

Chapter 16

For Whose Sake Is It Anyway? Evaluation of Explicit Family Policies in Turkey

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Abstract Family policies impact the life of every citizen in a society at a very private level. Their content as well as the processes through which they are formed and altered documents the powers that shape the lives of families at the macrolevel. In this chapter, we aim to document the current state as well as the change processes of the family policies in Turkey, a country of socioeconomic variety and rapid change. Here, we will give precedence to the aspects of family policy that are explicitly linked to the formation and daily life of families, such as the Civil Code, the Labor and Social Security Laws, as well as the laws and regulations concerning family violence. However, we will be leaving out many other rules and regulations that impact families more implicitly, through the conditions they present to individual members of families, such as the Penal Code and its regulations.

Keywords Family policy • Turkey • Families

Sociohistoric, Economic, and Political Context of Families and the Policy-Making Process in Turkey

Family life in Turkey has been influenced by a myriad of sociohistoric, economic, and political changes throughout its history. The ongoing modernization process since the mid-nineteenth century, economic transformations, rapid urbanization, rural to urban migration, increased levels of education, and demographic shifts are among the significant changes that had an impact on families in present-day Turkey. As geographically located between the East and the West, Turkey has hosted many cultures in its history. Before the establishment of the Turkish Republic in 1923, the Ottoman Empire, as an Islamic empire, has ruled the country for almost 600 years. Following the First World War and Turkey's War of Independence, the new Turkish Republic was established as a secular state with a parliamentary government. Establishment of the new Republic brought along radical social and economic changes that will be discussed in this chapter, alongside the more recent socioeconomic changes in the country that had an impact on families and the policy-making process.

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Demographic Shifts and Policies

Following WWI and Turkey's War of Independence, the population policies in Turkey from 1923 until 1965 targeted population growth (Dogan, 2011). In the first national census in 1927, Turkey's population was 13.6 million, and it has continuously increased until the 1960s (Hacettepe University Institute of Population Studies, 2009). In 1965, the pronatalist population policy changed with the law on family planning and an ante-natalist policy took over due to increasing rates of unemployment and rapid urbanization. Family planning policies targeted prevention and education via dissemination of modern contraceptives, the use of family planning services, and the provision of health education (Dogan, 2011). Further, abortion was decriminalized in 1963 for a range of medical issues, and with the Population Planning Law of 1983, abortion within 10 weeks of pregnancy was legalized (Metz, 1995).

As of 2011, Turkey's population is approximately 74.7 million (Turkish Statistical Institute (Turkstat), 2012a). Since the 1990s the population growth rate has been decreasing even though it is still considered high for European standards (UNICEF, 2012). The current population growth rate is 1.3 %, the crude birth rate is 17 per thousand, and the total fertility rate is 2.1 per woman in Turkey (Turkstat, 2012b). Fertility has decreased with increasing education levels. The urban–rural difference in fertility rates has also been decreasing.

Due to improvements in general health services, the infant mortality rates have declined in Turkey, from approximately 200 per thousand in the 1950s to the latest rate of 12.2 per thousand (Hacettepe University Institute of Population Studies, 2009; Turkstat, 2012a). Life expectancy at birth has also increased to 74.6 years (Turkstat). While the growth rates of young people in Turkey have decreased, there is an increased growth rate for the old-age group in Turkey (Hacettepe University Institute of Population Studies, 2009). However, Turkey still has a young population compared to the EU countries (Turkstat, 2012b). Proportion of population aged 0–14 years is 25.6 %, 15–24 years is 17 %, and 65 and older is 7.2 % (Eurostat, 2012). These numbers signify the need of more comprehensive youth policies as well as policies for the elderly support and care in Turkey.

Rapid urbanization has played a role in the transformation of the Turkish society (Sunar & Fisek, 2005). Today, approximately 70 % of the population lives in urban settings (World Factbook, 2012) compared to 25 % in the 1960s (Cindoglu, Cemrek, Toktas, & Zencirci, 2008). Rapid urbanization has started in the 1950s due to changes in the agricultural sector (i.e., low income and productivity, mechanization). Turkey's economy has moved from an agricultural one to an industry-based economy. In the 1930s industrialization was led by state enterprises and after the Second World War by the private sector, and finally after the 1980s new industrial centers rose across the country (Pamuk, 2008). Thus, in the 1980s increased industrialization and the development of the service sector have supported rural to urban migration (Gumus & Korhasan, 2009). Since a large proportion of urban residents were born in villages, it is possible to see the influence of the more traditional, patriarchal, and rural values in families as well as the influence of the modern Western values, especially in the large urban cities (Ataca, Kagitcibasi, & Diri, 2005).

Family Characteristics

Families are diverse in Turkey as they are influenced by diversity of cultures, geographic locations, and rapid socioeconomic changes described above. Taking this diverse context into account, research has identified some similarities and differences among families in Turkey and changes and continuity of certain family characteristics over time.

Interdependence in Intergenerational Family Relations

Overall, Turkish families are embedded in a collectivistic culture which is reflected in interdependent and close family relations (Sunar & Fisek, 2005). Extended family households have been a cultural ideal especially in the rural settings in Turkey, but data indicate that extended families were not dominant at any time in the history of Turkey (Nauck & Klaus, 2005). It is more appropriate to describe Turkish culture as a “culture of relatedness” (Kagitcibasi, 2007). For example, even though most households are composed of nuclear families (80.7 %) and a smaller proportion of households are composed of extended families (13 %; Tuncer, 2009), relatives tend to live close to each other in order to continue interactions and provide social and emotional support for one another. This “functionally extended” (Kagitcibasi, 1982, 2007) family arrangement enables family members and their kin to preserve their interdependence.

Furthermore, studies have shown that modernization and urbanization did not lead to a family pattern of separation and independence in family relations in Turkey. These social changes have led to a model of psychological/emotional interdependence instead (Kagitcibasi, 1996). Kagitcibasi (2007) describes this family model in which interdependence among family members is nonmaterial, there is continuity of emphasis on closely knit family relations, but there is also room for autonomy. In a three-decade longitudinal study, Kagitcibasi and Ataca (2005) found that while children’s economic/utilitarian value (i.e., contribution to household economy, household chores, old-age security) has decreased, their psychological value (i.e., joy, companionship, pride) has increased in Turkey. Comparison of the value of children among different socioeconomic (SES) groups has shown that while all groups rated the psychological value of children highly, there were differences among the groups in economic value of children. The economic value of children was found most important by rural mothers, followed by urban low SES group and least by urban high SES group. Accompanying the increased psychological value of children and lower financial expectations from the offspring, there was a decrease in son preference. Decline in son preference (except for the rural older mothers) signifies the changes in traditional and patriarchal family patterns in Turkey (Kagitcibasi & Ataca).

Child-Rearing Practices

The transition from total interdependence to psychological/emotional interdependence in the intergenerational family relationships described above has implications for child-rearing practices. Overall rural–urban setting, education levels, and SES of parents are associated with differences in parenting practices. Mothers from different SES groups varied especially in their desire for obedience and independence/self-reliance in their children. Mothers living in rural settings and low SES mothers in urban settings alike expressed wanting obedience more strongly and independence/self-reliance less strongly compared to high SES mothers in urban settings (Kagitcibasi & Ataca, 2005). However, in urbanized lifestyles, parents allowed for autonomy in their child-rearing practices yet maintained the close-knit ties and parental control due to continued emphasis on the culture of relatedness (Kagitcibasi, Ataca, & Diri, 2010).

Differences between the parenting patterns of mothers living in rural versus urban settings have been shown in other studies as well. For example, in a recent study with 162 mothers living in a large metropolis in Turkey (Istanbul) and 73 mothers living in smaller rural cities, mothers in rural cities reported more obedience-demanding and punitive behaviors (Nacak, Yagmurlu, Durgel, & van de Vijver, 2011). Obedience-demanding and punitive behaviors were reported less by mothers living in the metropolis with higher levels of education compared to mothers living in the metropolis with lower levels of education.

Aside from these differences in child-rearing practices that change across SES groups and education levels, commonalities have been identified as well. For example, studies have shown maternal

warmth and affection as prevailing characteristics of all Turkish families, regardless of the family structure or the educational levels and SES of the parents (Kağıtçıbaşı, 2007; Nacak et al., 2011). Maternal warmth is seen in mothers' frequent verbal or physical expressions of affection toward their children (Sunar & Fisek, 2005). In a study with three generations of urban middle-class families, the emotional closeness especially between the mother-child pairs was reported by all three generations (Sunar, 2002).

Marriage

Marriage is almost universal in Turkey reflected in the low proportion of unmarried individuals (Hacettepe University Institute of Population Studies, 2009). Approximately 84.4 % of women and 71.8 % of men are married before the age of 30. The average age at marriage is 28.5 for men 24.5 for women (Turkstat, 2010). The divorce rate has been rising in the last decade but it is considered still relatively low (Hacettepe University Institute of Population Studies, 2009). The crude divorce rate is 1.62 and 39.9 % of all divorces take place in the first 5 years of marriage (Turkstat, 2010).

Two types of marriages have been described to coexist in Turkey: descent and affinal (Ataca et al., 2005; Nauck & Klaus, 2005). Descent marriages, found mostly in the rural and less educated urban populations, include arranged marriages and marriages among relatives. There is a strong emphasis on the relations with the families of origin in these marriages. Affinal marriages, found mostly among the more educated urban population, include free partner selection. There is a strong emphasis on the conjugal relationship in these marriages (Nauck & Klaus, 2005). Hortaçsu (2007) compared the family-initiated and couple-initiated marriages in a study with 430 married couples over the family life cycle. Spouses in couple-initiated marriages reported more emotional engagement with their spouse and more emotional distance from their family of origin compared to family-initiated marriages. Furthermore, couple-initiated marriages were more egalitarian and there were fewer conflicts. However, over the family life cycle, some aspects of couple- and family-initiated marriages became similar. While the number of conflicts has declined in family-initiated marriages, in couple-initiated marriage, the division of labor became less egalitarian. One similarity found in both types of marriages was the wife's dominant role in the decisions concerning the family and the children.

Review of Family Policies Targeting Different Family Functions

Family Policies Targeting Marriage

After the establishment of the Turkish Republic in 1923, revolutionary changes took place in the area of family law which is regulated by the Civil Code in Turkey. The first Civil Code came into effect in 1926. The Civil Code brought changes into the family life in Turkey that paralleled the move from monarchy to democratic republic and from Islamic law to secularism (Yıldırım, 2005). With the 1926 Civil Code, the Islamic code of polygamy was abolished, and women gained equal rights to divorce as well as inheritance and child custody. Previously husbands had absolute right to divorce, while women were given the right to divorce in 1915 only on the grounds of desertion or husband's contagious disease (Yıldırım, 2005).

Despite these revolutionary changes, the 1926 Code was still supportive of a patriarchal family structure. Especially the laws concerning marriage placed women in a subordinate position in the family (Ilkcaracan, 2010). For example, husband was defined as the head of the household and described as the decision maker for the family (i.e., choosing the place of residence, issues concerning children). The wife had to take her husband's family name and had to receive husband's permission to work

outside the home. As such, the husband was the dominant partner, whereas the wife was dependent on the husband in the family structure depicted in the Code (Arat, 2010). However, these aspects of the 1926 Code were not strongly criticized until the 1980s because the Code was regarded as progressive and as part of the secularization process in the Republic (Arat, 2010; Ilkcaracan, 2010).

Attempts to amend the 1926 Code were made since 1951, but it was with the advent of the feminist movement in the 1980s when feminists started to voice their concerns over the 1926 Code that the pressure to change became more prominent. Collaboration of different groups of women resulted in numerous petition campaigns and demonstrations to amend the Code (Arat, 2010). In 2001, 126 women's groups from different sectors of the society united around a major campaign (Women for Women's Human Rights, (WWHR), 2005). Additionally, this movement was accelerated by European Union's dictates for Turkey to enter the European Union and the United Nation's treaty "Convention on the Elimination of All Types of Discrimination Against Women" (CEDAW) that Turkey signed (Arat, 2010). All of these influences combined resulted in the amendment of the 1926 Code, largely in the area of family law which brought a significant amount of gender equality to marriage (Yıldırım, 2005).

The new Civil Code came into effect in 2002. In the new Code, the husband is no longer the head of the household by default. The spouses will manage the household together, and they are regarded as equal partners in the decision-making process. The marriage is no longer represented by the husband; both spouses can legally represent the marriage. The article stating that wives had to receive their husbands' permission to work outside the home is eliminated. The women can use their maiden name before their husband's family name. Eighteen years of age is set as the legal minimum age for marriage for both sexes (in the 1926 Code, consent for girls was changed from 9 to 15 and for boys from 11 to 17). In addition, women's economically disadvantageous position in property division in the 1926 Code is eliminated by equal division of property acquired during marriage. Even though women had property rights in the 1926 Code, there was separation of property in marriage. In cases of divorce, both spouses kept what they brought into the marriage (legally registered under their names). The move toward equal division of property in the 2002 Code was interpreted as recognition of women's unpaid labor at home (Arat, 2010; WWHR, 2005). Additionally, attention is given to using an egalitarian language in the new Code by substituting words such as "husband" and "wife" with words such as "spouses."

Domestic Violence

The 1980s was an important time for social changes regarding gender in Turkey (Rodriguez, 2009). The same pressures from women's groups and international conventions described above for the Civil Code in the 1980s led to advancements in the issue of domestic violence as well. Women from varying socioeconomic backgrounds came together to raise awareness about domestic violence through large media campaigns and to initiate legislative change. The very first law on domestic violence, the Law on the Protection of the Family, was accepted in 1998 (Law no 4320). This law was significant in making a formerly private matter public in Turkey (Kardam, 2005). In 2012, the Law to Protect Family and Prevent Violence against Women (Law no 6284) was accepted in the parliament.

The 1998 Law on the Protection of the Family introduced protection orders and allowed third-party complaints. The protection order can be filed directly from the office of the public prosecutor, upon which a judge issues the protection order that removes the perpetrator from the victim's vicinity and prohibits the perpetrator from approaching the victim for 6 months. If the protection order is violated, it may result in arrest and confinement for up to 3–6 months (WWHR, n. d.). Through amendments in 2007, the law applied to separated spouses as well (Ilkcaracan & Amado, 2008). Additionally, definition of the perpetrator was extended to include not only the spouses but other family members (Kayar, 2007).

Law to Protect Family and Prevent Violence against Women was prepared by the Ministry of Family and Social Policies with the goal of strengthening the previous law and was accepted on March 2012. The new law extended the definition of the victim by including all women regardless of their marital status. It also extended the scope of preventive and protective measures to be taken (Moroğlu, 2012). For example, the law calls for “Violence Prevention and Monitoring Centers” operating 24/7 to be established. The services that the local state authorities are entitled to provide to the victim are detailed such as shelter; financial aid; psychological, vocational, and legal help; and access to day care. Violence prevention programs and collection of data on preventive imprisonment and sentences are also called for. Three days of imprisonment was also specified for perpetrators who violate the protection order.

Family Policies Regarding Childbearing

As a late industrializing, traditionally agrarian culture, the number of children in Turkish families has long been high. As in all traditional societies, married couples in Turkey are expected to have children, preferably immediately after marriage and to have multiple children. This is evident in national population demographics we mentioned earlier; Turkey has had a young populace in the last 50 years. Currently there is also persistent political support to have at least three children. Prime Minister Erdoğan has been openly urging married couples to have “at least three kids.” He made this comment at several occasions such as the March 8th Women’s Day speech of 2008 (NTVMSNBC, 2008), at the National Elderly Council Meeting (NTVMSNBC, 2009) in 2009, and more recently in May 2012, during an interview with an official dignitary from Kazakhstan (HABERTURK, 2012). These suggestions were the first messages for a line of population engineering speeches the prime minister will deliver, aimed at population increase. Mr. Erdoğan bases his suggestion on recent population indicators showing a steady decrease in population growth in Turkey and estimated aging of the population in the coming decade. However, most of his speeches on the issues also include a reference to Turkishness, Muslimhood, or both (Yazıcı, 2012). A more recent antiabortion statement made at an international population conference, likening abortion to a military air strike on civilians and to murder, is another attempt at population engineering. Yet this comment found harsh and loud objection from women’s organizations, and an attempt at changing the existing abortion law was withdrawn.

It is the Civil Code that regulates the formation and dissolution of marriages. Yet the constitution also includes a specific article regarding families. Article 41 of the Turkish constitution reads: “The family is the foundation of the Turkish society and is based on the principle of equality between the spouses. The state shall take the necessary measures and establish the necessary organization to ensure the peace and welfare of the family, especially where the protection of the mother and children is involved, and to provide the needed education in the practical application of family planning” (Office of the Prime Minister, 2010).

This new version of Article 41 establishes the role of government in family relations as the protector of the socially underprivileged members – the women and children. However, the statement regarding family planning education and practice is currently under criticism from the antiabortion supporters in the parliament. Prime minister’s July 2012 statement claiming abortion to be a murder made the voices of antiabortion groups more prominent even though the proposition to change the abortion law from 10 to 4 weeks has been overturned.

Unlike its older versions, the current Civil Code makes no reference to “out-of-wedlock children” and gives all children in a union equal rights and privileges. Right to adopt children is given to single individuals as well as married couples. If a single person wants to adopt, he/she has to be older than 30 years old. However, married couples, after remaining married for at least 5 years, can apply for joint adoption, if they are older than 18. Once adoption is finalized, all legal documentation regarding the adoption is kept confidential.

Family Policies Regarding Dependent Care

Once the family is formed, the daily lives of families are mostly shaped by the Labor Law and the Social Security Law. These include the laws and regulations about maternity leave, healthcare coverage by the Social Security Institute and the Universal Health Insurance Fund (UHI Fund), and dependent – child and elder – care. For all of these issues, Labor and Social Security Laws work in reference to one another: Labor Law defines how one becomes legally employed as well as the conditions and eligibility for the Social Security Insurance; the Social Security Law defines the extent of the coverage. Those who are unemployed are covered under the Universal Health Insurance Fund (UHI Fund).

The Social Security and General Health Insurance Law has gone through extensive reform since 2006. Social Security Institute (SSI) was established in 2006 by unifying the three different social security and health insurance schemes (*SSK*, *Bag-Kur*, and *Emekli-Sandigi*). In 2007, the country switched to the Universal Healthcare Plan. This plan offers free access to primary care for all citizens of Turkey that includes prenatal, natal, perinatal care for mothers and well baby/childcare. This healthcare plan is referred to as the Universal Health Insurance Fund (UHI Fund) (SGK, 2007). Yet a more extensive coverage is provided to all legally insured employees under the SSI. SSI coverage is given to all employees and their first-degree family members, and it covers all expenses for primary healthcare. The only conditions requiring co-payments and limits are dental care, in vitro fertilization (IVF), and prosthetics. Children under age 18 are fully covered. Since 2007, IVF treatments for women younger than 40, who have exhausted all other options, with a medical diagnosis of infertility are also covered by the SSI. However, this coverage is approved only for married couples, for up to three cycles. Employed single women and women older than 40 are excluded from this coverage. Single women are also not given the choice of egg donation or artificial insemination. Artificial insemination of single women is not allowed even when the women are willing to cover the costs (Uysal, 2003).

The changes in the healthcare system and the SSI were met with mixed reactions. Although the number of citizens receiving free healthcare has increased and all infant and maternal health indicators have improved, the transfer of most of these care services to private healthcare institutions and closing or downsizing of the government hospitals are interpreted as moves towards the privatization of healthcare system in the long run. The remaining government-owned system is overburdened, the quality of care delivered is low, and out-of-pocket health expenditures still make up a significant portion of the national total health expenditures (Pala, 2007).

Maternity and Paternity Leave Policies

Current maternity leave policies in place were last revised in 2003 and stated that during the pregnancy, all employed woman are eligible for leave of absences due to prenatal visits. A total of 16 weeks of paid maternity leave can be used 8 weeks before and 8 weeks after birth or if the mother chooses to and she has supporting medical reports showing that her health condition allows her to work, she can choose to work up to 3 weeks prior to birth and use the remaining 5 weeks after birth. In addition, she can use up to 6 months of unpaid maternity leave. After returning to work, mothers of babies younger than 12 months can also have nursing leaves for a total of 1.5 hours daily.

There is no paternity leave stated in the law. However, a recent change in the law regulating the work of civil servants (Law 657, Article 104) states that men who are civil servants can take up to 10 days of paternity leave and gives the fathers the opportunity for paternity leave of up to 16 weeks if the mother dies during delivery. This new regulation, although only covering employees in the public sector, is seen as an instigator for an upcoming paternity leave policy change for all employees.

The current policies regarding maternity leave in Turkey are considered to be better than some Western counterparts. Yet, they are in need of improvement. The major deficiency is the brevity of paid maternity leave. Two to four months after birth is too early for mothers to leave their infants for

full-day work. Even though they may have nursing breaks, these are in practice ineffective since for majority of the mothers, their babies cannot be physically present for nursing. Infant day care is almost nonexistent and unless the informal social support network of families can provide the needed care, mothers of infants are forced to either take unpaid leave or terminate their employment.

Another important gap in the childbearing policies in Turkey is the nonrecognition of the fathers as integral caretakers of their children. Surprisingly, the corporate world in Turkey offers more opportunities to fathers than the minimum government requirement: 62 % of the 100 largest corporate employers in Turkey offer birth leave to both parents; 33 % offer this leave for up to 6 months. Yet, even when these opportunities are offered, in very few companies do fathers opt to use this opportunity. And even then, 60 % of fathers never take the opportunity (Zahidi & Ibarra, 2010). These numbers show that involved fathering is not yet culturally accepted and the main role fathers are given remains to be the breadwinner role.

Childcare Policies

The Turkish Labor Law does not have mandates on parental leave although its inclusion has been debated as a harmonization requirement for the EU accession that Turkey is a candidate for. The women's NGOs have been pressuring the government for parental leave legislation up to par with the EU requirements – 12 weeks unpaid – yet the employers question the labor market appropriateness of it in the current global market (Acar & Goksel, 2008).

The current Labor Law does make provisions for childcare at work. Any workplace with more than 150 women employees must offer free childcare services for all 0–6-year-old children of its employees. Although nationwide compliance with this law has not been reported, we have the numbers for the top 100 employers in the nation: Among these, only 21 % report having any day-care options. Only 10 % offer on-site day-care facilities and the remaining 11 % either outsource or provide part-time services (Zahidi & Ibarra, 2010). Thus it would be safe to state that childcare services at the workplace are gravely lacking in Turkey and that this lack ultimately limits women's labor force participation.

The regulation of early childhood care services nationwide is performed by the Directorate of Child Services (*Çocuk Hizmetleri Genel Müdürlüğü*). Looking at the attendance rates in early childcare, it is evident that childcare options outside the workplace are also very limited (UNICEF TURKEY, 2010). According to the Hacettepe Demographic and Health Survey (2009), a total of only 12 % of all preschool-age children of working mothers either attend kindergarten (7 %, compared to 27 % in EU) or are cared for by a paid caretaker (5 %). The remaining 88 % are cared for by extended family members. Thus if the family has limited finances and no family members living close by, the birth of a child means the end of the mothers' career. Most children in Turkey are cared for at home by their mothers or, if the mother is employed, by the paternal grandmother (25 %) or maternal grandmother (11 %), an older sibling (6 %) or another relative (5 %) (Boğaziçi University Social Policy Forum, 2009).

To increase the schooling rates of 60–72-month-old group, enrollment of this age group in the kindergarten classes of public schools started in 2009 in 32 of the 81 provinces. Yet most of these classes were offered at a monthly rater of 50–200TL (roughly 20–80€). Considering that minimum wage is about 700TL (280€)/month in Turkey (FedEE, 2012), these rates can be unaffordable for many families. Thus, the enrollment rates were low in these classes. In 2012 with an unexpected change in the primary education law, all 66-month-old and older children are called to primary school. This major change in the public primary education system commonly referred to as “4+4+4 law” has created a lot of reaction. Most experts warn that the current call of 60-month-old children to “primary education” instead of “early childhood care” or “kindergarten” is highly problematic (ACEV Early Child Care Advisory Board, 2012). School readiness of these young children is highly

questionable, given the very low kindergarten attendance rates in previous years. Although early childhood education is highly common in the world (UNESCO, 2012), primary school education of 5-year-olds is very rare (UNESCO, 2011), and in all of these nations, early childhood education rates of 4-year-olds are very high. The readiness of the schools and teachers is also questioned, given that these children will be accommodated in already existing schools with already existing staff with very limited training in early childhood education. The physical conditions of most public schools have not been modified to meet the special needs of 66-month-olds as well. All of these concerns have been publicly debated in the last 10 months since the declaration of the call, and growing concerns led to a movement among parents to obtain fake medical reports to excuse their children from school for a year. The government is adamantly pushing to go forth with the decision without any improvement in criticized issues. Upcoming months will show the effectiveness of this sudden move on the part of the government.

Yet, the question of what happens to 9–59-month-old children whose parents are employed or need/want to be employed is still left unanswered. Without adequate childcare services, women's equal participation in education and labor force is greatly compromised. Thus, Turkey has one of the lowest female employment rates among the OECD countries – 27.6 % compared to 70.9 % OECD 34 average (OECD, 2011). Women may work at higher rates before marriage or childbearing, yet they may never return after childbearing or return to lower-status jobs and remain in those jobs. This mentality of viewing women's work as “a welcome *addition* to family finances,” giving it an auxiliary role but not considering it an integral part of the labor force and women's lives, undervalues their work and limits their career opportunities. It further perpetuates a gendered division of labor at the workplace as well as within the family, further making women vulnerable.

Care of the Elderly

Discussions of an aging population or about the care of the elderly are recent in Turkey as it is largely a nation with a young population. Of the 74 million, only about 10 % is at or above age 60 (Turkstat, 2012a). Until recently, elderly care was considered a private family matter, and elderly at public care facilities were considered only for the family-less poor. Thus, the great majority of the elderly are cared for by families, and many receive no or very limited support from the government. Services for this population fall under the services provided by the Directorate General for the Disabled and Elderly Services (OYHGM) under the Ministry of Family and Social Policies. In 106 nursing homes around the country operated by the OYHGM, 11,678 elderly are cared for. Residents in these facilities need to pay a portion of their care costs, and this co-pay is close to twice that of current minimum wage. Nonetheless, most facilities have long waiting lists. OYHGM also oversees the private nursing home management of 164 registered private nursing homes nationwide. These institutions have the total capacity to serve 9,804 elderly people. 24 nursing homes are managed by various ministries and local governments. These facilities have a total capacity of 2,579 which brings the grand total to 24,061 nationwide (OYHGM, 2012), close to 3.3 per 10,000 of the total elderly population.

It is evident from the above numbers that facilities and services for the elderly are very limited in Turkey. The existing facilities can only serve able-bodied elderly, and even so, they are overcrowded and lack staff that are trained to serve the special need of the elderly. In general, Turkey lacks expertise in gerontology (ASAGEM, 2008). In addition to the limited number of care facilities, the spectrum of services is also very narrow. Nonresidential care services are being formed but they are very new and serve a very small number of families. Services for the elderly with special needs are even more limited and lack the expertise needed to deliver quality care. These all point to the urgent need for a very comprehensive policy work; however, aging and its special needs are not in the Turkish social and political agenda yet.

Care of the Disabled

According to the 2002 Turkish Disability Research conducted by the Prime Ministry Administration for Disabled People (OZIDA), 12.29 % of the Turkish population has a disability. This means close to nine million people and their families are dealing with the complications of living with a disability daily. The most common form of disability is chronic illness (9.7 %), followed by orthopedic disabilities (1.25 %) and visual impairments (0.60 %) (OZIDA, 2012).

Although the numbers are similar to the numbers in other nations (e.g., according to USA Disability Statistics (2012), 11.9 % of the population in 2010 were disabled) and lower than the global 15 % estimate by the WHO (2011), what is different in Turkey is the fact that a significant portion of these disabilities are due to preventable causes: 34 % of the disabled are disabled prenatally or at birth, and the most common causes of their disability are hygiene (esp. for visual impairments) and kinship marriage. While the improvements in primary healthcare delivery are important factors thought to remedy one of the contributors to the issue of high prenatal impairments, there is very little being done to discourage kinship marriages, especially marriages among the first-degree cousins, a very common practice all over Anatolia.

The first Turkish Disability Law was passed in 1997 and later revised in 2005 as part of the EU harmonization. The more comprehensive new version includes prevention of disabilities as well as mainstreaming of the disabled children in education and full integration of the disabled members of the society by setting a deadline of 2012 to make all public places and transportation accessible. Improvements have been made in the infrastructure, yet changes in general attitudes towards the integration of the disabled in everyday relationships have been very slow and limited.

Although the law promises integration of the disabled to the public education system supported with special education services when need arises, as well as full inclusion in the Universal Healthcare Plan, studies looking at the rates of educational attendance among the disabled find it to be very low: One in every ten disabled is able to attend school. Thus about 34 % of the disabled in Turkey are illiterate while the country illiteracy rate is 11.3 % (Tufan & Arun, 2006). Special education and care facilities are operated under the supervision of the Directorate General for the Disabled and Elderly Services (OYHGM). There are a total of 130 special care facilities with the capacity to serve close to 11,000 disabled individuals and 84 care and rehabilitation centers nationwide with a capacity to provide services for close to 5,400 disabled individuals. Thus, roughly only six per 100,000 of the disabled are able to utilize services specifically provided for them at a care facility.

According to the Turkish Disability Research (OZIDA, 2012), the most commonly used service by the disabled is healthcare, followed by education and rehabilitation services. Yet the rates of use are very discouraging: Only 55.7 % of the disabled report using healthcare services, while only 12.3 % utilize educational services and a mere 5.9 % are receiving rehabilitation services. Families of the disabled are eligible for social assistance programs since 2006 and close to 200,000 families are being supported. This is probably the single most positive change in the lives of the disabled in Turkey because with this change, home-based care gained support over institutional care that further marginalized the disabled. However, there still remain about eight million disabled people and their families who have not been receiving this assistance.

The 2002 Turkish Disability Research results and others draw the Turkish disabled profile as one who is poor, inadequately educated, with limited social security. This profile supports the statement made by a disabled parliament member in an interview with Anna Louie Sussman of *The Atlantic* (2011): “Families with disabled children are praying for their kids to die before them, because they have no support systems.”

Family Policies Supporting Families in Poverty

According to the World Bank data (2012), poverty rate in Turkey was 18.1 % in 2009. According to Law 2022 that was first accepted in 1976 and that was reformed in 2005, 2007, 2008, and 2011, all Turkish citizens who have no income or have income below the determined poverty line and who are older than 65 with no family to take care of them or those with a disability who are older than 18 with no family to take care of them and those families with a disabled member under the age of 18 are eligible for monthly allowance.

An alternative social assistance program is the conditional cash transfer (CCT) program. This is a program initiated with funds from the World Bank in 2002. It targets families in poverty with dependent children. Families in this program are given the assistance with the condition that they will complete the healthy childcare checkups for their children ages 0–6, send all their school-aged children to school, and present the expecting mothers of the family to regular prenatal care.

The CCT has been adopted by the Turkish government in 2006, and between 2003 and 2008, a total of 1.27 billion Turkish liras has been spent on the program (MFSP, 2012). The effectiveness of the program has been under study since 2009, yet the results have not been published as of this writing. Yet there is evidence from around the world where the same program has been implemented that it contributes to significant declines in child labor utilization and school dropouts. Yet, un-standardized selection criteria and very low assistance rates may limit the positive outcomes of this program (Buğra & Keyder, 2007).

Another social assistance program targeting poor and socially excluded families is the Local Initiatives Project. It has four components: income-generating projects, employment skills training projects, social service infrastructure-generating projects, and temporary community employment projects. Although there is no substantive study conducted to show the extent of the effectiveness of this program, Buğra and Keyder (2005) report some concerns based on their fieldwork with seven provinces. Un-standardized selection criteria creating an air of ambiguity among the applicants as to who gets selected and why create a persistent lack of faith in social assistance resulted in underutilization of services and feelings of humiliation rather than empowerment among the recipients. These contribute to the exclusion of men from the process. In poverty-stricken families, it is almost always the women who come to ask for assistance. This is of great concern especially for programs like the Local Initiatives where employable skills training and infrastructure generation are targeted for those members who have some employment past. Yet when it is the women who come to get help, rather than generating projects, they tend to opt for in-kind assistance of goods, further perpetuating the charity-based mentality.

An effectiveness study of the project-based assistance programs was carried out by the Directorate of Social Assistance (SYDGM) and Government Planning Agency (DPT) in 2007 with 6,012 participants. They found that 86 % of the recipients of these project funds were generally happy with the assistance they received. Of those who were to pay back the project capital they received the year the study was conducted, 95 % were able to make full or partial payment (SYDGM, 2008). Other studies looking at the sustainability of Local Initiatives Projects found sustainability rates ranging from 98.5 to 69.1 % (ESDA Consultancy, 2006; PAR Consultancy, 2006). Another indicator of effectiveness would be if the project recipients were able to earn enough money to keep themselves and their families out of poverty, thus to generate income above the minimum wage as a result of the project. However, the surveillance system results show that of the 2063 projects active during 2009, about 1,700 of them made equal to or less than the minimum wage (Biçer, 2009); thus these families still remain at the margins of poverty. Yet the continuance of these noninterest credit programs is seen as an important way of taking families out of the grips of persistent poverty and helping individuals gain skills and experience to keep, create, or find future employment (Buğra & Keyder, 2005).

Recommendations for Family Policy Development, Implementation, and Assessment

After reviewing the most influential family policy regulations, it needs to be emphasized that the speed and amount of change in family policy in Turkey is staggering (for a previous review of family policies in Turkey, see Çarkoğlu, Kafescioğlu, & Mitrani, 2012). Thus the recommendations that follow may be outdated by the time this chapter is published. Nevertheless, several points regarding the process of implementation and the approach to family issues need to be mentioned.

Among the limited number of programs available to better the lives of families, the majority is geared toward crisis interventions that aim to affect a very small portion of high-risk families. The need for these types of programs is clear; however there is great need for a larger range in programming. Social assistance programs for at risk families such as the poor, immigrant, or single-parent families need to increase. These families need less direct help and more indirect community support to better their family living conditions. Family assistance services that go beyond financial support and education are lacking, such as home-based services for the dependents in families.

Evidence-based family policy development is of paramount importance. Most programs are developed without scientific needs assessment studies, and they later lack efficacy studies to test whether or not these programs provide any relief or support. The existing limited number of efficacy studies all remains descriptive, looking at changes in descriptive indices (e.g., drops or increases in reported cases), yet the mechanism through which this kind of change occurs remains unexplored, leaving us with no understanding of the influential factors that help or deter the change and what needs to be done to remedy the situation. What is needed are either qualitative studies or more detailed data collection that lends itself to statistical modeling analysis that go beyond answering “what” questions to understanding the “how.”

The new Civil Code brought gender equality to marital relationships; however there are still a number of shortcomings. The 2002 Code has retained the 300 days of waiting period for divorced or widowed women before remarrying, a period that can only be waived by a Turkish court. The purpose behind this waiting period is considered to be the concern for determining paternity (Yıldırım, 2005). This article is criticized as a violation of women’s basic human rights (WWHR, 2005, p. 3). Another area for improvement concerns women’s last names. Women still do not have the freedom to choose to keep only their maiden names after marriage. Another very important area is the lack of recognition of same-sex couples in the law. The wording of the Civil Code indicates that a marriage can only be between a man and woman and the Article 2 of the Marriage Regulation states that marriage is a legal contract between a man and a woman (Başoğlu & Yasan, 2011). Thus, same-sex couples do not have the right to marriage. In addition, “homosexuality” is accepted as grounds for divorce and the homosexual spouse to be at fault (WWHR, 2005). Furthermore, there are no regulations for civil unions either for same-sex couples or heterosexual couples in the Civil Code. Thus same-sex couples cannot establish any unions under the Turkish law (Başoğlu & Yasan, 2011).

The Law numbered 6284 to Protect Family and Prevent Violence against Women has been prepared to eliminate the implementation problems of the previous law (Law no 4320). Whether the new law will improve conditions in Turkey is open to question. First and foremost, those who will implement the new law such as public authorities and judges need to be trained and these programs need to be evaluated. Other means to improve implementation may include continuation of campaigns to inform the general public about the new law and different forms of violence, increasing the number of shelters, and improvement of the existing ones. As of 2012 there are 60 women’s shelters in Turkey with a capacity of 1,427 (CEDAW, 2012). The opening of new shelters needs to gain momentum in Turkey.

Conclusions

Once again, Turkey is going through a rapid social policy change. The Justice and Development Party (aka AKP) that has been in power since 2002 has gained the political and economic stability to take on numerous policy reforms, and family policy reforms became the focus in the last 5 years. The neoliberal economic policy with a conservative political agenda leads to a renewed emphasis on “the strong Turkish Family” and a call to fight the modernization trends that “erode family ties” (Yazıcı, 2012).

The neoliberal economic policies called for the shrinking of the welfare state by replacing public institutions with private health, child, elder, and disabled care facilities. Although the services provided in these institutions are still under the coverage of the UHI Fund, the privatization trend in caregiving facilities is disconcerting.

The conservative agenda of the AKP government pushed forth the family and especially the female members in families to fill any gaps in caregiving. We see three basic issues in this trend, two of which are not specific to family policy but all social policy making in Turkey: First, in all areas of social policy, including family policy, the prominent discourse is about “need” rather than “rights” (Buğra, 2008). As such, individuals and families are expected to document their need or inability to provide for their families to become eligible for even the most basic of social assistance. This creates a chasm between the citizens and the government and limits the utilization of the services provided, especially when the services are prevention focused rather than crises management (Buğra & Keyder, 2005).

Second, prevention-focused policies and services for families at risk are very limited, and the existing ones almost exclusively are based on passive delivery of information via lectures. The content of these lectures are developed without proper needs assessment or any kind of community-based, collaborative evaluation. The effectiveness of most of these services is also not evaluated once they start. These all contribute to the limited access as well as acceptance of these programs by the society at large. Egalitarian, collaborative, community empowerment-focused services are in need of developing (Semerci, 2010).

Third and more specifically true for family policies in particular is that almost all family policies assume the women in families as subjects that exist to serve and care for their families. This assumption becomes most apparent in child-, elderly, and disabled care policies in place. It is assumed that there is always a mother to care for the 0–3-year-old children or that there is always a female family member to transport the disabled and the elderly to special education or other care facilities during weekday working hours or perform caregiving task for them at home. Yet there are no alternative systems in place to do the work these women are doing if they either do not want to or cannot perform these services. At this point one wonders, for whose sake are these policies anyway? What happens when it is the government, through policies and services to support families, that is creating unequal family dynamics that put the female members of families at a vulnerable or oppressed position, perpetuating the patriarchal authority all over again?

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