

SOCIAL POLICY AS A PART OF QUALITY OF LIFE OF SENIORS

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Abstract

“To actually really enjoy the retirement, the most important thing we wish is to pass the years up to the old-age in a good health. And thereby we do not only mean to be fit physically but also our mind to be still fresh. How to achieve this?” (Rytmus života, p. 9, 2013). A quality of life with its variousness and unrepeatability is the multidimensional nature of the pillar and includes many attributes of the meaning of a life of person in each stage of his existence. The seniors and their problems are dealt by our Slovak Republic using existing legislation but also through the National programme for the protection of older people, which is based on the principles of the United Nations. The challenges of the United Nations was in 1999 accepted and processed in our country by the Government of the Slovak Republic National programme for the protection of older people. The program stems from the demographic development of the Slovak population, enshrines the necessary changes in the field of social security, education and health policy. Long-term complex policy strategy of the ageing population is contained in the Action plan. (Repková, 2000).

Keywords: seniors, the Slovak Republic, demographic developments, the quality of life, the meaning of life

In order to really enjoy the old age, we wish the most important thing - to reach the old age in good health. And we mean not only the physical part, but also our mind would still be fresh. How to do this? (Rhythm of the life, p. 9, 2013).

It is a fortune to see the advantages of old age in youth, and to maintain the advantages of youth in old age (J.W. Goethe).

Expression of the message and a deep thought marks that the demographic evolution of civilization is a problem on a global scale. The Documents of United Nations adopted the five principles for older people, and those are applied in the National programme for the protection of the elderly.

From the aspects of geriatric clients is aimed at:

- the principle of the independence interferes that seniors have the right to influence the quality of their life according to their liking. They need to have access to employment opportunities or have income, influence the pace of its withdrawal of labour, care, access to services and education, training opportunities, secure the surroundings, live at home as long as possible.
- the principle of participation - includes the possibility of knowledge, skills, and social activities, the setting up of movements and associations of the elderly,
- the principle of care - includes help and assistance to the family company, access to health, social, legal and other services and institutional care,
- the principle of self-development - envisages the creation of possibilities of the personal potential for full development of elderly people, in other words, access to education, cultural, spiritual and recreational needs that society offers,
- the principle of dignity – the problems of exploitation, physical and mental abuse of older people, decent treatment and value according to the economic benefits of the elderly (Juska, 2002).

“Based on the above principles have been developed conceptual plans in the individual sectoral competencies, which are in the National Programme for the protection of the elderly presented in formulated policies and principles in the areas

- social security and family policy,
- health care,
- education,
- cultural and media policy,
- transport,
- taxes and fees,
- post and telecommunications,
- security,

- judicial protection,
- economy,
- agriculture,
- the environment,
- information systems“ (Tomanová, 2000).

A corruption in the society plays a role as a negative factor, which is reflected in the population policy of the state. "There is no uniform view of the breakdown of corruption, as well as on the very definition of corruption" (Bočáková, 2012). With the quality of life is closely linked, in particular, the value of life, which is an internationally protected right to life as one of the fundamental human rights. "The General rights of elderly people are contained in the International Plan of action on ageing, adopted by the UN General Assembly in 1992 and the rights of the elderly are declared in the Charter of the rights of older persons (International Association of Gerontologists, 1997). Lastly, the World Health Organization (WHO) has set out in its document health for all in the 21st century, since in the 19th century, it became one of the main goals of healthy ageing. In this goal are contained requirements for healthy way of life in old age and the way of health care in the loss of health" (Poledníková et al., 2006).

If we look into the history of the origin of the concept of quality of life, we can conclude that the concept of quality of life, begins to use in the social sciences in second half of the 20th century. The first author, who used (in 1958) the concept of quality of life, is considered an American economist and sociologist Galbraith (in Tokárová, 2002). Establishing the Club of Rome in 1968 by the Italian entrepreneur Aurelio Peccei, the world community accepts the Club of Rome as an international organization bringing together eminent scientists, social factors. It is a major centre of global development forecasts in order to operate on public opinion and develop a dialogue with policymakers (Encyclopedia, Beliana, 2007).

Nowadays, we come across with the concept of quality of life very often, because it perceives the situation in various aspects of human life changes life in which has been launched. An important indicator of the quality of life of the elderly is going to retire from the psychological aspect, which can be described as "transit phase of a staged development of man." The quality of life of older people in preparation for entry into retirement is very difficult and individual survival (Balogová, 2003).

In ageing and old age, it is important for an individual to look for positive aspects and avoid the negative images of aging, leading to worries and fear.

It is necessary to bear in mind the differences between healthy and pathological aging

- expecting the old age affecting ageing
- an unpleasant symptoms become apparent among those who think that they have a lifetime behind
- healthier and full of energy, by contrast, those who do not think about the years, are active and believe that they still have a lot ahead (Balogová, 2005).

The great meaning, especially for elderly it carried by a meaningful leisure time. It is generally believed that seniors have enough free time that they can use as they wish. Even here, however, there may be two main limitations, health and opportunity to work. Some of them want to continue to do their job, they want to stay in a team The easiest way to spend free time is to have different hobbies and games, e. g various games, sports activities, and developing knowledge and skills. The great importance has, however, particularly in the elderly, the distraction on their own. It is mostly about listening to radio, watching television, handicrafts, solving puzzles. Category of social contacts in leisure time perception forms includes sporting activity, especially walking, swimming, hiking, dancing, cycling and other (Marcinková, 2005).

There are many problems the seniors have. One of them is free time, i. e the actual fulfillment, forms, ways of disposing of it. Seniors feel useless and alone by the right. They want to continue to use their wisdom, experience and enough time. Some of them that is why work as volunteers in humanitarian organizations. They work without pay, work itself is the reward. This is also the way, we can correct the errors of life. The work itself with them is difficult because they have health problems, are stubborn, resentful. This will further implemented, prove themselves and others that age is not an obstacle in life.

About which direction will the quality of human life go, especially the senior community, is largely decided by social policy. Krebs (2007) states that through social policy certain objectives are enforced which should be typical:

- observe the laws of social development, and should therefore be laid down in its intentions
- show the potential for future development, hence the possibility that the latent form may bring about certain changes in social policy,
- they are extently concretized, e.g. in terms of time, forms, ways of solving social problems, cost etc.

"The quality of life of the elderly is crucial the presence of a disease, but rather the degree of functional disability. Health is understood as the existence of the disease, but it is more about maintaining self-sufficiency

and well-being. Seniors evaluate it differently than younger generations, according to their health means the ability to enjoy the life (80%) and the ability to do what one wants (71%) (Vágnerová, 2007).

"Mental health is an indicator of psychological aging, which does not depend on age, but on the level of cognitive function. During the elderly begins the changing memory and intellectual abilities, but they can adapt and maintain intelligence through to old age. This group of indicators includes the self-assessment. There is a reassessment of his life, to the adoption of its borders, recognition of mistakes and errors.

It is a balancing period, in which seniors can lead to an increase or decrease self-assessment (Kasanová, 2008). "The level of independence - an important indicator of worse health status is affected by the accumulation of various functions that reduce their overall self-sufficiency. It is manifested by an inability to perform normal activities, provide the care adequately for themselves and their household. Reduction of self-sufficiency can lead to helplessness and dependency on assistance from other people (Vágnerová, 2007). According to Kavlach (2006) we recognize six levels of functional fitness and different needs:

"1 Elite seniors - handle extreme load size. They are proves that a person can be in good physical and mental condition in old age.

2 Prowess seniors – this group includes those ones who regularly deal with demanding physical activity, maintain a very good condition. Require the creation of conditions for their activities.

3 Independent seniors - we include here those who manage normal daily load are independent of family support and specialized services, but have relatively poor condition, which can result in stress situations.

4 Frail seniors - these people usually need help families, neighbours, or care services because they have trouble coping with challenging activities of daily life (cooking, shopping, cleaning). There is a possibility of decompensation of health and functional status.

5 Dependent seniors - have problems with basic daily activities (at meals, in the implementation of hygiene when moving). They need ongoing family or care services. They very often require institutional care.

6 Totally dependent seniors - usually permanently bedridden, require constant assistance, treatment and care. This category also includes people with advanced dementia syndrome and with severe mental abilities. Most of these seniors are placed in facilities residential institutions (in Hrozenková et al., 2008).

Social relationships - one of the important factors that are involved in maintaining or stabilizing the quality of life of seniors is social support. We understand it help that individual, group, community, or provide other actors. It can be characterized as active support and participation in solving difficult situations. Social support can have on people in difficult situations positive impact, can help in the overall standard guidelines and in social life. (Hrozenková et al., 2008).

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Social support Křivohlavý (2001) characterizes as an aid to man contained in stressful situations other people. We distinguish the following types of social support:

- IT support - is the basis for the provision of information, advice to persons situated in distress,
- instrumental support - a particular form of assistance, such as loan funds, assistance with urgent official matters
- assessment support - esteem and respect for another person. (in Ondrušová et al., 2009).

Environment - most of the indicators that fall into this category is the responsibility of the state to begin to share some of the non-governmental organizations. The quality of life also operates its own secure life satisfying material needs in particular. One of the most discussed issues is access to finance (Kasanová, 2008).

Material security - Old age is a major social change for humans, is associated with the end of her active social life and retirement. By this one loses social status, but also income which he had by his work activities and to which he was accustomed.

According to Article 39 paragraph 1 of the Constitution of the Slovak Republic all citizens SR guarantee social rights - the right to adequate security in old age and incapacity to work, as well as the loss of breadwinner. These social rights are implemented social security system, which comprises:

- 1 Social insurance
- 2 State social support
- 3 Social assistance (Matlák et al., 2009).

The role of social insurance is also to insecure the income in old age. Prerequisite for the implementation is the previous economic activity of citizens and thus contribute to the social insurance system. It is a system of merit, ie the amount of insurance benefits will be paid in respect of adequate funds into the system (Hrozenková et al., 2008).

Old age, in the implied dimension is then characterized as a social event, because it occurs due to loss of income. Lost income substituted benefits of a pension scheme, namely retirement and early retirement. Pension insurance system consists of:

1st Pillar - ongoing - diverting money into it both employees and employers, where eventually the state as well, it is used to pay benefits to current pensioners

2nd Pillar - capitalization - managed by pensioners management companies which recover the money

3rd Pillar - supplementary pension plan - is voluntary (Botek, 2009).

By course of law no. 461/2003 Z.z. social insurance is a part of social insurance and pension insurance, namely old-age insurance as insurance income security in old age and death:

Retirement pension – insured person is eligible if:

- the pension insurance has lasted at least 15 years,
- reached retirement age under the law - 62 years of age.

Early-retirement pension – insured person must satisfy the following conditions

- the pension insurance at least 15 years,
- until reaching retirement age, it lacks more than two years,
- early retirement pension amount is bigger than 1.2 times the subsistence minimum

Widow's, widower's pensions - widow or widower is entitled after her husband, who:

- was a pension recipient of old-age pension, early retirement or disability pension - the day of death,
- fulfilled all requirements for demand of old-age pension- by the day of death,
- died as a result of an accident at work or occupational disease.

As reported by Kasanová (2008) majority of old people by exclusion from the labor market is on the edge of poverty. Pensions, which are lower than wages, lead to a decline of living standards and thus reducing the quality of life. In old age greater share of income is spent on basic necessities such as food, clothing, housing, energy, health care, but also for household and personal care. The need for these services is growing, while the ability to pay for them decreases. Other factors causing the decline in living standards in old age include:

- loss of physical and mental forces restricting the ability of seniors to remain in the labor market and in retirement,
- limit the ability of seniors to offset incomes shortfalls,
- loss of the benefits of social services, reduction of social contacts and loss of social status,
- decrease adaptability, ability to formulate and monitor the effective life strategy.

The worldwide trend is forcing the company to change the image of looking at the elderly. No need to be ruled out of the learning process, because becomes a means of personal development. University of the Third Age is clearly a source of optimism, satisfaction, environmental enthusiasm, overall flexibility. Senior education also leads to improved health. Habarová (1996) gives the following reasons:

- university of the third age offers education in various fields of life, there are senior learns many new things
- receiving of knowledge leads the listener to an individual educational activity, education is to maintain self-sufficiency, maintain social contacts,
- education positively affects self-image, self-esteem and personal experience the value of an older man,
- the increasing broadened outlook can positively influence the mindset of its surroundings,
- university of the third age contributes to the positive integration of personality (in Štefko, 2003).

"Education of seniors is one means of delaying aging and its full sense of fulfilling activities. Education is not only acquiring certain knowledge, but also a means of finding a way, way of life, exploring the possibilities and necessity in life živote (Odlerová, Tokovovská, 2011).

Educational needs of seniors are very diverse. They lead to personal growth of individuals and knowledge gained by studying help these people deal with existential questions, find new philosophy of life and at the same time increase their social activity (Marcinková, 2005). "In Slovakia we have thirteen universities of the third age. The lower age limit students varies from 40 or 50 years. The greatest interest is in art history, general history, psychology, recovery of psychophysical forces seniors, computers, law, or foreign languages. The disadvantage is that URA in Slovakia do not receive any financial support and its activities are carried out only by contributions from students. This example reflects the long waiting period for the study (Čornaničová, 1998).

According to Strieženec (1999) social policy is: "a certain intersection of policy objectives, economic reality, human, ethical, moral principles and principles, visions and actions. Examines and generalizes social activities as a social phenomenon is thought base that is used and recommended operators can practice in decision-making" (In Oláh et al, 2009). Instruments of social policy in our country, affecting the elderly are particularly pension contributions, benefits in material need assistance, contributions to compensate severe health insurance and social services. Of course, social policy also affects housing issues, education, access to services and other areas of everyday life, thus the active participation of individuals.

State in terms of its social policy must reckon with the fact that its job is to ensure the flow of funds that are necessary to implement and invest. A key object is still human. Social policy defined by Bolek (2009) is "plan social activities or specific activity using available tools towards positive social effect or to prevent the occurrence of negative social effects." The basic concept of social policy is social security law. Social policy

objectives correspond to social work, because the target is the focus of social work, individual, group and community and social phenomena that affect these entities. Matter of social policy according to Tomes (2010) is moreover social solidarity shown by the fact that protecting someone from something, or that we give something to someone, enable, support him in something or we do something for someone. "Word opens, fact acts". The indicated direction of human action, "I'm a man, and nothing human is alien to me", such as social services are a set of activities that are aimed at addressing the adverse social situations, helping people lead independent lives, promote their integration into society, ensuring the necessary conditions for meeting basic needs, responding to crisis situations and prevent social exclusion. Social services are provided outpatient, outreach, tourist or other form under unfavourable social situation and environment in which the client is social. By course of law no. 448/2008 Z.z. on social services, social services are provided primarily through social work. Many authors point to the conceptualization itself as social work services, which is closely related to the specifications of the professionalization process in this area.

One has every right to allow him to retain its natural space, because it is perceived as an individual and at the same time it must be accepted by the society. This interdependence is closely linked with the issue of constitution and human rights. Structure of human rights is of profound importance of social policy, is the core of social rights, which is understood as the individual's right to carry state powers. They guarantee the safety of basic material and spiritual needs of man, a citizen. The paradox is that social policy is faced with many problems in the interpretation and application, but also in social rights of man. The reason is the absence of "missing fundamental concept of human nature and requirements arising there from, in particular the respect of human dignity and freedom and equality among people (Spiazzi, 1997). The reality is that it requires necessarily align socio-political intentions and actions with the way it works, the main objective is the phenomenon of man. The socio-economic as well as social-legal protection of the elderly includes informing seniors about their civil and social rights, the orientation of the elderly in the control mechanisms, human rights, aid to seek, respect for human rights. For developed democratic and law-abiding society should not be missing as one of the responsibilities, concern for endangered and vulnerable populations while ensuring their human rights.

Pronzata (2006) emphasizes: "the future belongs to older people. This shall not only still a bit more space it occupies on this ravaged country, nor is it a question of statistical and non-personal information. Old people are healthy carriers of values that are lost. Are the owners of wisdom desperately needed. It would be about time that we stop talking about old age only in terms of social costs."

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