

Managing the Social Care Services Development in the Ageing Society

The article analyzes the development of social care services for the elderly in Lithuania considering ageing peculiarities in municipalities and discusses the involvement of different sectors in the provision of social care services for the elderly.

Keywords: ageing, social service development.

Straipsnyje analizuojama socialinių paslaugų plėtra Lietuvoje atsižvelgiant į gyventojų senėjimo ypatumus savivaldybėse. Diskutuojama apie skirtingų sektorių dalyvavimą organizuojant socialines paslaugas vyresnio amžiaus žmonėms.

Raktiniai žodžiai: visuomenės senėjimas, socialinės paslaugų plėtra.

Introduction

Lithuania as well as other European countries faces demographic problems: population ageing refers to an entire age structure becoming older. The structure of population is the result of three basic processes: fertility, mortality and migration. It is commonly agreed that the rapid increase of older generations (and especially of the number of the oldest age cohorts) substantially changes the socio-demographic structure of society as well as the systems of production and consumption. The global transformation of the population age composition poses challenges to spheres

of population life in respect of maintaining the financial sustainability of the system, the balanced development of high quality and affordable services.

The issues for ageing society are discussed both in Lithuania and in EU in order to find out common principles and methods how to manage the challenges and outcomes in different countries. One of the impacts for the aging society is changes in the system of social care services because the need for this type of services will increase in the future.

The ageing could be characterized in particular aspects: age (two subgroups: age 60-80; age over 80), gender (excess of

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women over men in the older population); territorial aspects (the rural population is older than the urban population). These aspects could determine the directions, methods and principles for development of social care services in the aging society. The elderly, as the users of long-term care services, are not a homogeneous group considering social and physical independence of a person. This criterion is one of the most important in determining the need of long-term care services for a person. Long-term care is personal assistance that enables impaired people to perform daily routines; such services may be provided at home as home and community-based services or in institutional settings. In Lithuania the major part of social care services are provided in institutions despite of their expensiveness. The need of the institutional care is not fulfilled because only two third of the elderly, who needs long-term care, become the clients of these services year by year. Day care services (community-based) are in the stage of initial development. Issues of ageing refers to the growing need of long-term services, but the financial possibilities to organize and provide social care services are not going to grow so fast in the future. The problem of supply and demand could be solved by involving into the system different providers of social care services.

The main responsibility for the social care organization lies on municipalities. There are four types of social care services providers: state (and municipality), NGO, private providers and informal providers (family or other relatives and neighbors). The state and municipalities are the dominant providers of the social care services for the elderly, whereas there are few NGO and private providers of social

services. According to the age aspect every municipality also could be characterized by the different level of population ageing. Considering this situation we can find out the “oldest” and the “youngest” municipalities.

The development of social care services is determined by financing, law issues, inadequate participation of different social services providers, particularities of ageing process and different practice of social care services organization in municipalities.

The object of the research is the social care services development directions for the elderly.

The aim of the research is: 1) to determine the development of social care services directions for the elderly in Lithuania considering inequality of the ageing process, territorial aspects; 2) to evaluate the participation possibilities of different social services providers in the system.

The objectives of the research are as follows:

- To analyze the peculiarities of ageing in different municipalities in Lithuania.
- To discuss the peculiarities of social care services development for the elderly in different municipalities.
- To determine the directions of social care services development for the elderly.

Population ageing in Lithuania: dynamics and peculiarities in municipalities

Population ageing refers to an entire age structure becoming older. The structure of population is the result of three basic

processes: fertility, mortality and migration. When the processes are constant for many years, a stable age structure emerges. Changes in fertility, mortality or migration produce immediate changes in the population structure, as well as they have long term-effect. Age structures, therefore, reflect current patterns of fertility, mortality and migration as well as the effect of these processes in the past (Grigsby, 1999). Societies are described as “old societies” when 12 percent of population are persons of 60 years age and older (Kanopienė, 2008).

Population ageing was one of the main distinctive features of Lithuanian demographic development at the end of the XX century and at the beginning of the XXI century (Figure 1.)

In 1959, persons aged 60 and older made 12 %, whereas persons in the age subgroup of 0-14 made 27 %; in 1990, persons aged 60 and older made 16 %, whereas persons aged from 0 to14 years

made 23 %; and in 2008, persons aged 60 years and older made 21 %, whereas persons in the age group of 0-14 made 15 %. Population age structure in Lithuania has been constantly becoming older: in the age group of 15-59 years, the population has slightly ranged from 61% to 64%; the proportion of children's total population in 1959-2008 decreased by twelve percentage points (from 27% in 1959 to 15% in 2008); people of 60 years old and older part of the total population in that period increased by nine percentage points (from 12% in 1959 to 21% percent in 2008). Thus the proportion of the young and the old generation turned upside down and Lithuania became a mature society. According to the projections of the population aging it is clear that in 2050 one third (36%) of the population in Lithuania will be persons aged 60 years and over. Demographers maintain that population aging will be continued in the next forty years (Stankūnienė,

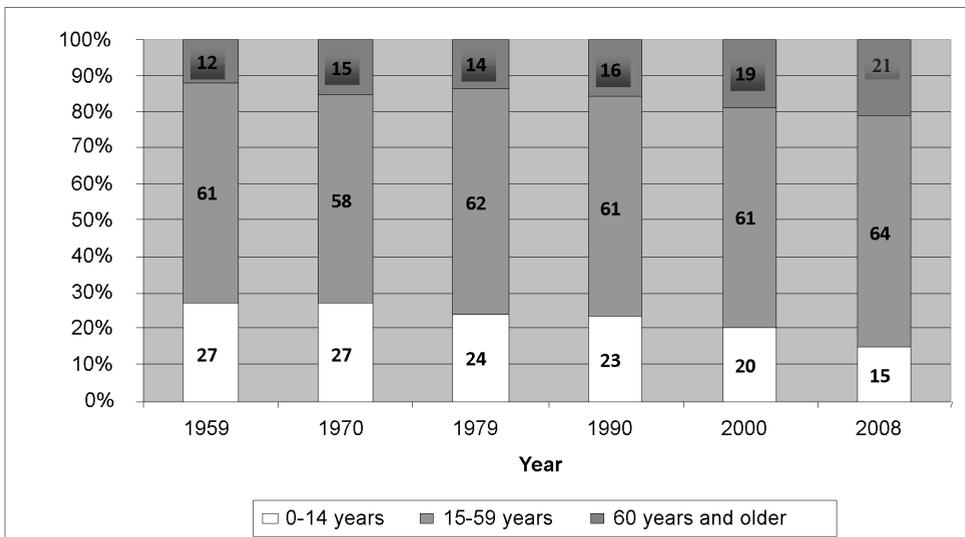


Fig. 1. Population age structure in Lithuania during 1959-2008, %

Jasilionis, Mikulioniene, Sipaviciene, 2007).

Population ageing process in Lithuania is mainly predetermined by the reducing birth rate (Stankūnienė, 2002). Despite the unfavorable death rates in the country, it could be stated that population ageing is also supported by the reducing death rate of the elderly. In the last decade of the XX century, the mean of the expected lifetime of people aged 65 and over and 80 and over lengthened almost by a year (Jasilionis, 2002; Mikulioniene, Stanaitis, 2007). Mass emigration of Lithuania's population in the last decade of the XXth century and at the beginning of the XXIst century also played a certain role in speeding up the population ageing. As emigrants are usually young employable people, it is credible that their emigration contributed to the ageing of the demographic structure of the remaining population (Mikulioniene, Stanaitis, 2007).

In conclusion it is necessary to point that at the present moment (at the joint of the 20th -21st centuries) in Lithuania, the level of ageing reached such a magnitude that the elderly form a bigger part of the population in comparison with the children: 60 years and older population number (21%) exceed the number of children under 14 years (15%).

The aging could be characterized in particular aspects: age (two subgroups: age of 60-80; age over 80), gender (excess of women over men in older population); territorial aspects (the rural population is older than the urban population).

Most persons of 60-65 years old are already leaving labor market, but they are still active enough and able to take care about their selves. The possibilities to ensure physical, social security of persons aged 80 and older are limited and they

need more variety of services, for example both social and health care. Formal and informal support becomes important in the life of the elderly, because significantly decreasing their independence increases the need for stationary care.

S. Mikulioniene and S. Stanaitis (2007) state that some Lithuanian cities are famous for the considerably different proportion of aged if compared with the total mean value of Lithuania's cities: the highest number of aged people is characteristic in small and very small towns. The average-size Lithuanian cities lose their position against demographically younger cities. The unevenness of demographic ageing in rural municipalities is even more contrasting. One third of rural residents are older than 60 years. These aspects are important considering planning and organizing of the social service system for the elderly in Lithuania.

According to the proportion of age we can identify demographically the oldest and the youngest municipalities in Lithuania. The oldest municipalities are the following districts municipalities: Birzai (24,4 %), Rokiskis (24,8 %), Lazdijai (26,12 %), Prienai (24 %), Ignalina (28,7 %), Moletai (25,7 %), Zarasai (25,8 %), Svencionys (24, %), Alytus (26,4); whereas the youngest municipalities are those of Alytus town (15 %), Jonava district (17,1%), Visaginas, Neringa (14,5%), Vilnius town (17,3 %) and Vilnius district (16,4 %) municipalities.

As we can see from Figures 2 and 3, the demographically old and young municipalities differ from each other by the proportion of the elderly compared to the whole population of municipalities. It is interesting that in the age group under 15 years old the population slightly ranged from 13,3 % to 18,8 % in demographically

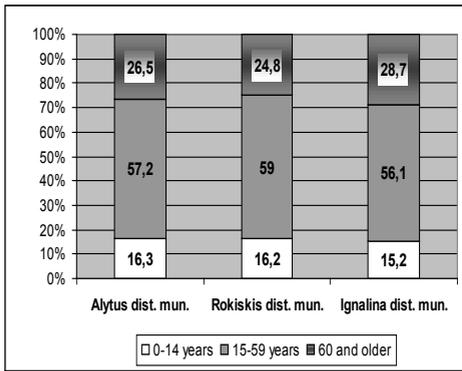


Fig. 3. Age structure in demographically youngest municipalities in 2008

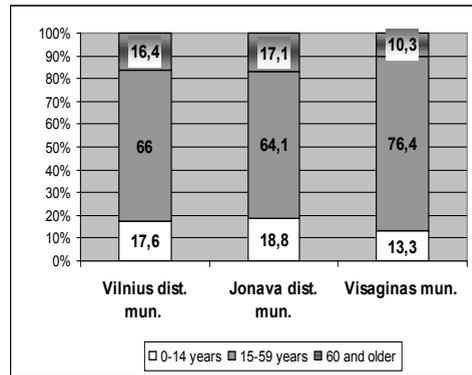


Fig. 2. Age structure in demographically oldest municipalities in 2008

Source: Department of Statistics to the Government of the Republic of Lithuania, 2009.

old and young municipalities. That is why the part of economically active and working people is bigger in young municipalities; it differs in about 20 percentage points.

These peculiarities of ageing in the youngest and the oldest municipalities are relevant to planning and management of social care development (both institutional and community care).

Social care services for the elderly in different municipalities

Population aging is changing fundamentally not only the demographic and social structure of production, but also the consumption and distribution systems, the settlement of social infrastructure. Ageing determines the following challenges: 1) Economic system (ageing of labor market, changes of incomes and savings, changes of new consumer behavior models, 2) Education system (longer working life, increasing value of lifelong learning; 3) Social security (social insurance and support systems adaptation to

new needs of the elderly and new funding opportunities), 4) Health care (prevention treatment, care and long-term care services in balanced development, 5) Human ecology (meeting the needs of housing, environment, human settlements infrastructure, transport), 6) Changes of the concept of the elderly, aging, status (Kanopiene, Mikulioniene, 2006(a), 2006(b)).

The system of social services for the elderly is one of the areas, which is influencing the ageing process. Social services include service providing, assistance to individuals or families, who because of age, disability or social problems are partially or fully unable, do not have or have lost the ability or possibilities to take care individually of his/her personal or family life and participate in public life. The purpose of social services is to create conditions for a person or a family to develop or strengthen the ability and possibilities to solve social problems, maintain social relations with society and to help overcome social exclusion (Socialinių paslaugų įstatymas, 2006).

There are two types of social services for the elderly in Lithuania: community-

based services and institutional services. Community-based social services allow many individuals in need of long-term care to remain in their own homes or live with their families, reducing the need for them to use institutional care. Community-based social services include home care, housekeeping services, home health aid, personal care, nursing, day care, home delivered meals. If a certain person is in need of social services, so they could be provided in a certain agency of social services or a person could receive necessary services at home (Socialinių paslaugų įstatymas, 2006).

Institutional care services are described as long-term services, which are provided for a person in the social services agency. The need of social care services for the elderly is increasing because increases life facilities. L. Žalimienė (2002) maintains that long-term nursing care becomes the issue of modern social policy. Long-term care for people at the age of 80 and over is particularly relevant as they can no longer independently perform many functions of daily life. H. Stoddart and others (2002) argue that the need of services is determined by the person's health and social relationships with relatives, friends or neighbors, who provide informal help, though this kind of help is becoming scarce.

Thereby, social services may be provided both at social service institutions (social care centers, day centers for social care, community institutions) and at home. These types of services could be characterized as long term care.

In Lithuania the major part of social care services (57 % of all receivers) is provided at institutions despite of their expensiveness. In the report of the Ministry of Social Security and Labour (Socialinis praneimas 2007-2008, 2008) there is

stated that a number of institutional social services receivers has decreased about 12% in the recent years, because more and more persons receive social services at home or at day care centers. But persons aged 60 years and over make only 20 % of such social services receivers as day care services (community-based) are in the stage of their initial development. One more important fact explaining why the need of institutional care is not fulfilled is that only two third of the elderly, who need long-term care, become the clients of these services every year.

The elderly, as users of long-term care services, are not a homogeneous group considering social and physical independence of a person. This criterion is one of the most important in determining the need of a long-term care services for a person. Long term care is personal assistance that enables impaired people to perform daily routines; such services may be provided at home, through home and community-based services or in institutional settings. Both home health care and social services are required due to increasing percentage of the elderly. In 2004, assistance and home nursing were provided to 7400 retired persons, but in 2008, the number of receivers, retired persons increased to 9035. 550 persons (in 2004 – 890) who had organized the services by themselves due to objective reasons, additionally received care benefits.

The experience of the European Union member states shows that in order to ensure conditions for elderly people to live as long as possible in their homes, the services must be integrated (home care, home nursing, medical services, and meals on wheels). The system of community nursing has not been sufficiently developed in our country. Social and nursing services are closely related. The need for nursing

Table 1

Social care providers for the elderly in Lithuania

	2001	2002	2003	2004	2005	2006	2007	2008
All social care services providers	94	94	94	95	97	100	101	104
County social care services providers	8	8	7	7	8	8	8	8
Municipalities social care services providers	52	53	54	55	55	55	55	56
Other social care services providers	3	3	3	3	2	2	3	5
NGO and parish social care services providers	30	30	30	30	32	35	35	35

Source: Department of Statistics to the Government of the Republic of Lithuania, 2009.

services as well as the need for social services increases.

The main responsibility for the organization of social care lies on municipalities. Municipalities are the main organizers of social service provision for the elderly. They evaluate and analyze people's needs for social services, forecast and establish the scope and types of social services according to the people's needs, as well as evaluate and establish the budget of social services. County governors establish,

reorganize or close down social service institutions of regional importance and also ensure their operation, develop and implement social service programs and projects in the county.

The state and municipalities are the dominant providers of social care services for the elderly, whereas NGO and private providers make the smallest part in the structure of social services providers (Table 1).

We can also maintain another type

Table 2

Number of receivers of social and health care services at home in demographically young and old municipalities, 2007

	Alytus district m.	Rokiskis district m.	Ignalina district m..	Vilnius district m.	Jonava district m.	Visaginas district m.
Social and health care at home for the elderly and children with disability	37 (38) ¹	49 (34)	57 (86)	91 (90)	(174) 82	(77) 81
Social care benefit	(...) 4	81 (40)	9 (11)	...	(...) 21	...
Social care in institution	3	1	2	1	1	1
Receivers of institutional social care services	65	37	77	129	78	23

Source: Department of Statistics to the Government of the Republic of Lithuania, 2009.

¹ In the brackets data of 2003, ... - no data.

of services providers – informal – family and neighbors. This type of providers is important if the supply of services, provided by the social services agencies is not sufficient, when there lacks a social services network.

The development of social care services is determined by financing, law issues, and inadequate participation of different social services providers, particularities of ageing process and different practice of organizing social care services in municipalities.

As we have already characterized demographically the youngest and the oldest municipalities in Lithuania, further there could be analyzed the peculiarities of social services development for the elderly.

As we can see in Table 2, the number of receivers of social services and nursing services at home during four years decreased in Alytus district and Rokiskis district municipalities. But in fact, these municipalities are described as demographically “old municipalities”. So we can suppose that the need for social care services at home for the elderly is only ascending. Talking of it, as it is shown in Table 2, these receivers of social services at home are not only the elderly, but also persons with disabilities. We can also suppose that the real number of elderly people, who receive social care services at home, is less. Jonava district could be described demographically as a young municipality and the number of care receivers decreased twice during four years. So the question is: why the number of receivers is increasing while the needs are decreasing? Does it mean that informal providers (family, neighbors, volunteers and others) are very active and the municipalities’ support is not necessary, or maybe, the possibilities of municipalities to meet the needs of the elderly are getting

limited because of scarce financing? These questions emerge by analyzing the reports (financial and others), or strategies of these municipalities, but the authors of the paper could not get enough data for a comprehensive analysis.

Of course, we can see (Table 2), that in other municipalities the number of social and health care receivers at home increased and it could be explained by the process of ageing.

Developing social care services for the elderly

The growing number of elderly people in particular has raised the social care system funding issues, even in economically strong foreign countries. Population ageing causes the growth of social, psychological and health needs, whereas financial possibilities to meet these needs are decreasing (due to decreasing labor force, etc.) (Lorenz, 2006). Dealing with the issues of aging, the population policy in Lithuania has to be more active. The principles of the elderly employment have to be clearer. The development of state social services for ensuring the needs has to manage demographic processes in order to change the population of reproductive behavior.

Both the municipality and NGO are providing social services and deal with the lack of financial resources. The report of Social Security and Labor Ministry (2006-2008) shows that the expenditures for providing social services represent 2,05 % of the total municipal budget; in some municipalities it is ranging from 0,05 % up to 7,27 %. Therefore, the possible emergence of private service providers can point out the solution for the limited municipal

long-term social care funding – co-operation of municipal and private providers.

One of the key issues is: how to manage social service needs so that they meet the needs of the elderly. One possible way out is the emergence of new forms of providers, i.e. the public and private sector cooperation in the provision of social services for the elderly.

Growing resource constraints have increased the need for or willingness of organizations to work together. Public private partnerships are forming so that to develop the community infrastructure for assessment, planning and evaluation of community's health needs and to integrate human health services into a collaborative planning (Bazzoli, 1997).

Currently, in Europe there is a focus on the mixed market, social services, the organization and provision of social services to participate in the public, private and third sector (NGO) organizations. G. J. Bazzoli et al. (1997), L. Žalimienė (2006), S. H. Kerrison and M. A. Poolock (2001) argue that the creation of the social services market determines the public sector's social service agencies to increase their production and economic efficiency, to transfer more tasks to private actors. G. J. Bazzoli et al. (1997) argues that public-private partnership can be formed to develop local community services infrastructure: assessing the needs of recipients of services, planning services, or even joining the health care and social services into a unit. The author argues that the possible cooperation of two types: 1) public-and private-sector union, the emphasis on service planning and organization of health services, 2) service networks, where different service providers in collaboration aims to coordinate and provide services while maintaining their continuity. Social services and nursing services

are relevant, since the needs of elderly are determined of personal health (Schneider, Kropf, 1992; Stoddart, 2002).

Researchers (Žalimienė, 2006; Coulshed, Mullender, Jones, Thompson, 2006; Lewis, Lewis, Souflee, 1991) discussed about issues of managing social services. These issues can be recognized as principles to manage the developing of social services in aging societies:

- Requirements for social services: the quality requirements, the service matching (services oriented to the needs of recipients of services, access to services system);
- Change social service agencies to the organization, more attention is paid to the management, help to achieve better results at lower costs;
- The idea of a mixed market in which all services and all service providers – government agencies, non-governmental organizations, the private sector – act in accordance with uniform rules and are a subject to a uniform requirement.

Issues of aging refer to the growing need of long-term services, but the financial possibilities to organize and provide social care services will not grow so fast in the future. The problem of supply and demand could be solved by meeting different providers of social care services. We can discuss about new providers of social services – a social business (social enterprise) organization. It is a hybrid organization not established by the municipality and is not subordinate to it. This is not a pure business, because the basic goal – profit – is the implementation of social objectives, it is not a NGO. Social business is business, which primarily has social objectives and the generated profits are not shared by owners or founders, but invested in the further implementation of the objectives

required to meet the needs of the community (Alter, 2007, Nyssa et al., 2008). K. Alter (2007) states that the social enterprise is defined as any business venture created for a social purpose– mitigating/reducing a social problem or a market failure–and to generate social value while operating with the financial discipline, innovation and determination of a private sector business. Social enterprises use entrepreneurship, innovation and market approaches to create social value and change; they usually share the following characteristics:

- **Social Purpose** – created to generate social impact and change by solving a social problem or market failure;
- **Enterprise Approach** – uses business vehicles, entrepreneurship, innovation, market approaches, strategic-orientation, discipline and determination of a for-profit business;
- **Social Ownership** – with a focus on public good and stewardship, although not necessarily reflected in the legal structure.

In summary we can say that municipalities in Lithuanian have to discuss about the possibilities to create the partnership with private sector in order to organize the social services for elderly. Social enterprise (social business) will be new form of organizations in the system of social services.

Conclusions

Ageing could be characterized in particular aspects: age (two subgroups: age 60-80; age over 80), gender (excess of the woman over men in older population); territorial aspects (rural population is older than urban population, demographically young and old municipalities). These aspects

could determine the directions, methods and principles to develop the social care services in aging society.

According to the proportion of age we can identify the oldest and the youngest municipalities in Lithuania. The average-size Lithuanian cities occupied the position of demographically youngest cities. The unevenness of demographic ageing in rural municipalities is even more contrasting. These aspects are important considering the planning and organizing social service system for elderly in Lithuania.

The elderly, as the users of long-term care services, are not homogeneous group considering social and physical independence of a person. This criteria is one of the most important determine the need of a long-term care services for a person. Long term care is personal assistance that enables impaired people to perform daily routines; such services may be provided at home, through home and community-based services or in institutional settings.

In Lithuania the major part of social care services is provided in institutions despite of their expensiveness. The need of the institutional care is not fulfilled. Day care services (community-based) are in the stage of initial development. Issues of aging refers to the growing need of long-term services, but the financial possibilities to organize and provide social care services will not grow so fast in the future. The problem of supply and demand could be meeting by different providers of social care services.

Public-private partnership can be formed to develop local community services infrastructure: assessing the needs of recipients of services, planning services, or even joining the health care and social services into a single whole.

Social business is one of the opportunities to develop the infrastructure of social

services for elderly. It is new form of organizations in the system of social services, where social and profit goals have to be combining. The municipalities in Lithuania have to discuss about the possibilities to

create the partnership with a private sector in order to organize the social services for the elderly. A social enterprise (social business) will be a new form of organizations in the system of social services.

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SOCIALINIŲ PASLAUGŲ PLĖTRA VISUOMENĖS SENĖJIMO KONTEKSTE

S a n t r a u k a

Visuomenės senėjimo klausimai yra analizuojami tiek Lietuvoje, tiek kitose Europos Sąjungos šalyse, siekiant nustatyti bendrus principus ir metodus, kaip valdyti šio reiškinio sukeltus padarinius skirtingose šalyse. Visuomenės senėjimas, kurį sąlygoja įvairūs demografiniai, socialiniai, ekonominiai ir kultūriniai veiksniai, reikalauja vis didesnio dėmesio organizuojant socialinę paramą vyresnio amžiaus žmonėms, ypač akcentuojant socialinių paslaugų sistemas, apimančios bendruomeninių ir stacionarių socialinės globos paslaugų, plėtrą.

Vyresnio amžiaus žmonių grupė pasižymi tam tikrais netolygumais: amžiaus (yra išskiriami du pogrupiai nuo 60 m. iki 80 m. ir vyresni nei 80 metų), lyties (moterų populiacijos demografinės senatvės lygis dvigubai aukštesnis nei vyrų); teritoriniai aspektai (kaimo gyventojų demografinės senatvės lygis yra aukštesnis nei miesto gyventojų). Įvardinti visuomenės senėjimo ypatumai gali sąlygoti socialinių paslaugų plėtros kryptis bei principus vyresnio amžiaus žmonėms.

Vyresnio amžiaus žmonės, kaip socialinių paslaugų vartotojai, pasižymi skirtingais poreikiais, atsižvelgiant į jų socialinį ir fizinį savarankiškumą. Šis kriterijus yra vienas svarbiausių nustatant ilgalaikės globos paslaugas vyresnio amžiaus žmonėms. Ilgalaikės socialinės globos paslaugos senyvo amžiaus asmenims – tai intensyvus, nuolatinės specialistų priežiūros reikalaujantis kompleksinis paslaugų teikimas asmeniui socialinių paslaugų įstaigoje (stacionarioje/nestacionarioje) arba namuose. Lietuvoje socialinės globos paslaugos daugiausiai yra teikiamos stacionariose globos įstaigose, kurių skaičius pastaraisiais metais auga, nepaisant šių paslaugų brangumo. Kita vertus, šių paslaugų poreikis vis tik nėra patenkinamas, kadangi beveik du trečdaliai pageidaujančių gauti tokio tipo paslaugas yra apgyvendinami globos namuose. Lietuvoje vyresnio amžiaus žmonių dienos socialinės globos centrai dar tik kuriasi.

Visuomenei senėjant auga socialinių paslaugų (pagalbos į namus ir socialinės globos, slaugos paslaugų) poreikis vyresnio amžiaus žmonėms, tačiau finansinės galimybės užtikrinčios socialinių paslaugų teikimą ateityje mažai tikėtina, kad didės. Paklauskos ir pasiūlos problema gali būti sprendžiama įtraukiant skirtingus sektorius į socialinių paslaugų teikimą.

Pagrindinė atsakomybė už socialinės paramos organizavimą tenka savivaldybėms. Galima būtų įvardinti keturis socialinių paslaugų teikėjų tipus: valstybinės (savivaldybių) įstaigos, nevyriausybinės organizacijos, privačios įmonės ir neformalus teikėjai (šeimos nariai ar kiti artimieji, kaimynai). Šiuo metu dominuojantys socialinių paslaugų teikėjai yra savivaldybių įsteigtos įstaigos, tuo tarpu nevyriausybinės organizacijos bei privačios įmonės sudaro nedidelę dalį bendroje socialinių paslaugų teikėjų struktūroje. Atsižvelgiant į visuomenės senėjimo ypatumus bei senatvės lygį, savivaldybes galima suskirstyti į demografiškai „jaunas“ ir „senas“ savivaldybes. Socialinės globos paslaugų plėtrą sąlygoja teisinės aplinkos kūrimas, finansavimo problemos, skirtingų paslaugų teikėjų nepakankamas dalyvavimas paslaugų rinkoje, gyventojų senėjimo ypatumai skirtingose savivaldybėse.

Straipsnio objektas: socialinių paslaugų plėtra.

Straipsnio tikslas: nustatyti socialinių paslaugų plėtros kryptis vyresnio amžiaus žmonėms Lietuvoje, atsižvelgiant į senėjimo proceso netolygumus teritoriniu aspektu bei įvertinti skirtingų sektorių dalyvavimą teikiant socialines paslaugas.

Uždaviniai:

- Išanalizuoti gyventojų senėjimo ypatumus skirtingose savivaldybėse.
- Apibūdinti socialinių paslaugų organizavimo ypatumus vyresnio amžiaus žmonėms skirtingose savivaldybėse.
- Nustatyti socialinių paslaugų vyresnio amžiaus žmonėms plėtros galimybes.