

Tackling Poverty and Poor Health in Turkish Widowed Households State Benefits Work

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In a nutshell

- Single mother widowed households in Turkey that receive survivor benefits are more likely to improve their general health and increase household wealth than equivalent households that do not claim the benefits.
- Households who receive the survivor benefits are 22% less poor than those who do not claim the benefits.
- Education history, employment status and age have impacts on poverty: widows who are in old age, low educated and not employed full time are particularly at risk of poverty deprivation and more likely to experience worse health.
- Six out of 10 widows at risk of poverty reported bad health compared, with four out of 10 of those not at risk.
- Social policies, such as survivor benefits, are important for reducing poverty and improving individuals' well-being and health status.
- Various policy measures can be taken to protect single mother widows, who are uninsured and not eligible for survivor benefits, and their households.

Policymakers in Turkey should expand the coverage of the survivors' benefit, which has helped reduce ill health and poverty among widowed single mothers by reducing the time needed to qualify for payments for civil-servants and the self-employed. Encouraging greater take-up of voluntary insurance among the middle class, and improving general tax collection would raise new funds that could be used to help non-eligible widowed households.

Survivors' benefits are cash payments made by the government to family members when a worker dies. His or her spouse and unmarried children are entitled to receive these cash benefits. The payments are intended to help ease the financial strain caused by the loss of the worker's income. Although these benefits aim to help single-head households who are in

financial difficulties due to the loss of an additional household income, the remaining parent faces serious challenges to maintain their place in the labor market and carry out domestic duties such as child rearing and house chores.

Widows and widowers share two common experiences: a loss of social status and reduced economic circumstances. Research suggests that widowhood is a much more common experience among women than men. Moreover, it is more likely to cause financial difficulties for women than for men, and financial strain, reducing well-being of women.

Given that background, the health status and poverty levels of female-led households that consist of widows and their children are issues of vital importance for policymakers and researchers. Previous research has generally neglected the effects of survivor benefits on widowed women's well-being and whether these are beneficial in improving households' wealth, especially for countries in the Middle East and North Africa (MENA) region.

Young widows are at greater risk of economic hardship after death of spouse

The loss of the spouse, and especially for the woman, is one of the most intense, negative and dramatic events that can affect a person, next to the loss of a child (Bennet et al., 2005). Separation and especially widowhood are associated with various psychological, mental and socio-economic problems. The main problem is the economic hardship and burden, especially for the woman and, in the case of Turkey, where the husband is considered as the principal breadwinner.

In the case of widowhood the death of the husband leads to deprivation for the widow and the loss of the nucleus and pillar of the family. This economic deprivation can have further effects on the health status of women and children. Widows report higher rates of mental illnesses, depression, anxiety and traumatic

grief than married people (Bennet et al., 2005; Fasoranti and Aruna, 2007).

Low levels of health status in these cases are not necessarily directly linked to age. Research shows that age is negatively associated with health status, implying that old people tend to suffer a higher probability of health problems. However, this does not imply that all individuals experience a decline in health with age at the same rate.

People of different age groups respond to the loss of their spouse in different ways. Older widows are wealthier, often having long-term savings and investments in assets such as property. Young widows are less emotionally prepared than their older counterparts. Furthermore, young widows feel more often lonely as their social network is smaller than older widows. Their savings and wealth tend to be lower (Fasoranti and Aruna, 2007). Therefore, young widows are at greater risk of economic hardship after widowhood, while their situation deteriorates with the duration of widowhood.

Households on survivor benefits are healthier and wealthier than non-recipients

Analysis of the Income and Living Conditions Survey of Turkey 2006-12 shows that those who receive survivor benefits are less likely to be at risk of poverty. Those who receive survivor benefits report higher health status level by 11% than widow mothers who do not receive the benefits, while their children report 16% higher levels of health status.

The poverty deprivation measure index used in the analysis is based on whether there is: a bath or shower; indoor flushing toilet; piped water; a hot water system; a telephone; a washing machine; and a car. The results show that those who receive the survivor benefits are 22% less poor than those who do not claim the benefits.

Overall, the average household annual income for the widowed households that received the survivor benefits was 965 Turkish Liras (₺) during the period 2006-2012, while the income for the households that did not claim the benefits was (₺) 585, indicating a poverty gap of (₺) 380.

Poverty is a significant factor that determines health status especially of widowed women. For widowed households that are at risk of poverty, 59% reported very bad health status, while 41% reported that their health status was fair or very good. Among widowed households that were not at risk of poverty, 43% reported that their health status was very bad, while 57% were very satisfied with their health (Ozdamar and Giovanis, 2015).

Alternative policies to survivor benefits, such as universal and variable life insurance, can be costly to implement since their value falls when interest rates decrease or when there is a downturn in the market. This results in lower benefits or requires higher premiums to be paid in order to maintain the same benefits value. The same applies to private schemes since there is always a risk of outliving savings in periods of market downturns. The public survivor benefits offer this option and safety, while the private ones do not always guarantee this protection (Willmore, 1998).

Education, employment and income impact on health of widowed-women households

Socio-economic characteristics of the widowed women are important factors for their health and wealth level, as well as being crucial for their children's health status. The education history, employment status and income levels are important factors.

Education is a very important determinant of the health status of widowed women and their children.

Educated people are more likely to be wealthier, associated with better labor opportunities and earning higher wages. Those who have completed a higher university degree are the healthiest as are their children. Those who have completed primary school, high school and vocational/technical school are more likely to be healthier than illiterate women and are more likely to have healthier children.

Widows who are unemployed, seasonal workers and the disabled are more likely to report bad health status than those who are full-time employed. A wage-earner mother is an important determinant on a child's health status. In households where the mother is either employed part time, retired, old, or permanently disabled, fulfilling domestic tasks or a seasonal worker, her child is more likely to have lower levels of health status than children belonging to households whose mother is employed full-time.

Those who are located in urban areas are at less risk of poverty, because they have more labor opportunities and more access to health services, which in turn may lead to improved well-being (Ozdamar and Giovanis, 2015). The support of the household members is also an important factor for personal health care. Increasing family size is positively associated with the probability of being healthier.

The total income level of households is another vital factor for having a healthy lifestyle. Those without the financial capacity to afford a meal with meat, fish or vegetables are less healthy than people who can afford them. Those who can have access to medical centers and the possibility of getting treatment are healthier.

Policy recommendations

Various policy measures can be taken to protect single mother widows and their households who

are uninsured and not eligible for survivor benefits. They have a two-fold target: allocating funds to decrease the probability of being in poverty; and indirectly reducing the risk of poverty and increasing the households' wealth by improving their health status (Ozdamar and Giovanis, 2015). They include:

- Extending the reach of the current tax system and improving efficiency of tax collection to raise additional funds that can be used more effectively and efficiently for the non-eligible single-mother widowed households.
- Expanding voluntary insurance among the middle- to high-income groups so more public resources can be allocated to the poorer population of uninsured widowed women.
- A greater contribution by the government to the self-employed, who currently pay all the premiums for the benefit (under the current system, survivors insurance is 20% of earnings, where 11% is paid by the employer and 9% by the employee).
- For a family to be eligible for survivor benefits, a minimum of 900 contributory days and five qualifying years are required, while for the civil servants and self-employed people, the required period is 1,800 days. Therefore, an additional policy option could be the reduction of the period of contributory days.
- Increase the current lump sum payment for social assistance helping widows and their families and helping them to find employment through training for a period of time such as 1-2 years from the current level of TL250.

The findings from research into the impacts of survivor benefits in Turkey could lead to further research in other countries in the MENA region to see whether they could follow Turkey's example to improve the health status and decrease the poverty levels of their countries, especially for widows.

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