolojik problemler ve sağlık sorunları ile de karşılaşmazdı.

Maslow’unda belirttiği gibi insanlar öncelikle barınma ihtiyacını karşılayabilmek için yaşam alanlarını oluşturmaya başlamışlardır (Lester, 2013). Sanayileşmenin etkisiyle hızlanan bu süreçle birlikte doğadan kopuk kent modelleri geliştiğinden insan ve doğa ilişkisi kopma noktasına gelmiştir. Doğal süreçten uzakta yaşamaya başlayan insanlar kadar tasarımcılarda doğa farkındalığından uzaklaşmaya başlamıştır. Böylece güneş ışığının yansımaları ve rüzgar esintisi ile yön değiştiren yaprağın renklenmesi kadar suların çıkardığı seslerde hissedilemez olmuştur. Oysa ki doğa içerisinde tecrübe edebileceğimiz bu değer kavramı bir kentin planlanması ve tasarımında önemli bir elemandır. Kentlerde kaybolan bu değer kavramının kentlerde yapılacak planlama ve tasarım yaklaşımlarında tekrar itici güç olabilmesi için kurgulanan bu çalışmada kıyı peyzajına sahip alanlar çok yönlü estetik ve işlevsel niteliklerinden dolayı seçilmiştir. Seçilen bu alanlar 5 farklı kategoride ele alınmıştır. Bu kategoriler kentsel peyzaj içerisinde yapılacak tasarımlarda estetik ve işlevsel bağlamda en çok kullanılan alanlardan seçilmiştir. Duyularımızla kavrayabildiğimiz bu alanlar;

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- D. Kıyı şeridi,
- E. Yapı adalarından oluşmaktadır.

Tasarımcının ortaya koymuş olduğu tasarımdaki değer ancak duygu ve düşüncelerimizle kavrayabileceğimiz gerçek dışı/tinsel bir yapıdır. Tasarımcılar tarafından düşünülen bu tinsel yapının ekosistem servisleri ile güçlü bir bağı da vardır. Çünkü insan kalbi doğanın zenginliğine yönelme kabiliyetindedir. Homologasyon ile şekillenen günümüz kentlerine tasarımcılara ait bu bakış açısının entegre edilmesi gerekmektedir. Bu entegrasyonu destekleyici şekilde kurgulanan çalışmada ampirik yöntem kullanılmıştır. Çalışmaya konu olacak şekilde kategorize edilen her bir alana yönelik tasarımcılardan hayal güçlerini kullanarak değer elemanından yararlanmaları ve tasarım yapmaları istenmiştir. Tasarımın en küçük ölçeğinde hissedilen bu değer ilkesinin üst ölçek planlamayla yansıtılması çalışmanın ana hedefini oluşturmaktadır.

“Tasarlama/Planlama Paradoksu

Tasarım bir sorunu çözmek bağlamında ulaşmak istenen sonuç durum, plan ise sonuç duruma ulaşmak için yapılması gereken işlerle ilgilidir. Bir tasarım olmadan plan olamaz. Çünkü tasarım, planın hedefi, vizyonudur. Planlamak için mutlaka çözeceğimiz bir sorun, ulaşmak istediğimiz bir hedef olmalıdır. Ayrıca, bir tasarım için birden fazla plan yapılabilir, ama bir planın birden fazla sonuç hedefi olamaz. Buna karşılık, gerçekleştirme planı olmayan tasarım olabilir. Buna “rüya” veya “hayal” de diyebiliriz. Bu bakımlardan kentsel planlama, kentsel tasarımı aşar. Tasarım bir rüya ise, plan bir rüyanın nasıl gerçekleşeceğinin rüyasıdır. Peki, biz ne yapmalıyız; rüyalara mı, yoksa rüyayı gerçekleştirme rüyalarına mı önem vermeliyiz?”Melih ERSOY, 2016;39

Genç tasarımcıların tasarım sürecinde “değer” elemanını aynı alanda 2 farklı şekilde yansıtması istenmiştir. Birinci çalışmada (a) siyah ve beyazın belirli oranlarda karıştırılması ikinci aşamada ise (b) soğuk ve sıcak renklerin kullanılması istenmiştir. Elde edilen bu ürünler gerçek ön yapı (duyularımızla kavradığımız) ve gerçek dışı arka yapı (duygu ve düşüncelerimiz ile kavradığımız) yaklaşımları ile değerlendirilmiştir (Tunalı, 2020;43). Her 10 genç tasarımcıya bir kategori atanarak “değer” elemanı 2 farklı şekilde tasarlaması istenmiştir. Çalışmalar tasarımcı uzman bir grup tarafından “ekosistem servislerine duyarlı, görsel kalite niteliği taşıyan, estetik ve

işlevsel değeri” bulunma kriterleri bağlamında irdelenmiş olup her bir kategoride başarılı bulunan 3 örnek seçilerek yorumlanmıştır.

6. BULGULAR

Çalışmada tasarım iki boyutlu olarak irdelenmiştir. Tasarım eylemi hem bir etkinliğin tasarımı (nesne) hem de bir eserin tasarımı (eylem) şeklinde ele alınmıştır (Gürsel Dino, 2012:208). Bu ayırım tasarımda üretkenlik olarak yorumlanmaktadır. Üretken bir system tasarım yapısını belirlerken tasarımın prosedürünü oluşturur. Bu nedenle üretken sistemler oluşturulmadan önce “form” un oluşturulması gereklidir. Bu süreçte “mantığın modellenmesi” olarak yorumlanmaktadır (Leach, 2009:34). Ayrıca tasarım alternatiflerinin ve varyasyonlarının araştırılması gerekir. Bu süreç üretken mantık, tasarım ve mimari için yeni bir süreç olmaktan başka bir şey değildir (Gürsel Dino, 2012:209).

Çalışmaya konu olan 5 farklı niteliğe sahip konunun ele alındığı tasarım yaklaşımlarında tekniğin var olabilmesi için doğa bilimlerinin ortaya koyduğu kuramsal doğrulara ihtiyaç duyulmaktadır. Ancak tekniğin sağladığı olanakların doğa bilimlerinin gelişimindeki rolü yadsınamazdır (Tunalı, 2020). Yapılan çalışmalar bize göstermiştir ki, teknolojik bir tasarımın oluşturulabilmesi için doğa bilimleri ile bir bağ kurulmalıdır. Görülmüştür ki tasarımcılardan konuya ilişkin istenilen ilk yaptıkları tasarımların hepsinde doğaya öykünme ile karşılaşmıştır. Çalışmada yer alan tasarımcılar her defasında konunun içeriğine bağlı kalarak doğal elemanlarına bağlı kalarak tinsel yaklaşımlarını somutlaştırmıştır.

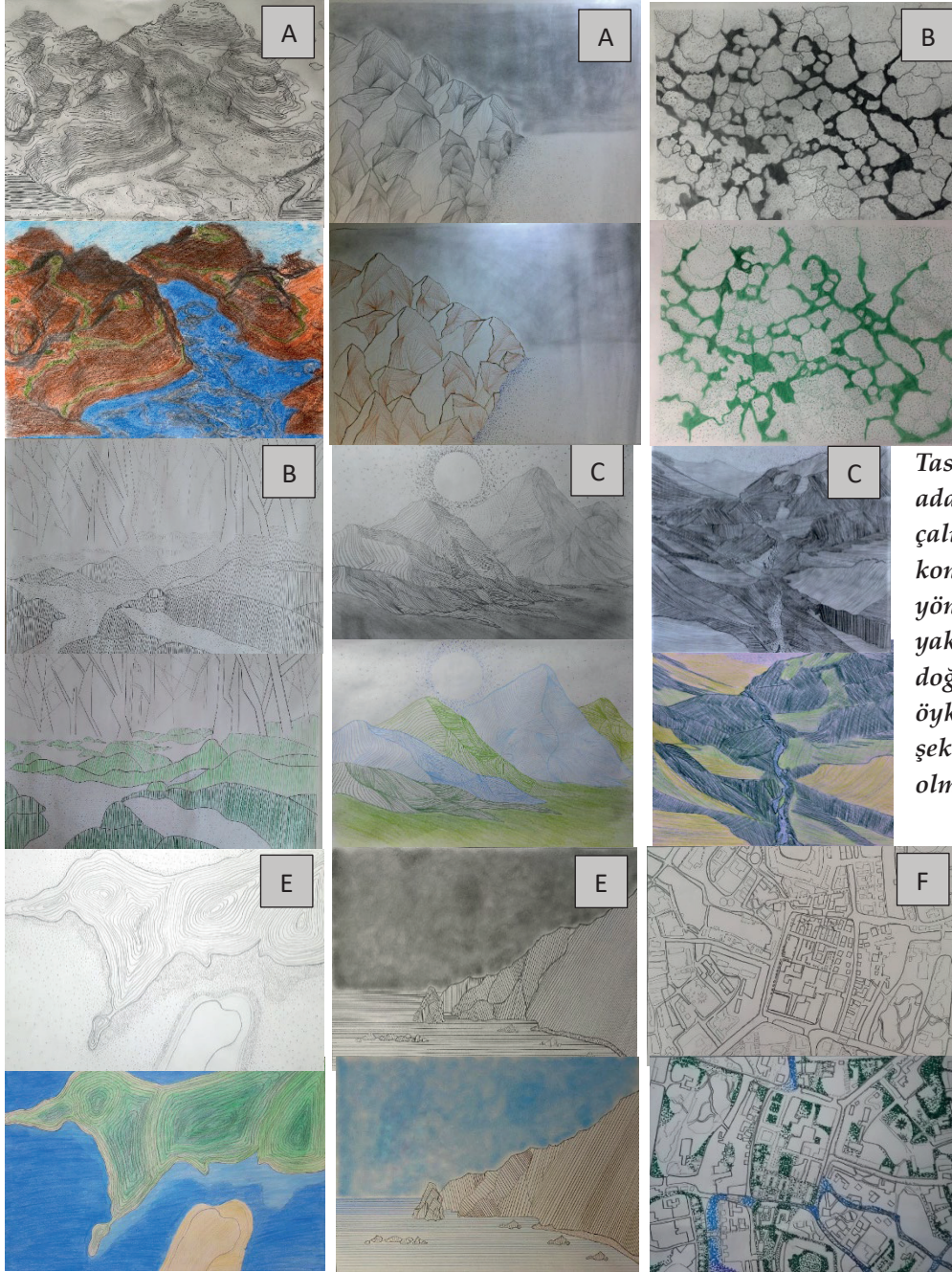
7. TARTIŞMA ve ÖNERİLER

Sanat, tasarım, planlama ve mimarlık eğitiminin tasarım sürecine giriş dersi olarak nitelendirilen “Temel Tasarım” dersi tasarımcının ömür boyu sürdüreceği tasarlama eyleminin ilk adımıdır. Soyut ve kavramsal düşünmenin öğretilmesinde yardımcı olan temel tasarım eğitim sürecinde (Sarıoğlu 2016) estetik, fonksiyonel ve dayanıklı bir tasarım için tasarımcının ilke ve elemanlara hakim olması gerekmektedir. Temel tasarım dersinde verilmekte olan temel tasarım ilke ve öğeleri tasarımcının iyi bir tasarlama sürecinde kullanması gereken önemli enstürmanlarıdır. Bu

enstürmanların doğru bir şekilde kullanıldığında tasarımcının hayal gücünü kağıda dökmesinde oldukça önemli roller üstlenmektedirler. Eserin somut unsurları olan renk, çizgi, biçim, doku, değer, ışık-gölge gibi varlık alanları tasarımcının sezgisel yaklaşımları ile birleştiğinde etkili bir tasarım ortaya çıkarması (Altıntaş, 2007:10)

çalışmanın tasarım süreci ile de örtüşmektedir. Bu bağlamda Bauhaus okulunun önemli hocalarından biri olan Itten, "... öğrencilerine doğadan yapılan çalışmaların yanında eski ustaların yapıtlarını, kompozisyon, doku ve strüktüel açıdan inceleyerek, yardımcısı Gretrude Grurov ile sezgilere dayalı bir öğretim yaptırmıştır" (Feie-

Şekil 1. Tasarımcı adaylarının çalışma konularına yönelik tinsel yaklaşımları



Tasarımcı adaylarının çalışma konularına yönelik tinsel yaklaşımları doğaya öykünme şeklinde olmuştur.

rabend ve Fiedler, 2000: 242'den). Çalışmada ele alınan tinsel yaklaşımlarda da görsel algı içeren düşünme eylemi (Arnheim, 1969'a) ile sezgiye dayalı bir tasarım gücü ve temel tasarımın ilke ve elemanlarının doğru bir şekilde bir araya gelmesi ile başarılı tasarımların ortaya çıktığı görülmüştür.

8. SONUÇ

Tinsel yaklaşımlar kullanılarak tasarım stratejilerindeki çeşitliliğin arttırmasını hedefleyen bu yaklaşım modeli kentsel planlamalarda kapsamlı bir şekilde ele alınarak teknolojiye ve somut yaklaşımlardan yararlanılmasına da olanak sağlayacaktır. Bu çalışmada tasarımcıların tinsel yaklaşımları kentlerin planlama stratejilerinde kullanılabilir bir model olarak ele alınmıştır. Tasarımcıların tinsel yaklaşımlarından yararlanılarak hazırlanan planlama stratejileri farklıdır. Bu durum da kentsel oplanmanın bir parçası olan ekolojik sistem servislerinin kontrollü kullanımına izin vermektedir. Çalışmada ele alınan bu yaklaşım şekli planlama ve tasarım gündemini uzun süre meşgul ederek yeni paradigmalardan oluşmasına fırsat sunacak olup alan kullanım planlamalarına entegre edilebilecektir. Diyebilirizki kentlerin bugünkü doğadan kopuk karmaşık durumu planlamadan tasarıma geçişte yaşanan bu karmaşıklıktan kaynaklanmaktadır. Aslında estetik ve işlevsel bir kent planı en küçük tasarım ölçeğinde düşünülerek planlamaya yansıtılan bir süreçten oluşmaktadır.

Teşekkürler

Çalışmada yer verilen tinsel yaklaşımlara yönelik kullanılan örnekler Recep Tayyip Erdoğan Üniversitesi, Mühendislik ve Mimarlık Fakültesi, Peyzaj Mimarlığı Bölümünde 2020-2021 Bahar yarıyılında yürütülen Temele Tasar dersinde üretilmiştir.

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ARAŞTIRMA MAKALESİ/RESEARCH ARTICLE

A Quest for why gemstones are used for healing

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Abstract

It is believed that healing power of gemstones increases to the sense of well-being. But it's unclear how it works. The aim of this study is to investigate the usage of the stones for therapeutic purposes by means of a survey. In this study, a face-to-face survey technique was employed to investigate personal reasons to use the gemstones for healing purposes. After 402 volunteers from various backgrounds were selected and asked them to answer 17 questions, the dataset was analyzed using IBM Statistical Package for the Social Sciences (SPSS). Results showed that women are most interested in gemstones, because they are used for jewellery. The most popular healing stones were Agate, Amethyst, Ruby, Amber and Quartz. Their eye-catching colours together with their healing power that are promoted in social media, strengthen the perception that natural stones can be used for healing or therapy. Healing stones also give spiritual serenity, which is the most important positive effect on people. Some reasons that push people to seek healing from natural stones included hoping of cure, seeking alternative medicine, knowing what specific stones are used as healing tools, searching ways to relieve stress and also protecting against evil spirits. It is stated that people's hope of cure strengthens the use of these stones as a healing tool.

Keywords: Gemstones, healing stones, face-to-face survey, participant

Citation/Atıf: KUTLU, Y. A., ÇALIK, A. & ULUGGERLİ, E. U. (2022). A Quest for why gemstones are used for healing. *Journal of Awareness*. 7(2): 65-72, DOI: 10.26809/joa.7.2.02

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1. INTRODUCTION

In the twentieth century, technology has reshaped our lives and individuals are paying more attention to their health than they ever have before. The situation was captured by Pilzer when he stated that “The next big thing is the wellness revolution” (Pilzer, 2007). Wellness can be defined as active monitoring of activities, choices and lifestyles that lead to a holistic state of health (GWI-1, 01.10.2021). However, wellness cannot be explained only by physical health. According to the World Health Organization, health is defined as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (WHO, 01.10.2021). Therefore, the concept of wellness can also be explained as a sustainable physical, mental and social balance. In 2018, the global market share of the Wellness Sector, which is defined as healthy living, reached approximately \$4.5 trillion (GWI-2, 01.10.2021). In recent years, a new market based on natural stones has also been included in this commercial network. The global natural stones market is expected to reach \$443 billion in 2022 (GGJM, 01.10.2021). Since ancient times, natural stones, or healing tools, complement medical treatment, and have been used as an indicator of social status, which are shaped by purchasing power (Micke et al. 2010; Hatipoğlu et al. 2018; Calik et al. 2019). Also, these stones have been an important part of alternative medicine with different therapy applications for centuries (Ishaque et al. 2009; Seraj et al. 2011; Friedman, 2012; Atodaria et al. 2017; Arif and Hashim, 2021). In addition to being ornamental, gemstones are also used in different industries and in the production of high-tech products (Renfro et al. 2010). In recent years, due to the increase in purchasing power and demand, healing stones are also produced artificially and sold in the market at a much lower price than natural ones. However, this commercial area is supported by non-scientific studies and opportunistic people without scientific education. The healing stones market should be limited to benefiting the public so that people who are helplessly fighting diseases are not exploited materially and spiritually. However, the lack of scientific knowledge in this

field weakens the hand of competent people who are in the position of informing and warning the relevant authorities.

In its broad sense alternative medicine refers to “integrative,” or “complementary” medicine. But it also describes medical treatments that are used in the place of traditional (mainstream) therapies. One of the common alternative medicines is Therapeutic Touch, where, either a therapist who has healing power or a gem which is worn and touched to skin transmit their healing energy to person and repair anomalies in a person’s energy field and heals the person. It is believed that ‘healing touch’ increases the sense of well-being. But it’s unclear how it works.

The aim of this study was to investigate the usage of the natural stones for therapeutic purposes by means of a survey. We focused on especially how they were used by people and what their expectation was. This article examines the usage of gems as alternative medical treatments by means of a survey.

2. MATERIALS AND METHODS

2.1. Theoretical Framework

The term “natural stones” represents both semi-precious gems and rocks. The natural stones are the indicators of social status due to their appearance and rarity (Hatipoğlu et al. 2018; Calik et al. 2019). These stones have also been an important part of alternative medicine and used in the different therapy applications for centuries (Ishaque et al. 2009; Seraj et al. 2011; Friedman, 2012; Atodaria et al. 2017; Arif and Hashim, 2021). The stones have been widely employed to heal physical and emotional pain (Friedman, 2012; Atodaria et al. 2017; Arif and Hashim, 2021). Also, the natural stone users around the world believe that there are positive effects on health (Ishaque et al. 2009; Seraj et al. 2011). This survey supports our hypothesis, contrary to previous publications, which have merely stated authors’ opinions without any support.

2.2. Methods

All over the world, the current usage of the natural stones is almost as same as it was in the past.

This similarity can also be observed in cultural diversity. Therefore, the questionnaire method is an appropriate approach for investigating which the natural stones are used, how and why they are preferred for healing purposes. Also, our approach does not require the approval of any institution.

Using a questionnaire is one of the primary tools for gathering information in the social research area and is usually conducted to determine public trends. They can be used to compile various types of information.

Some of the survey types are face-to-face interviews, monitored surveys, mail surveys, telephone surveys, and internet surveys (Chadwick et al. 1984; Alreck and Settle, 2004; Neuman, 2005). The reliability and effectiveness of the findings in any study are closely related to the quality of the data. For this reason, before starting a survey study, the type of survey, statement types, sample size and reliability limits should be determined. In addition, during the data collection process, the scale should be designed to eliminate possible communication, perception and interpretation problems, and to prevent the forced participant (Cochran and Cox, 1992; Biemer et al. 2004). A sufficient number of trial surveys should be conducted in advance to assess whether there are any problematic factors between the interviewers and the subjects conducting the survey. The number of participants in trial surveys depends on the purpose and sensitivity of the researcher (Salant and Dillman, 1994; Fink, 2017). Coverage, sampling, measurement and response errors that may be encountered before, during and after the study should be minimized. Selecting the data collection method according to the purpose, being systematic and classifying it properly allows appropriate analysis of the findings (Kirk and Miller, 1986; Presser et al. 2004).

In this study, the face-to-face survey was selected, taking into account the features that are summarized above.

2.3. Field Works

Çanakale Onsekiz Mart University Earth Sciences and Natural History Museum

(ÇESM) was established in 2011 and has been receiving visitors regularly in the last decade. As a university museum, it is mostly visited by academic staff. In this survey, participants were selected among them.

N is the number of people in the target population, for a homogeneous group, p is the probability of occurrence of the event (0.8), q is the probability of non-occurrence of the event (0.2), t is a constant (1.96 for significance level $\alpha=0.05$), and d is the sampling error (0.05). For this study, the minimum number of subjects to be reached within the 95% confidence limits was calculated approximately according to these criteria (Cochran and Cox, 1992; Biemer et al. 2004). The minimum number of subjects within these reliability limits was calculated as approximately $n=234$. In this survey study, the 402 participants among the academic visitors and others were invited to the interview.

The scale was designed as a result of a large number of pretrial surveys. While preparing the scale, expert opinions from different branches were used. The scale consisted of 17 statements in total. Each section contained questions based on similar statements. And each expression is shown in the tables with the abbreviation "S" and sequence number.

The questionnaire included eight parts. The first part contained demographic statements (gender / age / education level / income rate / place you live the longest). The second part evaluated the level of interest in natural stones (do you think that some ornamental stones can heal / have you met people that wear natural stones to heal / are the healing methods that use stones harmful / how often do you wear natural stones or keep them in your living spaces). The third part assessed the healing power of natural stones (how effective are their therapeutic powers when treating issues / how effective do the colours of them reinforce the idea that the stones may be healing / how effective do well-presented stones bring about therapeutic purposes). The fourth part consisted of a multi-answers question about the most popular 90 auspicious or healing stones. The fifth part was a multi-answer question including 15 possible positive effects of healing

stones on people. The sixth part was also a multi-answer question including 17 question options on the origins of healing from natural stones. The seventh part was an open-ended question that identified which ailments natural stones can be good for. Finally, the eighth part was also an open-ended question and investigated how natural stones are used.

Field data were evaluated with the IBM Statistical Package for the Social Sciences (SPSS) program (Bryman, 2008). In data analysis with SPSS, standard deviation (std), mean, frequency and percent were used for each scale. The averages of the scales ranging from one-to-five were evaluated by considering the five-point Likert scale intervals recommended by (Pimentel, 2019). In binary scales such as Y/N, between 1.0-1.50 can be evaluated as "Yes" and between 1.51-2.0 as "Not".

3. RESULTS

This study was conducted in 2019 with 402 voluntary participants, 63.2% of whom were women and spent most of their life in the city. The participants age range was between 31-70, most were university graduated and their monthly income was around \$1000-\$2000. Results showed that 91.8% of the participants believed that some natural stones have a healing effect, 82.8% of them knew people who had been healed by these stones, and 95.5% of them assumed that expecting healing from natural stones is harmless. In addition, the participants stated that they have sometimes

various natural stones in their living spaces, i.e., office, home, etc. (Table 1).

It is also showed that natural stones are highly preferred for treatment purposes because of their eye-catching colours and also their promotion as a healing tool (Table 2).

Table 2. The power of healing stones.

	Frequency	Percent	Mean	Std.
S5. How effective are their therapeutic powers when treating issues?				
Very Low	6	1.5		
Low	28	7.0		
Medium	116	28.9		
High	184	45.8	3.70	0.88
Very High	68	16.9		
Total	402	100.0		
S6. How effective do the colors of them reinforce the idea that the stones may be healing?				
Very Low	22	6.2		
Low	60	16.7		
Medium	107	26.6		
High	158	37.3	3.41	1.09
Very High	55	13.2		
Total	402	100.0		
S7. How effective do well-presented stones bring about therapeutic purposes?				
Very Low	15	3.7		
Low	27	6.7		
Medium	125	31.1		
High	177	44.0	3.59	0.94
Very High	58	14.4		
Total	402	100.0		

Table 1. Interest level about healing stones

	Frequency	Percent	Mean	Std.
S1. Do you think that some ornamental stones can heal?				
Yes	369	91.8	1.08	0.28
Not	33	8.2		
Total	402	100.0		
S2. Have you met people that wear natural stones to heal?				
Yes	333	82.8	1.17	0.38
Not	69	17.2		
Total	402	100.0		
S3. Are the healing methods that use stones harmful?				
Yes	18	4.5		
Not	384	95.5	1.96	0.21
Total	402	100.0		
S4. How often do you wear natural stones or keep them in your living spaces?				
Never	64	15.9		
Rarely	100	24.9		
Sometimes	141	35.1	2.72	1.10
Most of the time	77	19.2		
Always	20	5.0		
Total	402	100.0		

According to the participants, the most popular natural stone among the ninety natural stones known as the "Auspicious Stone" or "Healing Stone" is Agate. Besides the natural stone, Amethyst is also very popular in the eyes of the participants. The gemstones followed and included: Ruby, Amber, Quartz, Moonstone, Turquoise, Emerald, Tiger Eye and Jade from highest to the lowest popularity. After that the list included: Coral, Oltu Stone, Sapphire, Pearl, Sedef Stone, Aquamarine and Opal all of which had lower rates of popularity. The others with less than 2% preference are not included in the Table 3.

Table 3. Auspicious or healing stones

S8. As far as you know or hear from your neighborhood, which of the following stones are popularly known as Auspicious Stones or Healing Stones?

	Frequency	Percent
Agate	245	8.4
Amethyst	232	8.0
Ruby	208	7.1
Amber	197	6.8
Quartz	174	6.0
Moonstone	136	4.7
Turquoise	129	4.4
Emerald	114	3.9
Tiger Eye	105	3.6
Jade	102	3.5
Coral	91	3.1
Oltu Stone	77	2.6
Sapphire	73	2.5
Pearl	69	2.4
Sedef Stone	68	2.3
Aquamarine	62	2.1
Opal	58	2.0
Others (<2%)	775	26.6
Total	2915	100.0

Table 4. Positive effects of Auspicious or Healing stones.

S9. As far as you know or hear from your neighborhood, which of the following can be positive effects of Auspicious or Healing stones on people?

	Frequency	Percent
Spiritual serenity	275	12.6
Protection against evil eye	234	10.7
Serenity	226	10.3
Health	199	9.1
Instant relaxation	174	8.0
Luck	149	6.8
Happiness	145	6.6
Optimism	143	6.5
Energy	126	5.8
Abundance	121	5.5
Self-confidence	111	5.1
Joy of life	96	4.4
Protection against evil spirits	85	3.9
Courage	78	3.6
Others	24	1.1
Total	2186	100.0

The most important positive effect of natural stones is their ability to elicit spiritual serenity. Other positive effects include protection against evil eye, serenity, health, instant relaxation, luck, happiness, optimism, energy, abundance, self-confidence, joy of life, protection against evil spirits and courage. The rest with less than 2% preference are excluded from the Table 4.

People also seek healing from natural stones for several reasons, but mostly for alternative medicine, hope of cure and providing healing. Other reasons people look to healing stones are because they are advised to them by close friends, they are in despair, they are influenced by the media, they are curious, they have special interests, they seek an easy solution, or they have a distrust of medicine, they have all belief systems, they are used to them to emulate others and they are impressed by the eye-catching colours of them. The reasons with less than 2% preference are not listed in the Table 5.

In this study, results also suggested that natural stones are known as healing tools and are mainly used for relieving stress, relieving negative energy and giving positive energy, relieving depression, helping anxiety, overcoming sleep disturbance and relieving pain. In addition, the stones are used for protecting against evil spirits, regulating the circulatory system, reducing fevers and alleviating teething pain for babies, relieving thyroid gland disorders, relieving

Table 5. Reasons for seeking healing from natural stones.

S10. Which of the following may be the reasons why people seek healing from stones?

	Frequency	Percent
Interest in alternative medicine	272	12.3
Hope of cure	270	12.2
Provide healing	219	9.9
Advice	215	9.7
Close friend's effects	183	8.3
Despair	178	8.1
Media influence	127	5.8
Wonder	118	5.4
Special interest	109	4.9
A distrust of medicine	109	4.9
Search for an easy solution	105	4.8
Religious beliefs	97	4.4
Wannabe	58	2.6
Eye-catching colours	44	2.0
Others (<2%)	103	4.7
Total	2207	100.0

respiratory system ailments, strengthening the immune system, providing radiation shielding and bringing luck, abundance and prosperity. Once again, the answers with less than 2% rate are not presented in the Table 6.

Finally, our questionnaire revealed that natural stones are often used as jewellery or personal accessories, carried on the body, in contact with skin and kept in living spaces.

4. DISCUSSION

Natural stones are an indicator of social status due to their colours, appearance and rarity (Harrell, 2012; Calik et al. 2019). In this study, one of the outcomes is that natural stones are mostly used for jewellery or personal accessories that are in contact with skin, or they are kept in living spaces. These stones are also used in alternative medicine for therapy purposes (Simmons, 2010). For example, significant effects of natural stone colours on feelings were observed whereby a majority of participants felt that precious and semi-precious stones get their “power” from their colours. Therefore, natural stones have been widely used for healing physical and emotional pain (Atodaria et al. 2017; Arif and Hashim, 2021). The current study also suggests that the stones are preferred for treatment at a high rate not only if they have eye-catching colours but also if they are presented as having healing abilities. However, the fact that natural stones are used for jewellery due to their eye-catching colours may explain the majority of the answers. All of the participants, mostly women, are interested in natural stones that are known

to have healing abilities. In addition, 91.8% of these participants thought that natural stones can be used as healing tools. Other studies have also shown that more females versus males tend to perceive the natural stones can help support a good life and sound health (Gayle, 2008; Saikia et al. 2016; Manandhar et al. 2018). According to the participants in the current study, the most popular natural stone, known as an “Auspicious Stone” or “Healing Stone”, is a Quartz derivative (Agate, Amethyst etc.). However, Amber is as popular as these natural stones among the participants. The findings presented here are supported by observations found in the world natural stone industry (Chase and Pawlik, 2002; Walter, 2009; Gienger, 2009). People who are interested in natural stones are aware of their uses and various effects. Similar to the current study, natural stone users around the world believe that there are positive effects on health (Ishaque et al. 2009; Seraj et al. 2011). For example, many users conduct non-religious spiritual practices, use gemstones or perform chakra rituals that contribute to both calming and healing (Friedman, 2012). In addition, as mentioned above, many worldwide users believe gemstones derive their influence from their colours, and therefore, they are widely used for healing physical and emotional pain (Micke et al. 2010; Leslie, 2016; Atodaria et al. 2017).

5. LIMITATIONS

Being a university museum, ÇESM is mostly visited by academic staff and students. The participants were mainly the visitors who were

Table 6. Healing stone benefits.

S11. What are healing stones good for?	Frequency	Percent
Relieves stress	166	18.3
Relieves negative energy and gives positive energy	97	10.7
Relieves depression, anxiety and sleep disturbance	89	9.8
Relieves pain	84	9.3
Protects against evil spirits and evil eye	62	6.8
Regulates the circulatory system	54	6.0
Reduces fever in babies and provides comfortable teething	50	5.5
Relieves thyroid gland disorders	49	5.4
Relieves respiratory system ailments	36	4.0
Strengthens the immune system	34	3.8
Provides radiation shielding	33	3.6
Brings luck, abundance and prosperity	20	2.2
Others (<2%)	132	14.6
Total	906	100.0

invited to fill-in this survey. The attendants to this study may not include all sociocultural communities interested in healing stones. In spite of this limitation, it is stated that the findings are in line with previous studies and healing stones have been used similar way from past to present all over the world.

6. CONCLUSIONS

The use of natural stones for jewellery and accessories is common. For this reason, women are most interested in natural stones. The idea that the natural stones can heal many sicknesses is strengthened by people's hope of cure, their eye-catching colours and their promotion as a healing tool. The most popular natural stones are Quartz, Agate, Amethyst and Amber. The most important positive effect of them is that they give spiritual serenity. The wellness-based interest in the stones originates from alternative medicine and hope of cure, whereby people hope to heal, relieve stress and protect against evil spirits.

Despite the positive benefits that natural stones may offer, it is very strongly suggested that the word "Healing", which is preferred in the promotion of gemstones, should not be used in marketing exercises, since it may interrupt conventional medical treatment processes.

7. ACKNOWLEDGEMENTS

We thank Sheila CHRISTOPHER for the language editing.

8. FUNDING

The study was supported by the SRP project (ÇOMÜ BAP FBA-2019-2783).

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Mental health issues among geriatric offenders (Azerbaijan case)

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Abstract

This study constructed a measured quality of life elderly inmate in the Azerbaijan penitentiary system. Incarcerated people often face financial, social and emotional costs due to the imprisonment, and this issue influence their mental health, also interpersonal relationships.

Aim: The aim of this research was to examine health issues, the quality of life of older prisoners, and the stimulus that influence their daily mood, especially interpersonal relationship domains. For this purpose, various literature sources were analyzed to answer the main research questions.

Method: 54 inmates from 2 different regimes were involved in the research. In order to obtain data questionnaires about quality of life (QOL), and depression were used. WHOQOL –BREF, and consists of 26 questions related to 4 domains: physical health, psychological, social relationships, and environment. Patient Health Depression Questionnaire (PHQ-9) was used to determine depression level of inmates

Conclusion: As a result, it was determined that there was a relationship between interpersonal support and QOL features. Another hand, a negative correlation between interpersonal support factors and depression scores. The base on analyzing literature and collecting data, some items were identified as future recommendations.

Keywords: geriatric offenders, elderly prisoners, quality of life features, interpersonal relationship and quality of life, depression factor and quality of life.

Citation/Atf: ALİASKER ALİYEVA, G. (2022).Mental health issues among geriatric offenders (Azerbaijan case). *Journal of Awareness*. 7(2): 73-85, DOI: 10.26809/joa.7.2.03

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1. INTRODUCTION

United Nations recognizes that the growth in the number of elderly inmates is expected to continue in the upcoming years, and it is essential that government should develop policies and strategies to address the needs of this vulnerable group, and particularly in those countries where the increase in the number of older prisoners is sizable (United Nations, 2009). When discussing aging paradigm, the most important change was the recognition of different aspects in the aging process, such as individual differences, and flexibility. Some of them have severe problems in mid-life, while others participate in different social activity.

The purpose of this article is to review QOL (quality of life), and psychosocial factors that observed older offenders. QOL (quality of life) factors related to physical health, psychological, social relationship, and environmental domains; as psychosocial factors depression, isolation, and social support were addressed in this article.

The literature review and explanatory part of the research try to answer following questions:

- What is optimal aging?
- What factors influence aging process?
- How are Quality of life domains in geriatric offenders observed?
- Social support and QOL factors, how can the association between 2 variables be described?

2. METHODS

2.1. Participants

All of them had Azeri nationality, and participants' mean age was 60,9 ±4,2 (range 55-78). 16 of them had been incarcerated life sentence (29,6% of participants), and mean duration imprisonment was 9,7±3,7 years in 38 of them (70,4% of participants). Inmates who arrested before their 55 years and grow old in prisons are 33 (61,1%) of the participants, and who convicted crime after their 55 years are 21 (38,8%). Further details on respondents' characteristics are presented in table.

2.2. Instruments: The survey is divided by 8 following components related to the prison life and relationships:

- 1) The environmental factors in prisons,

Table 1. Socio-demographic factors of inmates

Socio demographic factors		
Age	55-78 (60,9±4,2)	
Nationality (Azeri)	54	100%
Religiousness (Islam)	54	100%
Partner/married		100%
Married	43	79,6%
Divorced	9	16,7%
single	2	3,7%
Criminological factors		
Previous incarceration	28	51,9%
First incarceration	26	48,1%
Offence against person	30	55,6%
Crimes Against property	5	9,2%
Drug related crimes	16	29,6%
Sexual offence	3	5,6%
Institutional factors		
Sentence 1	18	33,3%
Sentence 15	18	33,3%
Qobustan prison	18	33,3%
Life-sentence imprisonment	16	29,6%
	38 (9,7±3,7)	70,4%
Clinical factors		
Previous illness	51	94,4%
No previous illness	3	5,6%

- 2) Health conditions
 - 3) Level of interpersonal relationships with prison staff and other inmates
 - 4) Level of support and communication with family members,
 - 5) The type visits (short and long visits),
 - 6) Daily mood,
 - 7) Depression level,
 - 8) Hope for future as long term perspective plans
- Long-lasting and with moderate and high level of depression may become a serious health condition. It can be reason of person's suffering greatly and poor function at work, at school and in the family. At its worst, depression can be one of the main causes to suicide (WHO, 2018). Considering that it is short and easy for respondents, and can be applied in multiple patient populations, so Patient Health Depression Questionnaire (PHQ-9) was used to determine depression level of inmates.

QOL measurement scale that used in the research was Likert scale, made based on WHO-QOL –BREF, and consists of 26 questions related to 4 domains: physical health, psychological, social relationships, and environment.

2.3. Procedure and design

Survey and measurement scales were developed in Azerbaijan correctional facilities, with elderly inmates in 2018-2019 years. Before the survey each of the inmates had been informed about the main target of research and asked their permission to use these results, and publish. Considering the ethical guidelines the survey and measurement scales were realized.

3. RESULTS AND DISCUSSION

What is optimal aging?

Rowe and Kahn (1997) appropriately described healthy aging as absence of any illness and good physical function, unaffected cognition process, and active involvement and participating in life events and activities (Rowe and Kahn, 1997)

On another hand, Lawton (1999) argued these definitions and didn't accept how previous authors explained changes in older ages (Lawton et.al.1999). The authors mentioned that good

physical health is related to activities of daily living (ADLs) and cognitive abilities, Vaillant (2003) used a similar definition, highlighted these factors of successful aging. Using data from the *Nun Study*, Snowdon (2001) noted that successful, optimal agers were observed by positive psychological features, despite sometimes suffering any illness. These psychological features included happiness, intellectual curiosity, deep spirituality, and communication skills (Snowdon et.al.2001).

Levenson and co-authors (2005) found correlations with emotional stability and spirituality, and associated with better health in later life stages (Levenson et.al, 2005).

Baltes (1996) suggested that the term "optimal aging" may be more appropriate than "successful aging", because of a definition of the second term focuses on one model only, and may be too limited. However explaining optimal aging, authors focused on different facets of the life, depending on main goal and targets (Brandstadter & Rothermund, 2003).

Answering the first question, image of optimal aging can be explained by individual differences and flexibility in the aging process.

What factors influence aging process?

The authors mentioned wisdom that increases with age, as a gain of aging (Spiro,2001; Aldwin, 2006; Mokdad, 2004).

Spiro (2001) explained life span perspective on health by axioms:

- Health is a lifelong process;
- Health is characterized by multidimensionality;
- Study of health is inherently multidisciplinary;
- There are always gains and losses in development (Aldwin, 2006).

Mokdad and colleagues (2004) estimate the importance of factors that influence aging such: smoking, poor diet, and limited physical activity (Aldwin, 2006). 3 broad types of factors affecting the rate of aging are:

- Personality;
- Religiousness/ spirituality;

- Stress and coping process.

When the authors estimate personality factors, they explain relationship between hostility and higher rate of both cardiovascular morbidity and mortality than less hostile individuals. Wilson and colleagues (2004) mentioned that neuroticism predict mortality of hostility and have an important role in later life. In other resources Freidman (2000) suggest anxiety and neurotic behaviors may be observed under conditions of environmental stress. Anxiety is related to heart disease and death sudden cardiac attack (Kawachi et al, 1994). Gorman and Sloan (2000) reviewed evidence that person with high anxiety have poorer heart rate regulation, and this fact due to overreaction to stressors (Gorman et.al.2000) .

Another factor that influences aging process is depression fact. These symptoms in late life tend to be very unsteady (Blazer et al., 2001). Authors mentioned that as patients recover from depression; it influence their mortality risks effectively (Lesperance et al., 2002).

Older adults are more vulnerable than other population members in stressful events (Aldwin and Gilmer,2004). Their immune systems' issues are the main factors, especially who are also depressed, are more vulnerable to stress. The authors explained effective copiers who more likely to be coping with physical, psychological and other problems(Aldwin and Gilmer,2004).

Spirituality and religiousness is related and have strong influence on social institutions and the personal lives (Koenig, 2000). Different researchers improved the argument that level of religiousness in older people is typically higher than in younger's (Pargament, 1997). In recent years, researchers have determined links between religiousness and lower rates of some health problems such cancer, cardiovascular disease, alcohol and drug using, also mental illness, meanwhile higher health related to high level of QOL (quality of life), and higher levels of healthy life style (George et al.,2002).

Miller and Thoresen (2003) state that there is association religious attendance with lower rates of different disease, such alcoholism, cardio-

vascular disease, hypertension, and others. The study that was realized open-heart surgery patient found that, strength and comfort from religious belief was related to a decreased risk of dying, and it influence their daily mood (Oxman, Freeman &Manheimer, 1995). Although some studies found association between religious belief and recovery, but a number of other studies mentioned null findings, and any correlations between these variables (Powell et al., 2003).

The authors found that work issues and family problems as divorce may influence personality stability negatively and can be reasons of some issues (Clausen and Jones, 1998). This fact was proved in Martin and Mroczek (2005) research, too.

How are Quality of life domains in geriatric offenders observed?

The policy papers and studies identify three main categories of older prisoners:

- The first group consists of those who were sentenced to long prison terms while they were young and got older in the prison conditions. However, those prisoners experience difficulties in social reintegration after release, the reason of the problem related to the long period of institutionalization, loss of family and relatives' links and limited work practice.
- The second group members are habitual offenders, who have been in and out of correctional facilities.
- The third group consists of those who have been convicted of a crime in later life. Their crimes are usually serious. (U.N. Handbook on prisoners special needs, 2009).

All these groups' members have different needs and their physical and mental problems can be different. In prison condition different factors influence their mental health: accommodation, health care, family links, prisoner programs, and others.

To answer *the third research question* not only literature analyzing and survey was realized, because of the main aim of the research is to determine older offenders' quality of life domains.

Quality of life assessment tool consists of 26 items, and 4 domains. The assessment tool was made based on WHO QOL assessment survey model.

In first group - "Physical health", the data on inmates' health problems, and their approach about the pain and discomfort, sleep and rest, work capacity features were collected. Descriptive analysis of the results show that, inmates in those prisons aren't satisfy their health, sleep, capacity of work, daily activity, and they mentioned their need to medical treatment.

Second group- "Psychological features". This group contains inmates' answer about themselves, their image and appearance, self-esteem, personal beliefs and their subjective assessment of cognitive skills and abilities.

Third group includes data on social relationship domain (Personal relationships, Social support and Sexual activity).

Forth group - Environment factors covered person's attitudes about prison accommodations (pollution / noise / traffic / climate), human rights, physical safety and security, opportunities for acquiring new information, also leisure activity resources.

To answer the last questions third group factors were analyzed in detail. The choices of the the offenders participated in the research were negative, and more than 18 percent were changeable; so nearly 72% of them were dissatisfied, only approximately 9% were satisfied with their personal relationship. None of them have positive attitude towards their sexual life, 98% were dissatisfied, 2% didn't confirmed any opinion. We can see the similar results from question about friends' support, more than half of respondents were dissatisfied with friendship relationships, when minority confirmed satisfaction with friends' support, 66% and 6% respectively.

Table 2. Social relationship domain features

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
How satisfied are you with your personal relationships?	13 (24,1%)	26 (48,1%)	10 (18,5%)	5 (9,3%)	
How satisfied are you with your sex life?	37 (68,5%)	16 (29,6%)	1 (1,9%)		
How satisfied are you with the support you get from your friends?	10 (18,5%)	26 (48,1%)	10 (18,5%)	8 (14,8%)	

Association between the first question (how would you rate your quality of life) and the social relationship group questions was demonstrated in the table 3.

The figures demonstrate that offenders who were dissatisfied their personal relationship, their attitude to their quality of life was assessed as "very poor" and "poor". Minority consisting of 5 people confirmed satisfaction with their personal relationship, meanwhile they estimated their quality of life "neither poor nor good", and "good". The answer "very satisfied" was not confirmed by anyone. As nobody estimated the high level quality of life.

When asking question about their sex life, dissatisfying with that sphere was revealed. So those people sex life influence their quality of life fig-

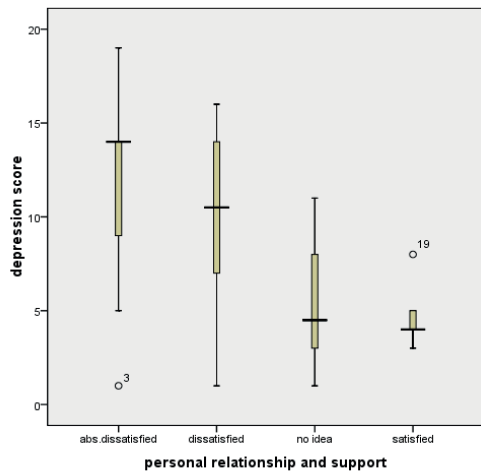
ures, respectively none of them was satisfied and estimate their quality of life good and very good level. The next question in this group survey was about friends' support. Older prisoners who didn't have positive thought about their friends' help, their quality life features were "very poor" and "poor level", too. These figures let me say personal relationship, family and relatives support can influence quality of life level. The more family support and relationship can lead the high quality of life features.

During the previous research depression level of older prisoners was tested by Patient Health Depression Questionnaire (PHQ-9), so it was used to determine depression level of inmates. Inmates who were absolutely dissatisfied their personal relationship, their depression score was $11,85 \pm 5,3$; who were dissatisfied their depression

Table 3. Quality of life and social relationship features.

		How would you rate your quality of life				
		Very poor	Poor	Neither poor nor good	Good	Very good
How satisfied are you with your personal relationships?	Very dissatisfied	-	10	3	-	
	dissatisfied	1	16	9	-	
	Neither satisfied nor dissatisfied	-	1	7	2	
	Satisfied	-	-	2	3	
	Very satisfied	-	-	-	-	
How satisfied are you with your sex life?	Very dissatisfied	1	26	10	-	
	dissatisfied	-	1	10	5	
	Neither satisfied nor dissatisfied	-	-	1	-	
	Satisfied					
	Very satisfied					
How satisfied are you with the support you get from your friends?	Very dissatisfied	-	9	1	-	
	dissatisfied	-	16	10	-	
	Neither satisfied nor dissatisfied	1	1	5	3	
	Satisfied	-	1	5	2	
	Very satisfied					

score $10,27 \pm 4,1$; elders who were unsure their result changed between $5,2 \pm 3,1$; and the last group who were satisfied, their depression score was lower than others, $4,8 \pm 1,92$.



Picture 1. Depression vs. relationships factor.

The correlation between two factors- depression score and personal relationship, support factor was estimated in next step of analyzing, and correlation coefficient was negative ($r = -0,515$, $p < 0,005$). This figure shows that family and relatives support influence depression score, the more positive interpersonal relationship and support, the less depression score can be observed. All items of social relationship group questions and depression score were described in the table.

Meanwhile people who were dissatisfied their personal relationship, their depression score were higher than others. Elderly inmates, whose

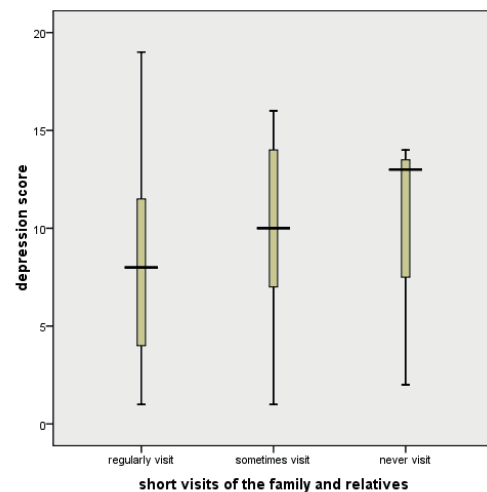
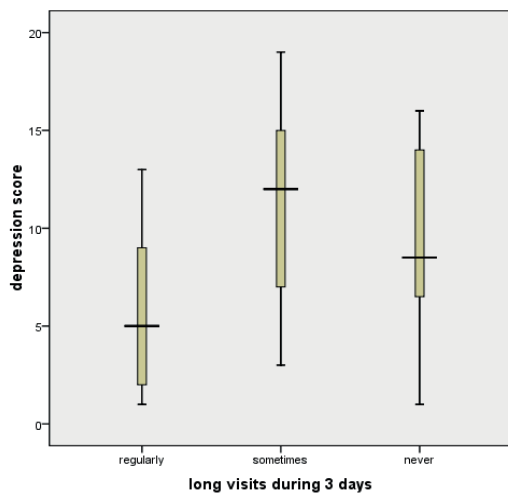
family members regularly visit their depression score is lower than others, whose relatives never visit, and meet with them.

3.CONCLUSION, LIMITS OF THE STUDY, AND RECOMMENDATIONS

Before discussing the findings, **limitations** of the study were mentioned: As in any research, limitations of this study must be noted. First, this research was conducted in Azerbaijan correctional facilities, so those findings cannot be reliable and valid to other groups or geographic areas. Second, only male inmates participated in the research, generalization to female inmates cannot be made. The last limitation was participants' numbers; limited number of them, only 54 elderly inmates from 3 facilities conducted to survey.

Based on the literature review and descriptive analyzing of survey results, the main findings and recommendations are the followings :

- Aging, successful aging have different definitions, absence of disease, good physical function, active social life are features of optimal aging;
- Various factors influence aging process; especially biological, environmental, social, psychological determinants;
- Older adults are vulnerable group who suffer from various stressors and depression, and authors related it with their immune systems (Aldwin and Gilmer,2004);



Picture 2. Depression level and family short and long visits.

Table 4. Social relationship items and depression score.

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
How satisfied are you with your personal relationships?	11,85±5,3	10,27±4,1	5,2±3,1	4,8±1,92	-
How satisfied are you with your sex life?	10,84±4,6	5,38±3,0			-
How satisfied are you with the support you get from your friends?	13,30±4,1	10,19±4,6	6,3±2,5	4,5±2,5	-

- Spirituality and religiousness have strong influence in this period. Level of religiousness is typically higher in older people than in younger's (Koenig, 2000, Pargament, 1997);

- Older offenders have various health problems, addictions and disease. So aging process begins in that group before than others (Aday,2003; Fabelo,1999; Fattah and Sacco, 1989; Fazel et al,2001; Grant,1999);

- Their quality of life domains consists of physical, psychological, social and environmental factors;

- Majority of older offenders who participated in research were dissatisfied their personal relationship. This attitude affected their daily mood, and quality of life;

- People who get more support by family members and relatives their depression score was lower than others, respectively 4,8±1,92 and 11,85±5,3;

- Considering limitation of research in the next step is needed to increase the number of study participants, and extending the list of features of quality of life domains.

Reflecting on the findings, decreased contact with a loved one, family members and relatives, lack of support might lead to depression, which could result social isolation, different mental health problems. This point encourages us to draw inferences to importance interpersonal relationships and its influence quality of life. Emotional costs of incarceration on relation-

ships continued even as men's prison sentences came to an end (International Review of the Red Cross,2016). So this study can be reason of concentrating on special program about elderly inmates mental health, and interpersonal relationships.

Acknowledgements

My deepest gratitude is for my advisor, Associate Professor, Elmina Kazimzadeh who has supported me not only as an instructor, and also a good friend throughout each stages of my PhD research.

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Appendix 1.

Quick Guide to the Patient Health Questionnaire - 9 (PHQ-9)

Description:	The items on the PHQ-9 follow the criteria for a Major Depressive Episode listed in the DSM-IV. Symptom severity is rated by indicating the frequency that depressive symptoms have been experienced during the last 2 weeks on a scale of 0 “ <i>Not at all</i> ” to 3 “ <i>Nearly every day</i> ”. An additional single item is rated to determine the impact of depressive symptoms on psycho, social, and occupational functioning.												
Purpose:	The PHQ-9 is used to screen for depression, aid in diagnosis, and monitor change in symptoms over time.												
Target Population:	Adolescents, adults, older adults												
Languages:	The PHQ-9 has been translated into over 30 languages and can be downloaded from the PHQ website: www.phqscreeners.com												
Scoring and Interpreting:	<p>The total score is computed by first producing a sum for each column (e.g. each item chosen in column “<i>More than half the days</i>” = 2), then summing the column totals. Total Scores range from 0 to 27, and indicate the following levels of depression severity:</p> <table style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: left;">Total Score</th> <th style="text-align: left;">Depression Severity</th> </tr> </thead> <tbody> <tr> <td>0-4</td> <td>None</td> </tr> <tr> <td>5-9</td> <td>Mild depression</td> </tr> <tr> <td>10-14</td> <td>Moderate depression</td> </tr> <tr> <td>15-19</td> <td>Moderately severe depression</td> </tr> <tr> <td>20-27</td> <td>Severe depression</td> </tr> </tbody> </table> <p>In addition to the patient’s Total Score, the responses to Question #9 (suicidality) and Question #10 (the impact of symptoms on the patient’s daily functioning) should be reviewed to determine appropriate treatment interventions.</p>	Total Score	Depression Severity	0-4	None	5-9	Mild depression	10-14	Moderate depression	15-19	Moderately severe depression	20-27	Severe depression
Total Score	Depression Severity												
0-4	None												
5-9	Mild depression												
10-14	Moderate depression												
15-19	Moderately severe depression												
20-27	Severe depression												
When to use:	As indicated to screen for depression												
Recommended Interventions:	Ask patient about preferences for addressing troubling symptoms. Offer behavioral strategies (for example, planning and engaging in more pleasurable, social, and mastery activities as well as exercise) and cognitive behavioral strategies (for example, taking a systematic approach to solving life problems). For patients with higher levels of severity and/ or with greater negative impact on ability to function, explore patient interest in combined treatment.												

PATIENT HEALTH QUESTIONNAIRE (PHQ-9)

NAME: _____ **DATE:** _____

Over the last 2 weeks, how often have you been bothered by any of the following problems?
(use "✓" to indicate your answer)

	Not at all	Several days	More than half the days	Nearly everyday
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, irritable, or hopeless	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite, weight loss, or overeating	0	1	2	3
6. Feeling bad about yourself - or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as school work, reading, or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead, or of hurting yourself in some way	0	1	2	3

add columns: + +

TOTAL:

<p>10. If you checked any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?</p>	<p>Not difficult at all _____</p> <p>Somewhat difficult _____</p> <p>Very difficult _____</p> <p>Extremely difficult _____</p>
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PHQ-9 is adapted from PRIME MD TODAY, developed by Drs Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke, and colleagues, with an educational grant from Pfizer Inc. For research information, contact Dr Spitzer at rls8@columbia.edu. Use of the PHQ-9 may only be made in accordance with the Terms of Use available at <http://www.pfizer.com>. Copyright ©1999 Pfizer Inc. All rights reserved. PRIME MD TODAY is a trademark of Pfizer Inc.

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Appendix 2.**Questionnaire for elderly inmates**

1	Name, surname	
2	Date of birth, age	
3	Article of imprisonment	
4	Length of conviction	
5	Are you suffering any disease?	
6	Are you respected, treated differently in sentence due to your age?	
7	Are you satisfied with medical service in prison?	
8	Are you satisfied personnel attitude towards prisoners?	
9	Are you satisfied with other prisoners relationship?	
10	Do you have communication with family members and relatives?	
11	Do your family members and relatives visit you (short-term visits)?	
12	Do your family members and relatives visit you long-term (3 days)?	
13	How can you describe your daily mood?	
14	How do you see yourself in long term perspectives?	

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