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SOCIAL SERVICES FOR ELDERLY PERSONS

Abstract

The ongoing demographic changes such as an increase of number of elderly persons, extension of the life expectancy, impose specific requirements in the area of social protection. Fulfilment of elderly people needs requires additional financial resources for their social and financial security, health protection, communication and social engagement.

The analysis of services for the elderly involves a wide range in grouping such as: services for information and referral, professional assistance and support, counselling services, services at home, services in community and out-of-home services.

Social services that are intended for the elderly are designed to maintain the autonomy and independent living of elderly in order for them to be independent from the system that is providing social services.

Keywords: elderly persons, social services, service providers.

Introduction

Aging is a process, whereas old age is a product of that process. At the first stage of old age, the elderly people are still mobile and able to satisfy their own needs and even help other members of their families, fulfilling their leisure time with a variety of activities. As they get older, functions of their body are declining, health issues and chronic diseases are more frequent, especially after the seventies, destructive changes gradually emerge, restricting their movement and changing their needs that increase the need for social intervention by professionals.

Pathological aging, on the other hand, can occur much earlier, and even in younger people, it can cause aging, imposing a growing need for social services. Elderly people become dependent on social systems to provide the material, emotional and spiritual resources as well as possibilities needed to fulfil their aspirations and meet their tasks.

The concept of life tasks has been analysed by Harriet M. Bartlett (1970) and is presented as a way to describe the requirements made by the elderly through different life situations, such as:

- Daily living (food, home, general and personal hygiene, health care);
- Traumatic situations (such as loss, illness); and
- Financial difficulties (lack of resources, insufficient resources, difficulties in obtaining).

By using the systematic approach in the analysis of the whole, the elderly person in the environment where he/she lives, accepting the premise that the whole differs from the sum of its parts, and the elderly person is viewed as part of the system, affecting the other parts, but also depends on one's environment (Dimitrijoska S., 2002).

Living in a world characterized by an aging population requires, above all, recognition and appreciation of the elderly, combating prejudice against the elderly, providing conditions for the elderly to be active participants in the development process, providing adequate health and social protection, as well as promoting intergenerational solidarity.

1. Reforms in the system of providing social services for elderly persons

In this context, the Republic of North Macedonia has made strong efforts in analysing the legal and by-law bases, through debates and a series of activities prior to the adoption of the new Law on Social Protection (Official Gazette of the Republic of North Macedonia No. 104/19), as a basis for creating conditions for better quality services that will satisfy the individual needs of the elderly. Applying of the new more human dimensions in the development of social services highlight the need for a greater number of social service providers in the local community and the possibility of combining and inclusion of all organizations and institutions as well as social

service providers in the area of local self-government in order to provide services that will contribute in overcoming social problems of elderly persons. This enables elderly persons to improve the quality of life, to satisfy the needs and continue to live in their own home and community.

Reforms enable the possibility of providing social services by citizens' associations that according to Article 127 of the Law on Social Protection (Official Gazette of Republic of North Macedonia no. 104/19) can be providers of social services. Increasing the number of licensed and authorized providers of social services, linking health and social service providers, should enable a more comprehensive approach to problems and needs of the elderly.

Given the complexity of the aging process, and the needs of elderly that have to meet, that is, the support they need to receive from professionals working in the field of social intervention with the elderly, implies the need to strengthen the professional capacity that are available in the local communities.

The segment of decentralization of social services enables inclusion of different actors in the field of social service provision. In developed countries and countries in transition services for elderly are not just provided by state, public institutions, but by citizen's organizations, private charitable institutions and humanitarian organizations. Inclusion of larger number of actors in provision of services in the social sector has been

an established practiced in our country, but there is a need for their strengthening and development.

The process of decentralization itself changes the role of the state in the social arena and understanding of its role leads to changes in the sector itself by spreading pluralism in providing social services, increasing their quality and accessibility to the elderly.

Locally needs of elderly can be specific due to democratic, economic and other differences and specifics of social issues. Social services targeted at the elderly also require the cooperation and joint response of several actors, in particular social and health care at the level of local community. This process recognizes the growing participation of elderly in selection of offered service and service provider.

The social services that elderly people receive depend on their social network, the service providers themselves, and the individual needs of the elderly who are the basis for receiving support. The work of licensed service provider with an elderly person begins with provision of confidence of an elderly person in the service provider through professional relationship and presentation of objective possibilities for obtaining social services.

The service provider may provide other related integrated services depending on the needs of the user. The elderly person may use social service if the service is developed and available. The user that due to the specific social and health

condition is in a need for accommodation and permanent health care and protection, a social–health protection can be provided. Depending on the needs of the user, social protection services may be provided simultaneously and in combination with services provided by educational, health and other institutions, for which a protocol for cross-sectorial cooperation between the competent ministries and/or institutions is concluded.

Thereforms in the social protection system, instigated improvement of social intervention with the elderly, primarily in the direction of increasing licensed and authorized social service providers, linking health services with social providers allowing one comprehensive approach regarding the problems and needs of the elderly. The reforms also extend the possibility of providing social services by citizen associations, so they in accordance with Article 127 of the Law on Social Protection (Official Gazette of the Republic of North Macedonia No. 104/19) can administer social services in the home, community-based social services, out-of-home protection, information and referral services, professional support and assistance services, and counselling services, according to received permit for conducting works from social protection.

This process of integrating social services strengthens the capacity of social providers at the local level and at the same contributes to construction a quality system that impacts the support of the elderly by improving the quality of their

lives and by allowing them to stay longer in their natural environment. Thus, the reforms enable overcoming of the deficiencies of the previous system of social protection and a way of realizing social intervention with the elderly in practice.

Experiences from decentralization of services suggest that special attention is needed to be paid to financing social services. Some of the social services are financed on the central level and some on the local level.

Authorized service providers as licensed service providers have concluded a legal agreement with the Ministry of Labour and Social Policy; that is, the City of Skopje and the municipalities in the city providing services to the elderly, according to the Decision by the Centre for Social Work.

Classifications of social services depend on the type, purpose and satisfaction of different needs. According to the Law on Social Protection (Official Gazette of the Republic of North Macedonia, No. 104/2019), social protection services are classified by service groups, defined by the Law on Social Protection and the Rulebooks for Determining Closer Conditions and Standards for Providing Social Protection Services.

1.1 Social services for the elderly

Social services provided to the elderly in accordance with the Law on Social Protection (Official Gazette of the Republic of North Macedonia No. 104/19) which are under the jurisdiction

of local self-governments are classified into six groups:

1. *Information and referral services* include informing the elderly person about social protection rights and available social services. The referral was preceded by an initial assessment of the elderly person's needs, the provision of necessary information and referral to other institutions or service providers to meet the elderly person's individual needs in order to have unhindered access to rights and services in accordance with positive applicable laws.

The assessment can be defined as a process of understanding individual characteristics, including his or her personality, strengths, and problems (Žegarac N., 2015). The process of assessment defines the type of assistance and support needed for overcoming the problems and satisfying the needs. The assessment takes into account the vulnerability, risk factors, protective factors, strengths and resilience of the elderly person and his or her family.

Variety of methods are used such as conducting interviews with elderly, observation, review of written documentation, information that are analysed and synthesized latter about the user and his environment, after which conclusions are made about

the user's social need (Jordan C., Franklin C., 2003).

2. *Professional help and support services* of elderly person and their family members include assistance and support to overcome individual and family problems through assessment, planning, care and evaluation interventions, as well as a follow-up of the condition after completion of interventions, in order to strengthen the elderly person and ensuring and maintain the well-being and functioning in the living environment.
3. *Counselling services* include advisory or counselling work, with the aim of preventing, mitigating and overcoming the consequences of social problems of the elderly person and his or her family. Counselling is used in practice with the aim to accept change by the family and to point out the true interests of the family members when it may be in the interest of the old person to be placed in residential home or using other services. These services particularly emphasize their importance to the family of elderly service users, especially if the elderly person is placed under guardianship and the guardian is a family member.

It is about maintaining family relationships and family reunification, family mediation for families with disrupted family relationships; psy-

cho-social support for victims of domestic violence; psycho-social treatment of perpetrators of domestic violence, activation and other counselling and educational activities.

4. Services in the home are services for provision of assistance and care in the home of the elderly person with temporarily or permanently reduced functional capacity, with the aim to enable the elderly person to continue living in their own home and to prevent the need for out-of-home care, such as: home care and personal assistance.

The home care and support service provides basic and instrumental activities in daily living¹ up to 80 hours per month, for the elderly with reduced functional capacities who cannot take care of themselves, to continue living in their own home and lead independent living in the community. The service is provided to an elderly person who is unable to provide support at home by his/her spouse, children, due to employment, health condition or old age. The development of home care and support services is a primary social protection function to enable the elderly to live in their own households, in order to evade being left in a stationary institution (hos-

¹ "Instrumental activities of everyday life" are: cleaning, repairs, laundry, cooking, purchasing products, outdoor mobility, taking medical therapy and other related activities.

pital or nursing home). A beneficiary of a home care and support service provided at a cost covered by the Centre for Social Work cannot additionally use a personal assistance service. Since 2009, the Association for Support and Development of Humanity provides services to the elderly in their homes. The Municipality of Centre in cooperation with the Association Humanity provided services in the home for the elderly within a three-year project (2016 – 2019). A system has also been established by a citizen's association for provision of training for licensing caregivers that will work with the elderly. Another example is the project "Mobile Patronage Team for provision of Care of the Elderly and the Frail: Good Morning, How are you?" The project was implemented by the Municipality of Pehcevo in the period 2011-2013 as part of the activities envisaged in the measures of the local strategy for introduction new forms of social protection for this vulnerable group, which provided the necessary care and assistance by trained women, which were selected from the category of long-term unemployed women (Trbojevic S., Misev S., 2012).

Training for caregivers of elderly and frail persons. Red Cross of the Republic of North Macedonia is a verified organization that implements program for training of caregivers of elderly and frail persons. By this, certified training persons/caregivers attain knowledge, skills, and competences for giving the basic health and social services in the

home of a person which due to age, chronic illness and other reasons are in condition of weakness and are frail of taking care of themselves. The services are of different nature and form and are compensating institutional care and other forms of organized care. According to the rulebook for certification of programs by the Adult Education Centre, the Red Cross of the Republic of North Macedonia in 2020 has an obligation to verify a program by introducing new content in order to improve it.

The Personal Assistance service includes individual assistance and support for persons up to 65 years of age, having reduced functional capacities, to enable the elderly to live independently and autonomously, to participate actively and equitably in the community, as well as to perform daily activities. Personal assistance includes: assistance and support in performing basic and instrumental activities of daily living, workplace support and assistance, rehabilitation centres, community support and assistance, and other activities of personal interest, up to 80 hours per month. Beneficiaries of the personal assistance service are persons with severe and most severe physical disabilities and completely blind persons.

1. **Community services** include day-care services, temporary protection, rehabilitation, reintegration of users, substitution of family care and a half-way house, due to prevention, care and protection, with the aim to

enable the elderly to continue to live in their own home, that is, the community and the prevention of the need for out of home protection.

The day care services include day care, individual activities for obtaining life and work skills activities, social, cultural and recreational activities, education and social support for the elderly. Within this set of services, local self-governments can provide other services that are also intended to help the elderly stay in the family and in the immediate natural environment.

In the Republic of North Macedonia there are daily centres for the elderly and adults in Chashka and Bogomila, Samakov and Vevchani which are under jurisdiction of the centres for social work.

Rehabilitation and reintegration services are provided to the elderly who face social and/or health problems. The service is provided through psycho-social support, therapeutic work, occupational therapy, support for job reintegration skills and independent living. Beneficiaries of the service are marginalized elderly people with specific social and health problems.

The temporary residence service provides protection and expert assistance to an elderly person in crisis

to overcome the situation and their social integration. Beneficiaries of the service are elderly victims of domestic violence and homeless people. The service is provided for a period of up to three months, with the possibility of extension for another three months, and in exceptional cases where the condition is not exceeded up to one year.

The reforms in the social protection system that are enshrined in the new Law on Social Protection (Official Gazette of the Republic of North Macedonia No. 104/19) include identification of the *need for family respite service* for family members that are taking care for the elderly who are not capable to perform independently the basic and instrumental activities in a daily living.

Family care respite service provides short-term care for elderly dependent from members of the family, due to vacationing and meeting the personal and professional needs of family members caring for the elderly. The service can also be provided at the home of the elderly person. The beneficiary of the service is a family member who cares for the elderly who cannot independently perform the basic and instrumental activities of daily living. Family care respite service is provided for up to 15 days in one calendar year with costs reimbursed by the Centre for Social

Work. This service can also be provided at the user's home.

Halfway House provides assistance, support and preparation for the independent living of elderly people who were previously out of home care, do not have their own home or living conditions in their home, in order to reintegrate them in the society. The service is provided during the residential stay or immediately after the residential stay is over. Beneficiaries of the service are: adults after serving prison sentences, persons with disabilities, alcohol and drug addicts following medical treatment, and other people with specific social problems who are in need of preparation for independent living.

2. **Outpatient care services** provide basic protection that include: accommodation, 24-hour assistance and support from professionals, protection, nutrition, clothing, health care, and other services depending on the type of beneficiaries who do not have living conditions in their family or for other reasons need extra-family protection.

The services for protection of frail elderly person, a chronically ill person, a terminally ill person and another person in need of continued care and assistance, in addition to basic care, includes specialized professional help and social professional support for the family.

This provision highlights the necessity of using a multidisciplinary or multi-sectoral approach for this category of beneficiaries in order to provide individualized services tailored to the needs of the elderly. This need is reflected in the ideas for a reformed social protection system depending on the needs of the beneficiary, social care services and can be provided simultaneously and in combination with services from health and other institutions, for which a protocol for cross-sectoral cooperation between competent ministries and/or institutions.

Outpatient care services are: *Supported living* provided in a separate housing unit with assistance from professionals or other persons in the performance of basic and instrumental activities in daily living. Assistance and support can be occasional, daily or 24 hours depending on the needs of the user. Beneficiaries of the service are: persons with disabilities. Up to five people can be accommodated in a supportive housing unit.

Protection in the family includes basic care and 24-hour care for the elderly who do not have their own family or do not have living conditions in their own family. Care can be provided as general, specialized, occasional, emergency or care provided by relatives. This service provides conditions closest to a natural family and the old person stays in his place of residence.

Accommodation in a facility includes basic protection that provides: care, 24-

hour assistance and support from professionals, nutrition, clothing and health care, depending on the identified needs of the user who has no living conditions in his or her family or for other reasons. extra-family protection is needed.

The Law on Social Protection (Official Gazette of the Republic of North Macedonia No. 104/19), Article 117, recognizes residential home and home for care and assistance for the elderly as relevant for the elderly, which makes a kind of categorization of social care facilities for the elderly, such as housing for healthy and vital elderly and a home for help and assistance intended to accommodate people in need of additional care and assistance or as the law itself states that besides the basic, specialized professional assistance is provided. It provides an opportunity for an out-of-family social protection to provide social and health services in a separate organizational unit, whose operation is regulated by a protocol of cooperation between the Ministry of Labour and Social Policy and the Ministry of Health.

In addition to basic protection, institutional *accommodation for the elderly* provides social, cultural and recreational activities, depending on the individual needs of the elderly. Accommodation services are provided to the *frail elderly, the chronically ill, the terminally ill*, and others in need of continued care and assistance. In addition to basic care for the elderly, this service also includes specialized professional help and social

support for the family. *Urgent placement* is provided for protection for the elderly in crisis for up to 30 days. Temporary accommodation is provided for protection of the elderly at the time of need and a foster care cannot be provided for the elderly. *Temporary accommodation* can last until the provision of foster care, another form of protection or return to one's own family, up to a maximum of six months.

A multidisciplinary and team approach is used in the work with elderly person placed in a nursing facility. The team involves social workers, nurses, occupational therapists, physicians providing the necessary and quality support to the elderly according to their individual needs (Ogresta and Rusac, 2007).

Survey conducted by Angelkovic and Vidanovic for identification of the reasons on why the elderly are moved into a nursing home shows that 43.7% of the elderly are housed because there was no one to care for them, 33.8% stated that they alone decided to come to the nursing home, and the remaining elderly persons reported that they are in the home because of their poor health condition (Andjelkovic, Vidanovic, 2011).

On the territory of our country there are 5 public institutions for social protection of the elderly, located in Skopje, Kumanovo, Prilep, Bitola, Berovo and 30 licensed private homes for the elderly which of which 27 are in Skopje and 3 homes are in the village Kravari - Bitola, Radovish and Negotino.

The cost of the service for the elderly in public institutions ranges from 7300 - 14 500 mkd (120 - 245 euros) with minimum standards provided.

In private homes the price for accommodation for the elderly ranges from 20,000 to 47,000 mkd (330 - 785 euros) with minimum standard provided. The cost depends on the degree of social and health care (specialized for diseases and problems of the elderly). The total number of seats for the elderly in the elderly homes in 2009 was 567 beds or possibility for 0.3% of the elderly to be accommodated, while in 2019 there were 1671 beds or possibility for 1% of the elderly to be accommodated, which is far from the capacities of developed countries where 3% of the elderly can be accommodated.

2. How to obtain quality social services for the elderly?

Strict separation of social services is not possible; they are usually combined, so it is difficult to distinguish between a dominant activity or dominant environment where the services are provided. For example, a community day care centre (community service) can be set up locally for the community to perform home visits and home care (home services). Or in a nursing home (day-care facility) and day-care centres and clubs for the elderly, open to an out-of-institutional protection of elderly persons (socially) or to call through an alarm system that requires intervention and assistance in the elderly home (local services).

Community services can be services such as providing support and assistance to the individual and the family in order to improve or preserve the quality of life, as well as mitigate or eliminate the risks of adverse life circumstances and create opportunities for independent living in the community.

However, in the area of social services, this situation is not only a disadvantage, but also an advantage that can and should be used in our country. This only points to the wealth of opportunities offered by social services to provide comprehensive, holistic and flexible protection. Under the limited conditions, the capacities and resources that exist in some municipalities in the Republic of North Macedonia make attempts to combine social services that will make the process more efficient. If the combination of different services is greater, it gives a higher quality of protection to the users but also lower costs for their establishment.

In many cases, the service can only be established with small direct financial investments, and with much more creativity, initiative, joining local actors' capacities and resources. Social services that require activities such as volunteering, corporate responsibilities, community action, vulnerable groups, and self-help capacity building, and etc. are rarely provided for elderly persons.

We can best see the services that represent the social protection system being implemented at national and local level. Depending on the type, purpose

and need toward which satisfaction is targeted, there are different classifications of social services. Research conducted on the territory of Croatia, which included surveys of several local communities and their comparison, provided information on the different needs of the elderly in different areas, highlighting all demographic and social opportunities (Petрак i sar., 2006).

Each local community can set up their own service system and local support and care program for the elderly on their territory. The services provided by the local community complement the basic disadvantages of centralized state planning and enable the individual needs of the elderly to be seen on their own, as well as areas and planning of their appropriate satisfaction according to their abilities (Lucanin, D., Despot-Lucanin, J., & Havelka, M., 2000).

Based on the analysis and the theoretical conducted research, Matkovic (Matkovic, 2012) points out that more than 9,000 elderly people in Serbia use some form of support or services program at home, organized by CSOs or the Red Cross. Most elderly care services provided by the local government in the home are free of charge, while in some areas there is co-financing by the beneficiaries themselves or their relatives. From the data obtained from the research it can be concluded that the assistance service in the home is not sufficiently developed and widespread.

The service provider may also provide other related integrated services,

depending on the needs of the user. The elderly person can use social services, if developed and available. The beneficiary who due to a specific social or health condition needs accommodation and ongoing health care and assistance may be provided with a social health service. Depending on the needs of the beneficiary, social protection services may be provided simultaneously and in combination with services provided by educational, health and other institutions, for which a protocol for cross-sectorial cooperation between the competent ministries and/or institutions is concluded.

In the analysis of services for the elderly there is a wide range in their classification with divisions into groups is as it was in the Republic of North Macedonia on assessment and planning services, daily community services, counselling therapeutic and social-educational services and accommodation services.

Social services for the elderly are designed to maintain the autonomy and independent living of the elderly and have no dependence on the social services system.

3. Effects of Practical Implementation of a Pilot Project on Assistance and Home Care

Article 77 of the Law on Social Protection (Official Gazette of the Republic of North Macedonia No. 104/19) defines the home assistance and care service, which provides assistance in carrying

out basic and instrumental activities in daily life up to 80 hours a month for the elderly with reduced functional capacity who can not only take care of themselves. The service is provided with the aim of improving or maintaining a certain level of user's independence, in order to continue to live in their own home and lead an independent life in a community. The cost of these 80 hours per month service for the elderly for whom the social welfare centre will determine that it is necessary to use will be reimbursed by the centre.

When providing social services to the elderly, it is most important to exemplify the opportunities that the elderly as well have their expectations. Opportunities can be personal to the elderly in terms of material, health and external opportunities such as availability of resources in the local community (shop, ambulance, hospitals and transport) as well as second external sources such as people communicating with the elderly person, friends, relatives, neighbours and services to assist the elderly in and out of the home.

The type of services provided in the home for the elderly is determined by personal choice and selection of the necessary service by the elderly person and the signing of a Support Agreement in accordance with the individual needs of the elderly. The survey "Needs of social and health services for the elderly" conducted in the Republic of North Macedonia in 2017 on a representative sample of 1004 elderly people older

than 65 years showed that 22% of the elderly need home services, which especially increases with age. A 45.7% of elderly people aged 85 years stated that they need support at home (Dimitrijoska S., 2017).

The data from the conducted evaluation on the quality of services provided by the caregivers to the elderly and disabled persons through: organization of work and performance of tasks, helping the elderly in their home, are given in the appendix.

Most of the elderly people highly rated (excellent, 1) the provided support for procurement of hygiene material and food items, namely 81.6% of the elderly people. As excellent with the rate 1, 80.3% of the elderly people expressed satisfaction with the provided support by the home helpers for maintaining personal hygiene.

Therefore, the support of the care providers due to lack of mobility of the elderly people or the deteriorated health condition was very important for performing the daily activities of the elderly people and they appraised this support as very important and stated that it significantly improved their quality of life.

The obtained data from the research indicate that elderly people appraised highly the support for procurement of groceries and hygiene material and the support for maintaining of personal hygiene, and for performing the daily routines (getting dressed, escort to certain places, administering bandaging

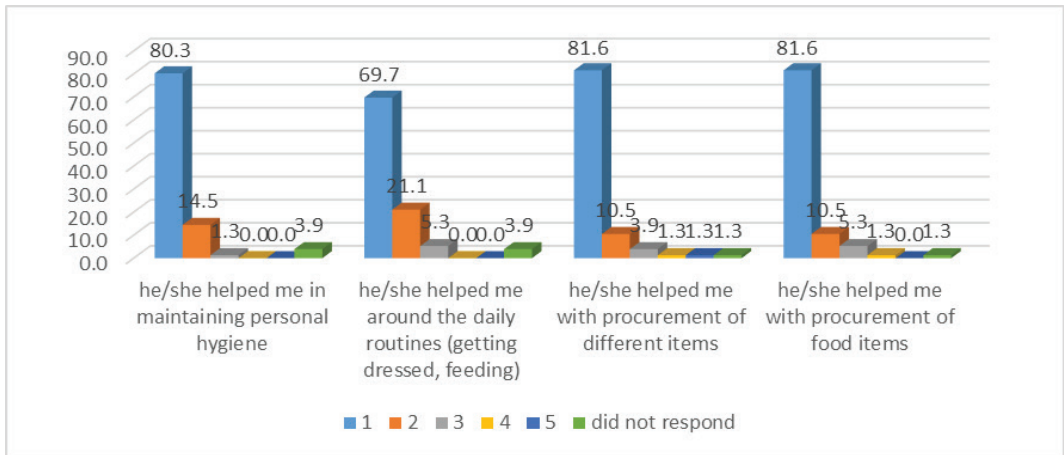


Chart 1. Assistance in the home of the elderly person

wounds up, measuring blood pressure and testing blood glucose levels, monitoring taking medicaments and mobility support) as well as provision of services to elderly persons for achieving specific institutional rights.

Having in mind that the number elderly people is constantly increasing, this means that there will be more and more elderly people with mobility problems or with deteriorated health condition, which indicates that the need for home helpers will be growing.

3.1. Health care assistance and prevention of diseases

Ageing results with deteriorated physical abilities of elderly people and inability to independently perform the daily routines. Elderly people have difficulties with walking and preparation of meals. The deteriorated health condition itself is an indicator for requirement of home helper services.

The measuring of blood pressure by the care providers was appraised as very important (rated as excellent 1 and beneficial by 85.5% of the elderly people, and 71.1% of the elderly people appraised the support of the home helpers in the area of health care with highest achievement.

Advice given by caregivers about disease prevention, recognition of damages users had, good knowledge of medical therapy and palliative care, were rated as very useful by the elderly.

The advices in the area of social assistance and care provided to the elderly people were highly appreciated by the beneficiaries. Namely, 82.9% of the beneficiaries appraised the advices for obtaining the required support for social services from different institutions.

The elderly people particularly emphasized the skills of the care providers in terms of communication and their proficiency and competencies for conducting the required services, namely

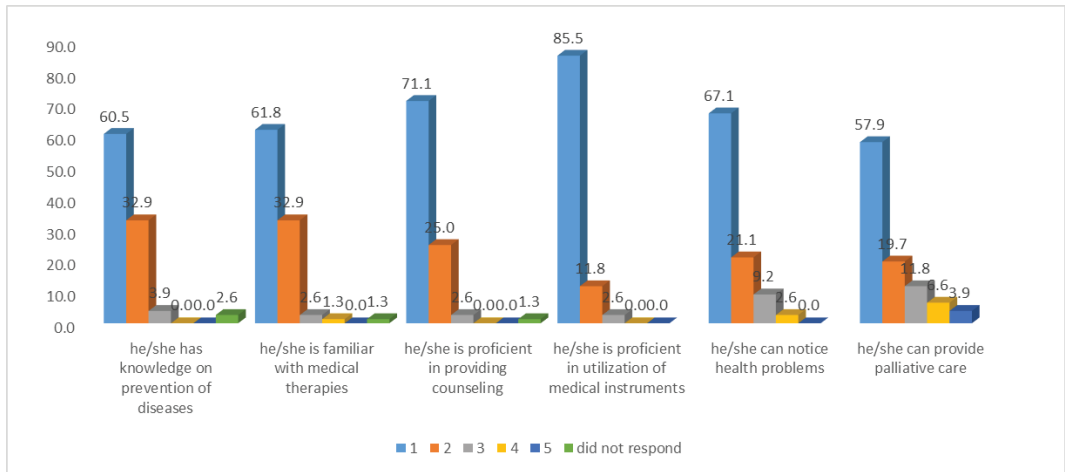


Chart 2. Health care assistance and prevention of diseases

77.6% of the beneficiaries rated these skills as very good.

The support of the home helpers related to meeting the personal needs of the elderly persons was rated with the highest grade by 72.4% of the elderly people. Significant number of the elderly people stated that home helpers need to invest more efforts in the area of promotion and support for independent performing of the daily activities of the elderly people.

Bilateral meetings with relevant institutions and organizations enabled the development and adoption of a Training Program for Caregivers for Elderly and Frail persons, which is in line with the strategic commitments and policies of the Government of the Republic of North Macedonia, which enabled the preparation and verification of the program. A handbook for the training of caregivers has been provided to ensure that the minimum standards for the pro-

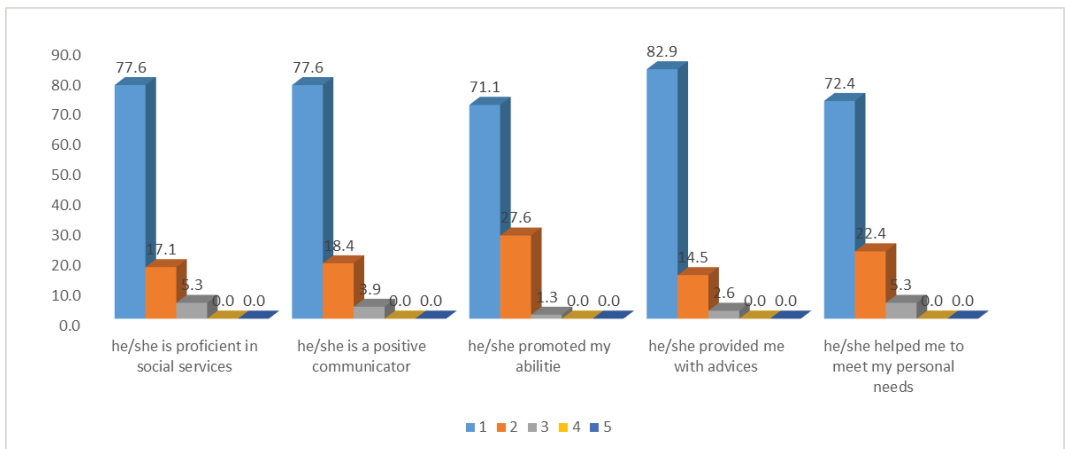


Chart 3. Psycho-social assistance and care

vision of services in the home of the elderly person are met. A verification of the program for the training of caregivers for the elderly and frail was realized.

Conclusion:

- Providing services to the elderly enables them to improve their quality of life by promoting effective and effective social and health care for the elderly at the local level and improving their integration into the local community and society as a whole.
- Cross-sectoral cooperation has been established and developed that enables coordination of activities needed to provide services to the elderly according to their individual needs.
- Significant improvement in the development of community services, especially for the elderly and their integration into the social environment has been accomplished. Services are insufficiently differentiated and individualized according to user needs. Insufficient accessibility also results from unrealized access to health and social services.
- Authorization and licensing of social service providers has been accomplished;

- Linking health services with social services has been accomplished;
- Integrated social services strengthen the capacity of social service providers at the local level and will improve the quality of the system, thereby increasing support for the elderly in their natural environment.
- Providing social services to the elderly enables them to improve the quality of their lives by promoting efficient and effective social and health care for the elderly locally and improving their integration into the local community and society as a whole.

Recommendations:

- Aging must be understood as a continuum, whereas social services required by the elderly need to be organized as part of a permanent relationship in order to enable the elderly to be satisfied with their lives and to be treated as an integral part of the society.
- Each local community should set up its own service system and local program depending on the needs of the elderly and the availability of licensed service providers.

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