Bachelor thesis [9633 words]: The occupational problems and needs which affect the participation level of documented Turkish immigrants in Amsterdam and Ankara.

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## Literature
Introduction

Background
Turkish people arrived to the Netherlands as labor immigrants during the 20th century. The Netherlands counts almost 16,908,000 citizens on March 2015 [CBS, 2015]. The latest numbers show that the Netherlands encountered 146,379 registered immigrants from Turkey on December 2009 [CBS, 2015]. Their proportion of the Dutch population will grow from 7.2% in 2003 to 14.6% by 2020 [Bozkir, et. al., 2013]. Reasons for migration were the economic and political environment in Turkey. Around the 60s Germany and the Netherlands recruited workers in Turkey to increase labor migration [Butter, 2011]. Workers were leaving their families behind and hoping to return to their home country after a few years but many Turks stayed in the Netherlands. There were Turkish people either born abroad themselves called the ‘first generation’ and those who were born in the Netherlands to at least one parent born abroad as the ‘the second generation’. The third generation does not have to apply for naturalization [Denktas, 2011].

In the last few years a lot of research has been done considering this topic. Several studies have shown that Turkish immigrants living in the Netherlands, specially elderly, are unlikely to approach health care professionals, such as occupational therapist, because of the experience of cultural differences: language barriers, social status and income are the most important factors within Turkish immigrants living in the Netherlands that seem to influence participation [Buren, et. al., 2005] [Smits, et. al., 2007] [van Os, 2010].

Besides the effects of original country and host country, migration itself has some effects on the personal, family and social level. Immigrants are socially and culturally diverse and don’t comprise a homogeneous group [Côté, 2013]. Migration brings many difficulties such as social isolation, prejudgment, unemployment and minority status and tensions [Winona. 2012]. Their specific health needs are often poorly understood, communication with healthcare providers remains poor, and health systems are not prepared to respond adequately to their needs [Côté D, 2013].

The identification of these needs is important and should be cultivated, in order to adjust and adapt within society which give meaning to somebody’s life and make leisure activities, activities which are work and social - related valuable and important. Cultural differences should be enlightened to health professionals in Amsterdam. Occupational therapists in practice consider the importance to identify these needs, and conspire this by exploring them.
Model of Human Occupation (MOHO)

The Model of Human Occupation describes in which way an individual chooses and organizes daily activities and in which way it’s been done [le Granse, van Hartingsveldt & Kinébanian, 2012]. This model gives a lot attention where the individual is driven by. It isn’t only focusing on the individual characters, but also on its environment. In order to do this the model will lay the focus on the environment and the reason why an individual would like to participate within certain activities. The model is actually occupation – based and lay the focus on three main aspects:

- Motivation and volition.
- Habituation.
- Performance capacity.

MOHO also emphasizes an understanding of the physical and social environment in which human occupation takes place [Kielhofner, 2008]. Immigration is a complex case which often affects multiple areas of occupations like self - care, productivity and leisure. With the aspect of MOHO our aim at this project is developing an acceptance and understanding of immigrants' personal beliefs, values, strengths and interests, and how that impact their view and participation in occupation.

Within this study - occupation - was defined as meaningful and purposeful daily life activities which were person and context - based [van Hartingsveldt & Logister - Proost, 2010]. Needs are defined as requirements which are essential or very important rather than just desirable [OUP, 2015].

To be able to explore the challenges, barriers and possibilities within Turkish immigrants in Amsterdam and to have more knowledge about the way accessibility of occupational therapy services can be improved the main research question designed in this project as : “Which occupational problems and needs affect the participation level of documented Turkish immigrants in Amsterdam and Ankara?”.

Following to the main question eight sub questions were derived:

- What (health) problems are common within Turkish communities including the social determinants of health: income and social status, employment/working conditions, social environments, personal health practice, coping skills and culture?
- Which approach can be used during activities as a preventative measure for problems within Turkish communities in Amsterdam in order to raise their participation level within society?
❖ What (social) problems are influencing the social participation and acceptance of Turkish immigrants in Amsterdam?

❖ What are the occupational needs within Turkish communities in Amsterdam which are culturally related?

❖ How occupational therapists in practice can connect with the Turkish immigrants in Amsterdam in order to respect the occupational values, beliefs and needs?

❖ What kind of difficulties are experienced by occupational therapists in practice during the interaction with Turkish immigrants gathering information in order to reduce the occupational problems which are experienced by the Turkish immigrants?

❖ What are the differences and similarities between the occupational problems and needs within Dutch and Turkish communities?

❖ How do Turkish immigrants in Amsterdam describe their own lifestyle considering their daily occupations and obligations?

During the bachelor thesis program the researchers, Aydogdu, C.A. & Weeda, C.V., performed two different types of studies to explore the challenges, barriers and possibilities within Turkish immigrants in the Netherlands to have more knowledge about the way accessibility of occupational therapy services can be improved. Thesis process started with two systematic reviews which were performed by the researchers. Interviews which were conducted by Aydogdu, C.A. from Hacettepe University in Ankara, were compared with the ones which were gathered in the Netherlands.
Methodology

General information

Literature study
Firstly, an individual literature study has been made. Therefore the primary research question has been divided into several sub questions, as stated in the introduction. From those, two sub questions has been selected which each student individually gave answer to due a systematic review.
Aydogdu, C.A. has been focusing on the following research question: “Which occupational needs exist within Turkish communities including the social determinants of health”? 
Weeda, C.V. has been focusing on the following research question: “Which occupational problems and needs affect the participation level of documented Turkish immigrants in Amsterdam and Ankara”?

The following topics from the systematic reviews are reported as the most important results considering the availability of the retrieved articles and the relationship with the bachelor thesis:
- Religion.
- Environmental factors.
- Accessibility of healthcare services.
- Depression.

Qualitative study
Secondly, the eight remaining sub - questions are answered due a qualitative study which represent the practical part from the bachelor thesis.
The researches have been focusing on the following research questions:
- “What are the culturally related occupational needs within Turkish communities in Amsterdam”?
- “How can occupational therapists in practice connect with and reach the Turkish immigrants in Amsterdam in order to respect the occupational values, beliefs and needs”?
- “How do Turkish immigrants in Amsterdam describe their own lifestyle considering their daily occupations and obligations”?
- “What (social) problems are influencing the social participation and acceptance of Turkish immigrants in Amsterdam”? 

Page no.| 6.
● “What kind of difficulties are experienced by occupational therapists in practice during the interaction with Turkish immigrants gathering information in order to reduce the occupational problems which are experienced by the Turkish immigrants”?
● “What are the differences and similarities between the occupational problems and needs within Dutch and Turkish communities”?

Semi structured interviews as a qualitative research method focus on Turkish immigrants and occupational therapist’s own beliefs, and experiences as they are presented in thoughts, ideas, feelings, attitudes and perceptions. In addition, the research approach emphasizes their behaviors and social interactions. It contains individual interviews in order to gain a deeper understanding of health, participation, needs and occupational therapy rehabilitation within Turkish immigrants in Amsterdam. The interview focus laid on exploring culture and behavior of Turkish immigrants and understanding and explanation of their own reality [Öhman, 2005].

Interview methods and identification

This paragraph represents a qualitative study. Because the used interview methods and identification of the participants are slightly different between Turkey and the Netherlands, there are explained separately.

Interviews from Turkey

General: In Turkey around January 2015 several interviews have been conducted with occupational therapists in practice and Turkish citizens which use occupational therapy services in Turkey.

Sampling and recruitment of participants: By looking at the amount of client - shifts the occupational therapists in practice were chosen in Turkey. This in order to make sure the occupational therapists recently have seen a lot of clients and could share valuable experiences. The two occupational therapists in practice were approached by an introduction email about the bachelor thesis project. Even when the bachelor thesis program wasn’t fully defined the main goal about comparing results from Turkey and the Netherlands stood out.

The Turkish four citizens are retrieved from the vocational therapy practice, and from a geriatric practice place where Aydogdu, C.A. was doing her internship at the occupational therapy department. Since Aydogdu, C.A. was responsible for four clients, she asked them face - to - face, in a direct way, if they would like to contribute to the bachelor thesis project.
Setting: The setting were the interviews took place with the Turkish clients / citizens were at the vocational therapy practice, and at a geriatric practice place where Aydogdu, C.A. was doing her internship at the occupational therapy department. The interviews with the Turkish clients / citizens took one hour each.

Interviews from the Netherlands

General: In April and May 2015 several interviews have been conducted with occupational therapists in practice which have experiences working with ethnic minorities and Turkish immigrants which live in the Netherlands, specifically Amsterdam.

Sampling and recruitment of participants: Occupational therapists from the “Diversity Network Occupational Therapy” have received a Dutch invitational letter through mail to collaborate within the bachelor thesis project. The main goal was to gather occupational therapists in practice which have experienced working with Turkish clients living in Amsterdam. The criteria for the occupational therapists in practice to collaborate within the bachelor thesis project are presented in the following table.

<table>
<thead>
<tr>
<th>Interviews - Practitioners</th>
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<tbody>
<tr>
<td><strong>Criteria</strong></td>
</tr>
<tr>
<td>The interviewed practitioner can only be an occupational therapist in practice.</td>
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<tr>
<td>Age - variety.</td>
</tr>
<tr>
<td>The interviews are semi structural.</td>
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<tr>
<td>The interviews are 30 minutes.</td>
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<tr>
<td>The students will set 5 open questions and send them at least one week before the interview so that practitioners can prepare themselves.</td>
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</table>

*Table 1 - Criteria for the interviews with the practitioners.*

The Turkish immigrants are retrieved from many different directions. Occupational therapists from practice where asked to be supportive in retrieving Turkish clients to contribute to the bachelor thesis project. The primary goal was to get from each interview at least two new contacts. There has
been made a Turkish invitational letter in order to create understandability. Turkish restaurants have been approached, after the second time of eating there to build a small constructive relationship. The way we approached people was face-to-face and directly ask around at flat buildings in Amsterdam-West. Also, the relatives from people which participated within our fieldwork project from the Global Health minor were reached. The criteria for the Turkish immigrants within the bachelor thesis project are presented in the following table.

<table>
<thead>
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<th>Interviews - Immigrants</th>
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<tr>
<td>Criteria</td>
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<tr>
<td>The interviewed immigrant needs to be Turkish.</td>
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<tr>
<td>The Turkish immigrant represents the first generation.</td>
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<tr>
<td>The interviews are narrative with the use of OPHI – II.</td>
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<tr>
<td>Several topics from the first six interviews from Turkey are included in the OPHI –II.</td>
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<tr>
<td>The interviews will endure a least 1,5 hour (longer is expected).</td>
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</tbody>
</table>

*Table 2 - Criteria for the interviews with the immigrants.*

**Setting:** The setting where the interviews with the Dutch occupational therapists in practice took place, was at the place where the occupational therapist were working. These interviews took at least 30 minutes and maximum 1 hour. The setting where the interviews with the Turkish immigrants took place, was at their own home in Amsterdam. This in order for the Turkish immigrants to feel comfortable. These interviews took at least 1 hour and had a maximum of 3 hours.

**Data extraction**

There are three different types of extractions we have been using to gather the information from the interviews in a structured way and to organize them. Firstly, structured interviews were conducted through mail for the interviews with the occupational therapists in Practice from Turkey. Secondly, semi-structured interviews have been used with the Turkish citizens which use occupational therapy services. Thirdly, the interviews with the occupational therapists in practice were also semi-structured. The interviews with the Turkish immigrants living in Amsterdam were conducted in a narrative way using an adapted way of OPHI - II.
Structured interviews

Through mail a structured interview was performed to gain answers from the occupational therapists in practice from Turkey. The seven following questions which has been send through mail to the two occupational therapists in practice:

1. In which occupational areas you see the most problems when you evaluate the client’s occupational balance (person - environment - activity)?
2. Did you have any issues before starting the actual treatment explaining occupational therapy and the meaning? How does this differ after the actual treatment?
3. How important are the clients’ family and relatives in order to accomplish the treatment?
4. What do you think about the importance of including the Turkish culture within the actual treatment (family relations, habits, etc.)?
5. What type of clients have difficulties to understand what occupational therapy actually is?
6. In which areas you see the most occupational problems when you consider the social determinants of health: (income, socio-economic level, social environment, personal health experiences, and coping skills)?
7. What do you think about the promotion of occupational therapy in Turkey? What can be disadvantages and advantages? Which methods can be used to promote occupational therapy in Turkey?

Occupational Performance History Interview - II (OPHI - II)

The Occupational Performance History Interview is a semi-structured interview which lay the focus on the life path of an individual. This interview method can also be used in a narrative way and can be used to determine certain goals from a client perspective [Le Granse, van Hartingsveldt, Kinébanian, 2012].

Narrative interviews

Narrative interviewing has been used for the Turkish immigrants living in Amsterdam in order to answer questions for the qualitative research, because narratives bind together one’s past, present and future providing a sense of one’s occupational identity over time, narratives motivate people to behave so as to make their life stories unfold as they would like and narratives are central to how people craft their own occupational lives [Wengraf, 2001]. Narratives influence the extent to which clients participate in and benefit from therapy. Understanding a client’s narrative helps to understand how that person is likely to interpret things that happen - including what happens in therapy - and what kinds of behaviors the person is likely to choose, find meaningful, and sustain [ZHAW, 2008].
Narratives have been connected to an investigation of occupation, as theorists within occupational therapy have explored the link between making occupational choices and personal life stories. In studies of professionals, narrative is sometimes used to explore the reasoning of the practitioner. Narrative has played a central role in discussions of practical reasoning generally, and more specifically of clinical reasoning in occupational therapy. Occupational therapy researchers have investigated the relationship between telling stories and reflecting on practice [Mattingly, 2000].

Data synthesis and analysis

In this paragraph the process of synthesis and analysis is described. Because the used methods to synthesize and analyze are slightly different between Turkey and the Netherlands, they are explained separately. Each paragraph contributed to the explanation of the “old fashioned way” which has been used for the interviews from Turkey, using handwritten notes, and “the explanation of the “modern way” which has been used for the interviews from the Netherlands, using an IPad.

Interviews from Turkey

The interviews which were held in Turkey weren’t recorded. During answers and stories from the participants keywords were noted down. Afterwards a summary has been made using the keywords from each interview.

Interviews from the Netherlands

The interviews in the Netherlands were recorded with the IPad, using a special app from the I store, called “Recordium”. After gathering all interviews needed, the analysis process started by listening to all interviews again. Continuing the process, they have been transcribed. The transcribing process firstly started by noting down the characteristics of each interview: (1) first name, (2) sex, (3) age, (4) origin, (5) date, (6) time, and (7) description to which group the participant belonged. Examples of groups where participants could belong to were:

- (group 1) Turkish citizen.
- (group 2) Occupational therapist in Turkey.
- (group 3) Turkish immigrant living in the Netherlands.
- (group 4) Occupational therapist in the Netherlands.

Secondly, each interview from the Netherlands was listened to again, but this time with use of the “slow - motion” button. The “slow - motion” button was used to avoid rewinding continually and to
be able to transcribe the interviews sentence by sentence. Some parts from the interviews were excluded during transcribing them:

- Sentences which were repeated with the exact same words during the whole interview.
- Sentences with the same meaning as others using the same words in different orders
- Sentences which were unfinished.
- Sentences which were unclear.
- Sentences which were said by the researchers.
- Sentences which were not related to the bachelor thesis.
- Sentences which were not related to the person itself or its family: talking about a friend or neighbor.
- Sentences which explain comparisons between other cultures than the Turkish and the Dutch.

The main resulted topics from the interviews are compared to the stated topics which came out from the two systematic reviews: (1) religion, (2) environmental factors, (3) accessibility of health care services, and (4) depression. The topics which were in common were described in the results. The topics which differ from the interviews between Turkey and the Netherlands were also described.

Similarities between the data synthesis and analyzing process from Turkey and the Netherlands

Whether it was from the summaries from Turkey or the transcribed interviews from the Netherlands, either way the interviews were coded by the same structure. Each sentence was categorized by a certain topic.

**Ethical guidelines and considerations**

The students were taking responsibility for all their actions in relation to the interviews. Both students were respecting cultural differences and communicated open and effectively. It was important for Aydogdu, C.A. & Weeda, C.V. that participants knew what they could expect and where the gathered information was used for.

**Gedragscode praktijkgericht onderzoek voor het HBO**

In order to work according the “Gedragscode praktijkgericht onderzoek voor het HBO” and meet the criteria to operate with integrity, all participants received an invitational letter, weather in Dutch or Turkish [Andriessen, Onstenk, Delnooz, Smeijsters & Peij, 2010]. In the invitational letter the content of the bachelor thesis project was explained in order to meet the criteria for accountability [Andriessen, Onstenk, Delnooz, Smeijsters & Peij, 2010]. The collaboration between Hacettepe
University and Hogeschool van Amsterdam was also mentioned in order to show the participants the reliability of the project [Andriessen, et. al., 2010].

In order to show we worked carefully with the personal sensitive and private information we created an assignment form for the participants in the Netherlands on which they declare by signature they accepted the interview to be recorded and give the acceptance to share the retrieved information with teachers from Hacettepe University and Hogeschool van Amsterdam [Andriessen, et. al., 2010].

Privacy
Considering the law of privacy, anonymity from all participants, weather from Turkey or the Netherlands, were taken into account by exposing first name, year of birth, and the country of origin [Rijksoverheid, 2015]. The participants in the Netherlands have the right to obtain the recorded interviews in which they selves participate in [Rijksoverheid, 2015]. Therefore when a participant appealed on this right, the students agreed. There has been made an appointment with the interested participants: They will receive their own audio record after the second of June, when the bachelor thesis project is ended. When participants weren’t interested in obtaining the record, they have been deleted after the second of June. The anonymity rules were applied in Turkey, with the slight difference that all notes were destroyed after summarizing and coding.

Participation on voluntary bases
Collaborating to the bachelor thesis project was on voluntary bases. This means it was a non–funded project. However, it was a project where occupational therapists in practice and Aydogdu, C.A. & Weeda, C.V. could benefit from. This was taken into account during the interviews in Turkey, as well during the interviews in the Netherlands. This encountered for all the interviews which were held in Turkey and the Netherlands.

Gratitude to the Turkish immigrants living in Netherlands
In return to the Turkish immigrants in the Netherlands our gratefulness for their participation, for creating time space, sharing their private experiences, and making this bachelor thesis possible, they received a fruit basket containing apples, melon, and oranges. The fruit basket was inspired by the importance of food among the Turkish population. The project plan of this bachelor thesis describes that a maximum of € 8 was considered as enough to buy some delights and thank – you – cards. In the end we spend less than our planned budget. In total we spend € 20 to give the four Turkish participants a fruit basket. This amount of money was equally divided among Aydogdu, C.A. & Weeda, C.V.
Gratitude to the occupational therapists in practice working in Netherlands

In return to the Dutch occupational therapist in practice for creating time space and making this bachelor thesis project possible, they received the final project plan, the two systematic reviews and the complete advice report.
Results

Search results
We approached 2 occupational therapists from Turkey, 3 occupational therapists from the Netherlands, 4 Turkish citizens and 5 Turkish immigrants living in Amsterdam, which brings us on a total of 14 interviews.

[Please, check Table 3 - General Characteristics of the interviews and conclusions]

In Turkey according to Turkish occupational therapists clients do not have leisure time activities and economic issues and social environment are main problems with them. Families and relatives are very important part of the treatments but on the other hand they can be too much protective and this can restrain clients from being independent. Occupational therapy promotion is important and clients and families are very happy to be able to have this treatment. Parent and children relations are pretty strong and being far away from children can cause anxiety. For an elderly woman it is important to be supported by the husband if she does not have their children at home anymore. For young people job searching period is quite stressful. Stress at working place also causes stress and person can struggle to find time and some activities to be able to relax. Because of some traditional beliefs clients can be late for the proper treatment.

In the Netherlands language can be a problem to be able to understand rules and procedures for immigrants. In this point some occupational therapists are helping them to explain the rules. There is a need to promote occupational therapy to Turkish immigrants. Occupational therapists think Turkish flyers, general practitioners, day care centers can be used for promotion. Occupational therapists see the family and relatives as a big part of the treatment. Understanding their cultural background helps during the treatment. Life is getting more expensive for Turkish immigrants. Even though they think health care system is good, they find it also quite expensive. Turkish children can be less successful than Dutch students because of not having the full command on Dutch.

Study range and characteristics
Emerging themes after coding the interviews from Turkey were: (1) occupational therapy in Turkey, (2) occupational problems and needs, (3) motivation, (4) feelings, (5) occupational therapy promotion, (6) Turkish citizens in Turkey, (7) work, (8) environment, (9) leisure activities, and (10) examples.
The coding process from the interviews which have been held in the Netherlands were categorized using the above named categories. New topics which came up were: (11) Turkish immigrants in the Netherlands, (12) education, (13) religion, and (14) occupational therapy in the Netherlands.

[Please, check Table 4 – Topics which came up from the interviews in Turkey, and the Netherlands]

**Main outcomes**

**Occupational problems and needs**
With Turkish people most of the time occupational problems are related to leisure activities and social or physical environment. They are not paying attention their balance of physical-social and psychological situations. They are using health care services only if they have a physical problem. They pay attention only to their family and forget taking care of themselves. Anxiety is quite common with young people who have too many stresses while looking for a job but also after starting working.

They cannot manage time because of stress and cannot spend time on leisure time activities or hobbies. The most remarkable thing is clients’ family are too much conservative and do not let them to do things by themselves even they are able to do it. Sometimes this prevents the success of their treatment. There are many disable people in Turkey and to be able to make them creative and active giving a job opportunity is very important.

In the Netherlands for an elderly client it was hard to stay in daily care house because of communication problems. He could not explain himself clearly because he could not speak Dutch. That made him anxious and he wanted to leave the place. He also cannot perform his daily routines. His son helps him to put on the clothes for eating and taking a shower. It is also hard for the son because he does not have too much time for himself. They had some difficulties to get the right wheelchair. They did not know the procedures and it was hard to understand papers in Dutch. In this case occupational therapist helped them to get the right wheelchair. For another elderly it was hard to cook and shop. She was willing to do many things but she thinks her body does not allow doing anymore. During the whole they she just sits or sometimes goes to her children. After retiring she felt really sad. Working was a good motivation for her. One of the interviewers thinks education is hard for their children. Children need to read and think in Dutch during the education but their Dutch is
not as good as their Turkish so they fail in some exams or they need more time than Dutch students. All of the interviewers think life is getting more expensive in Amsterdam. This issue sometimes makes them thinking going back to Turkey. They are happy with health care system but they also think it is an expensive service. Emotionally they sometimes feel in the middle of the Netherlands and Turkey. They cannot feel being belong neither to the Netherlands nor to Turkey. They think family and relative relations are more important for Turkish people. That is also something was observed by occupational therapists in the Netherlands. They think understanding Turkish cultural background is very important for the treatment. One occupational therapist says: “I always ask them some questions which I do not need for dementia screening but to build a trustable connection like: where do they live, how many children do they have, do they have any vacation plans for next year etc.”, “I just chat with them and drink tea and eating some cookies at first 10 minutes of house visiting.” Another occupational therapist emphasized as: “To be able to get their trust I went to Turkish families’ house more than one times to just have time together or drink some tea. I also tried to speak a little bit Turkish. They felt really comfortable and warmer after this approach.”

Work
Working is one of the main important things for Turkish people in Turkey. For young people sometimes it is harmful and stressful to find a job. Because of working too many hours and not having enough time to rest they may have burn out. They would like to have more time to feel relax and spend that time for their private needs. An occupational therapist observes this with her clients too: “Most of the people are working too much or taking care of their family and forgot themselves.” There are a lot of people who are not working at their own profession but something else as well. This makes them unhappy. On the other hand working can be very useful for others. They feel better because of creating something and they see it as an opportunity to forget their problems. Working and being productive are very meaningful for a person with disability. She emphasizes her feelings as: “I feel better when I am working and creating something with a lot of women.” After retiring finding an occupation or hobby can be seriously hard for elderly people. It takes time to manage their new life and to fill the free time with meaningful activities. In the Netherlands one elderly interviewer had many problems because of Turkish people at the workplace but even though it was quite stressful she was happy about being active and helping people at the work. She had very good relations with some colleagues she tried to learn Dutch from them. She had to do housework and take care of the family so she was not feeling good after quitting the job. Her children are also working too much in Amsterdam so they hardly can spend time with their mothers. One interviewer is working at the pharmacy as a part time job and this makes her feel really happy and relax. Helping people especially elderly and she feels like time is going faster at the work motivates her.
husband is working too much but they try to spend time together and go to cinema every week. She regrets not working hard during her education. Otherwise she could work in a higher position than now. For a man interviewer it was very important to find a job easily after immigrating to the Netherlands. He felt lucky because he could use his diplomas and could get a better job than the average of other immigrants’. He also had higher education in the Netherlands to have a better job. He sometimes regrets coming to the Netherlands because he thinks he worked harder than the fellows in Turkey but they live better conditions than him now. Having a job is very important for the Turkish families. One interviewer wants to have his own company and he has been working in different fields to be able to have good job experiences. He says: “Turkish people prefer their children to have their own company, because Turkish people love to work hard.”

Environment
Social environment shows his effects related to family and relatives. Turkish people have really strong family relations in the Netherlands. They spend many time together with their family and relatives. It is very important to be together in bad and happy days. Children take care of their elderly parents. They bring them to doctor or therapist and help also during the appointments with the language. Occupational therapists observed that family is very involved to treatment. But this case sometimes can occur some issues: “As an occupational therapist you tell them to be independent but they think their family member can take care with them especially daughters and daughter in law. That is why I try to focus on caregiver.” One elderly clients’ house is a good example to give for the physical and institutional environment. He lives in a special house which is for people have a wheelchair. The house is designed for the disabled person. This service is given by the government. They found the process of getting the house difficult but they are very comfortable in it. Cultural environment is one of the remarkable points of the interviews: “As an occupational therapist you should leave your own culture and values to be able to understand the client.”, “I am always very open to them. First 10 minutes of house visiting I just chat with them and drink tea and eating some cookies. One of my colleagues had some difficulties with it. He did not want to eat or wanted to leave home at exact time. When I visit Turkish people I never schedule tightly. I schedule it at the end of the day and for 1.5 hours most of the time because they really want to host you in their home. They really want to host you at their home.” The interviewer whose father is Turkish but was born in the Netherlands says: “I wouldn’t describe myself as Turkish, but I do see that I’m connected to my culture, especially with the religion.”
Education

After the interviews in the Netherlands education and as a result of education socio-economic level founded important for Turkish immigrants. One interviewer was very happy to have a high education degree so it helped to get a good job and a good salary. There are also some regrets within some Turkish people about their education. They think they could study harder and had a better job. Turkish children can have some issues during the education. Their parents are talking Turkish at home, they watch Turkish TV channels so their Dutch is not as good as their Turkish. This causes failing from the exams and having a lower education degree than Dutch students.

Religion

Turkish interviewers in the Netherlands are quite religious. They pray and go to mosque as much as possible. “I think it’s good to be religious because it supports the way people interfere in a respectful way to each other. The books in which these ways are written down support me to interact with people. I am influenced by religion without boundaries.” says one interviewer. For another person, she and many Turkish people are not performing all necessary things within Islam.

Study quality and potential sources

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<thead>
<tr>
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<th>Tiska</th>
<th>Rikke</th>
<th>Caroline</th>
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<th>Criteria</th>
<th>Selahattin &amp; Zafer</th>
<th>Sinan</th>
<th>Fikriye</th>
<th>Betül</th>
<th>Mustafa</th>
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</thead>
<tbody>
<tr>
<td>The interviewed immigrant needs to be Turkish.</td>
<td>+</td>
<td>-</td>
<td>+</td>
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<tr>
<td>The Turkish immigrant represents the first generation.</td>
<td>+</td>
<td>-</td>
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<td>The interviews are narrative with the use of OPHI – II.</td>
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<td>Several topics from the first six interviews from Turkey are included in the OPHI – II.</td>
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<td>The interviews will endure a least 1 hour (longer is expected).</td>
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1) **Common (social) problems which are influencing the social participation and acceptance of Turkish immigrants in Amsterdam.**

Literature has shown the vulnerability of migrants [Topal, et. al., 2012]. Migrants often have an underprivileged position considering housing, education, and employment rates which influences the income [Elfersy, et.al., 2013] [Zorlu, 2013]. During the interview with Mustafa an example came up in which he expressed his opinion about the acceptance: “Just because we are Turkish and live at Amsterdam Southeast the school doesn’t support my daughter to go to VMBO - T instead of VMBO - B”. This is a typical example about education. To have a social status in very important considering Turkish families: “My parents prefer me to have my own company, because Turkish people love to work hard” and “The most important thing to my parents is me and my sisters’ success”. The role of the absolute and relative income is also an influential factor [Gokdemir & Dumludag, 2011]. This is a typical example of a social problem, because this results in a lot of pressure [Zorlu, 2013] [Gokdemir & Dumludag, 2011].

2) **Culturally related occupational needs within Turkish communities in Amsterdam.**

Culture plays a big role at the rehabilitation treatment [Sloots M., et.al. 2010]. Occupational therapist experience effects of culture in practice. They notice that hospitality is very important for Turkish immigrants. Chatting, eating food, talking about family and relatives are important to build a trustful relation with the clients.

Turkish elderly people are thinking that their children have obligations towards their aged parents [de Valk H.A.G., et.al. 2008]. Caroline mentioned that: “As an occupational therapist you tell them to be independent but they think their family member can take care with them especially daughters and daughter in law. That is why I try to focus on caregiver.” According to the interviews children feel better when they take care with their parents by themselves.

3) **How can occupational therapists in practice connect with and reach the Turkish immigrants in Amsterdam in order to respect the occupational values, beliefs and needs?**

Intercultural competence training of therapists are necessary [van Loon A.A., et.al. 2011]. Understanding Turkish cultural background is very important for the treatment. One occupational therapist says: “I always ask them some questions which I do not need for dementia screening but to build a trustable connection like: where do they live, how many children do they have, do they have any vacation plans for next year etc.”, “I just chat with them and drink tea and eating some cookies at
first 10 minutes of house visiting.” Another occupational therapist emphasized as: “To be able to get their trust I went to Turkish families’ house more than one times to just have time together or drink some tea. I also tried to speak a little bit Turkish. They felt really comfortable and warmer after this approach.”, “As an occupational therapist you should leave your own culture and values to be able to understand the client.”

4) **Difficulties are experienced by occupational therapists in practice during the interaction with Turkish immigrants gathering information in order to reduce the occupational problems which are experienced by the Turkish immigrants.**

According to Caroline Turkish elderly are very polite but they won’t tell everything directly. As an occupational therapist I feel I should invest more time in the bounding. Some colleagues of occupational therapist had troubles to managing session times. They set their schedule for one hour long therapy but with Turkish hospitality it took more than one hour. For Tiska going to home more than one time is useful to understand their values and needs better. Including the family for the treatment is something that occupational therapists need to consider. Most of the time instead of care centers family members want to take care with the clients. Because of the language problems’ understanding health care services is difficult for the clients. They had some difficulties to get the right wheelchair and occupational therapist helped them. Tiska had an example: “A few years ago one Turkish woman had to go from nursing home to hospital by the ambulance. They kept her in the hospital and she was fine again. She could go back to the nursing home. They expected that ambulance could bring her back to the nursing home. But it did not. They had to care for the going back and they were nervous about it. They thought it was the case because they were Turkish. They could not get the rule”.

5) **Differences and similarities between the occupational problems and needs within Dutch and Turkish communities.**

According to the Caroline’s interview Dutch clients are explaining their problems easier and more directly than Turkish immigrants. Dutch people explains their needs, ask questions about the treatment and try to use the health care system opportunities as much as possible. Turkish people do not open themselves easily during the treatments. There is need for time to build a relation. They are shyer than Dutch people. As a result of the interviews relations between Turkish family and relatives are stronger than Dutch people. We can find maybe some similarities between Turkish elderly and Dutch elderly who live in villages but not cities. If I think about my grandmother she also has 7 children and she also expects to be take care from them.
6) How do Turkish immigrants in Amsterdam describe their own lifestyle considering their daily occupations and obligations?

Turkish immigrants living in the Netherlands in general describe themselves as being happy: “I can say that I’m happy about my life”. Being religious is a motivational factor for as well Turkish citizens, as Turkish immigrants living in the Netherlands: “Living considering the respectful rules from the books, creates my values and beliefs”. From literature the importance of religion is stated as well and is mentioned as being part and influential factor for a persons’ behavior: Turkish immigrants define the feeling of being abandoned by God as critical to define their state of well – being. Elfersy, et. al. [2013] confirmed the article from Braam, et. al. [2010] explaining the importance of religion within Turkish immigrants living in the Netherlands. Considering Elfersy, et. al. [2013] Turkish immigrants living in the Netherlands are proud to have their own culture and hold on to that, because they define being Dutch as supporting the freedom from tradition, which they considering the article, automatically relate to freedom of religion.
**Discussion**

**General information**

According to this project occupational therapy service is important for the Turkish immigrants in the Netherlands to be able to meet their needs and increase their participation level to the society. While they do not seek problems about living together with the Dutch community they show some problems related being an immigrant and this affects their quality of life. There are so many Turkish immigrants in the Netherlands but there is not enough researches about them related to occupational therapy. Therefore this study is valuable to be able to understand their needs, values, cultures to be able to fix their problems. To be able to understand specific Turkish behaves and have an overview, interviews used from Turkey.

**Limitations**

Additionally this project also have several limitations:

- The four interviews with the Turkish citizens were not recorded which resulted in a summary based on notes.
- The contact with the occupational therapists in practice were done by mail, which isn’t the same as done in the Netherlands.
- The occupational therapists in practice from Turkey weren’t from Ankara, but from other cities which doesn’t meet the research question which is related to the comparison between Amsterdam and Ankara.
- The interview structures were not same in Turkey and in the Netherlands therefore all topics could not have compared.
- Occupational therapists are not seeing too many Turkish clients. The amount of sample may not represents all immigrants in Amsterdam.
- From only two Turkish immigrants living in the Netherlands we received feedback. The students send out feedback forms, but only to two of the interviewed participants. If the students would have send the feedback forms to all participants they might have had valuable results about their interview skills, some tips or even extra information about their experiences and the approach.
- Interview coding conducted by two different student. They may include some interpretations.
- Relations with the Dutch citizens might me and important topic for the study but it was not examined during the interviews.
The project focused on Turkish immigrants in the Netherlands more than Turkish citizens in Turkey.

One interview was missing because of recording problems.

As an interview criteria “Interviewers need to be Turkish” was not applied with two 3rd generation immigrants. After the project plan we found it necessary to have interviews with them because they may represents Turkish background too.

**Conclusions**

Turkish immigrants in the Netherlands have many occupational needs related to work, education, language and health care system. Some of these topics are common with the occupational needs in Turkey like work and social environment. Especially family protection can prevent clients’ independence for both groups. While the problems are similar between two groups Turkish immigrants in Turkey show some problem related to being immigrant like education and health care service using problems which are related to language skills.

To be able to have more reliable research numbers of sample should increase for the further studies. Using same interview techniques is important to be able to compare both groups in Turkey and in the Netherlands.
Summary

The purpose of this project was to find some answers for our main question: “Which occupational problems and needs affect the participation level of documented Turkish immigrants in Amsterdam and Ankara”? The reason for this project was to be able to explore the challenges, barriers and possibilities within Turkish immigrants in Amsterdam and to have more knowledge about the way accessibility of occupational therapy services can be improved. The project is composed of seven chapters. Chapter one is introductory and defines background of Turkish immigrants in the Netherlands and Model of Human Occupation (MOHO) which was fundamental of the final project. Chapter two explains the methodology of the project. The chapter consists of general information about literature study and qualitative study that give the main and sub questions; interview methods which explains samples and settings; data extraction where the type of interviews explained; data synthesis and analyses and ethical guidelines and considerations. Chapter three consisted of four part. General information about interviews, Study range and characteristic of the interviews, main outcomes from the interviews and study quality and potential sources where the qualitative study results gathered. Chapter four was the complete results part which included the answers of the sub questions from literature study and interviews. Chapter five concentrated on limitations of the project and suggestions. Also included practice implications. Conclusion were drawn in chapter six where the importance of the subject was emphasized by placing it in a larger context. Chapter seven consist of final report which was conducted as an advice report.
**Advice**

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**Introduction**

The following product represents the advice report from the bachelor thesis project: “The occupational problems and needs which affect the participation level of documented Turkish immigrants in Amsterdam and Ankara”.

In the last few years a lot of research has been done considering this topic. Several studies have shown that Turkish immigrants living in the Netherlands, specially elderly, are unlikely to approach health care professionals, such as occupational therapist, because of the experience of cultural differences: language barriers and social status and income are the most important factors within Turkish immigrants living in the Netherlands that seem to influence participation [van Buren, Hallich, Cleven, Joung, van Koutrik & Yerden, 2005] [Smits & de Graaff, 2007] [van Os, 2010].

Therefore the aim of this project was to explore the challenges, barriers and possibilities within Turkish immigrants in the Netherlands to have more knowledge about the way accessibility of occupational therapy service can be improved.

The specific goals for the advice report was to bridge the gap between Evidence Based Practice (EBP) and Practice Based Evidence (PBE).

**Investigation**

The findings from the two systematic reviews and a practical qualitative study is translated into recommendations for occupational therapists in practice working with Turkish Immigrants living in Amsterdam.

**Practice implications**

The researchers’ advice all occupational therapists in practice which are working with Turkish immigrants living in Amsterdam...:

- To do research about the most effective way to promote yourself as an occupational therapist in practice among ethnic minorities, specifically Turkish immigrants living in Amsterdam.
- To promote working in a cultural sensitive way.
To understand the importance of family involvement and use this knowledge as a motivational factor for the clients to stimulate them and strengthen the occupational therapy treatment.

To recognize the importance of the social environments which the Turkish immigrants in Amsterdam are living in and its effect of other people’s perception.

To use religion as a positive strategy to motivate people. The qualitative study showed that Turkish immigrants living in Amsterdam are definitely religious and believe in Islam, but that it’s all about the respectful values and beliefs which are coming from religion. Living considering this lifestyle makes them feel pure.

To explain in a very slow and easy way what occupational therapy is about, in general. When you give specific examples from their situation they will think occupational therapy is only about that example. Give the explanation in general, and talk about the daily life activities which can be influenced because of mental problems, as well as physical problems.

To understand the reason why they’re holding on their own culture.

To learn some basic Turkish words which can be used during therapy in order to show them interest and be polite. This way the Turkish clients will notice there has been done some background search about their culture.

To ask general questions which has literally nothing to do with the therapy: start with a normal conversation, not about the weather, not about tea, just about a nice picture you see on the table, or the nice smell of something that has been cooked. Just try to step in the role of a friend who is actually the occupational therapist.

Responsibilities and benefits

- Taking time for your Turkish clients will gain trust from them. This will create open communication and two-sided interaction.
- Spend more time at the beginning, saves, eventually, time at the end.
- Using above named strategies will give more insight in their

Ethical discussion

Occupational therapists in practice should think about what their boundaries are related to bring the Turkish people some “healthy foods”. The researches have been buying fruits to break the ice with clients, and to thank them for their participation. The reactions we got were all very positive and people even explained they would love to participate again when it would consider a study project from the researchers. In the Netherlands, it is not a custom to buy some “fruits” for your clients. It is seen as not professional, but what is professionalism than? If this is the way to gain trust, retrieve
extra information from the client which makes it easier for occupational therapists to support their clients, why shouldn’t it be applied? On the other hand, aren’t we creating more differences between ethnic cultures? If occupational therapists in practice receive a nice plant from their clients, as thank you - for the therapy, it would be considered as more “normal” than the other way around. The researchers left this point open for occupational therapists in practice to discuss about, because they already know their own answers, but it’s in contrast with the professional way of working which most people have in mind. On this topic our advice is: not black, not white, but grey!

**Implementation**

Because we believe in the potential of the Diversity Network of Occupational Therapists we have made a modest implementation plan to renew this Network. We already have been noticing some difficulties which this Diversity Network of Occupational Therapists experienced. Those have been taken into account:

- Renew the website with the use of students from another HvA department. They will receive credits (profieleringspunten) in return.
- Renew the members of the Diversity Network Occupational Therapy with the goal to create a diverse group of people.
- Promote yourselves differently than you’re doing now.
- Each month meetings with specific topics, but invite people from the field, students, and clients and show them what they will. For example: Turkish students, Surinam students, young students, older students in order to gather their visions and inputs.

The problems which are meted because the lack of money, firstly needs to be solved by using students which get credits in return. People which are (potential) collaborators need to know the reliability, usability and functional effect of the Diversity Network.

We would also advice to come with a general promotion presentation which could be held in mosques, almost all our participants advised this to the researchers. It means to be persistent and consequent in doing this. Search for several mosques in Amsterdam and try to connect with them. It was a pity to hear from the Turkish immigrants that there’s always a doctor present and a physical therapist (several times a year), because occupational therapy can mean a lot to this group as well. Even all Turkish participants explained Health was most important to them.


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