

Protection of the Elderly in Foreign Experience

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ABSTRACT

The article deals with the issues of social protection of the elderly in foreign experience. A comparative analysis of the basic principles and mechanisms of social protection of the elderly is carried out here.

KEY WORDS: *Social protection, "Gerontological centers", "Social clubs", "Good Neighborliness", the Red Cross, "Nursing".*

Today, the development of the aging process in many countries around the world requires special attention to the social protection of the elderly. An example of this is European countries.

As most developed countries of Europe faced this process after the Second World War, social security programs to support the elderly and the disabled alone were developed, and special systems for the implementation of social policy were created. In most countries of the modern world, the number of elderly people is increasing. In economically developed countries, the proportion of the elderly over the age of 60 has increased from 12 percent to 22 percent of the total population. The UN predicts that the number of elderly people over the age of 60 will reach 1.2 billion worldwide by 2025 (more than 400 million in 1992). In addition, the number of elderly people in developing countries will increase by 100 million in 1980 compared to 2005, and by 38 million in developed countries. The share of people aged 80 and over will increase to 64% during this period.

In countries with developed market economies, especially the United States, the number of elderly people has been steadily increasing since the beginning of the twentieth century. In 1900, there were 3.1 million people over the age of 65 in the United States, representing 4 percent of the population. By 1950, their number had tripled to 12.2 million (8.1% of the country's population). By 1990, the number of people over the age of 65 had doubled to more than 25 million (11.3 percent of the population). By 2005, this age group accounted for more than 35 million people, or 13.1 percent (123) of the population.

Significant demographic changes over the past decade have forced many states to reconsider their systems of assistance to elderly citizens.

In Western Europe and the United States, the social protection of older citizens is high, and social work with older people is very diverse. It can be used in the social protection of the elderly and the provision of social services to them in the Republic of Uzbekistan. However, due to differences in historical and economic conditions, we can effectively use it in Uzbekistan, partly due to our own mentality.

To study the experience of Western Europe and the United States in the social protection of the elderly, we identified the characteristics of the activities of governmental and non-governmental social institutions in these countries in order to assess its opportunities to use its achievements in working with the elderly in Uzbekistan.

In the social policy of the United Kingdom, the social protection of the elderly and the disabled is aimed at creating full conditions in their homes, under the supervision of social workers [1. S.124]. In other words, the elderly are provided with services to ensure a full living environment in their family.

In our opinion, the "Gerontological Centers" that provide social protection to the elderly in the UK are underdeveloped. Because in such centers not all elderly people can receive full social, medical and household assistance. Such centers do not have the conditions to fully cover the social protection of the elderly. Social and medical care for the elderly and the disabled at home has been identified as an important element in the implementation of social protection in the country. The main goal of social and medical care provided at home is to address the many problems associated with the loss of interest in life for the elderly and single seniors. The organization of mandatory and additional services (medical, recreational, household, etc.) for the elderly at home is carried out by local authorities. It should be noted that the provision of additional services is carried out only on the basis of the choice of senior citizens. Implementation of social services at home, types and forms of domestic services - all this is regulated by the social programs of the state. Social service is provided by many low-staff workers and mainly by many volunteers of various religions, charitable foundations, youth, community and other organizations. In the UK, the entire system of social protection of the elderly is coordinated by the State Committee for Social Services [2].

In the UK, for the first time, there are specialized nursing homes that provide social protection for the elderly. These institutions accommodate the elderly who are seriously ill and in need of constant medical supervision. In specialized nursing homes, seniors can live temporarily as well as permanently. Social workers provide a variety of services to the elderly: they organize recreation, medical and social services. Second, there are special settlements consisting of small houses capable of leading an active lifestyle, as well as apartments for the elderly [3. S.88-107]. Third, there are "Social Clubs" organized by religious and charitable organizations.

It should be noted that the factors that meaningfully organize the leisure time of the elderly in institutions in the UK: ensuring an environment of friendly relations with each other, the age-related characteristics, interests and worldviews of the elderly are important. Social clubs are divided into two parts. Some "Social Clubs" are organized on the basis of age criteria, ie they are designed to serve only the elderly. Other Social Clubs are based on common interests and their membership does not depend on age [4. S.15]. Interestingly, most seniors prefer their hobbies. There are clubs of applied arts, embroidery, chess, checkers and so on.

There is no single program to organize the life activities of the elderly, as there are not only government but also non-governmental organizations and business representatives who provide additional medical advice to the elderly. The elderly need to work to improve their financial situation once they reach retirement age. For this reason, in the UK, at the initiative of public organizations, special workshops have been set up using simple types of work and simple equipment. Many local firms provide materials free of charge as a charity and place orders for the elderly. It should be noted that such support for the elderly has a positive impact on their vitality, they feel the need for them in society, the need for society.

The experience of another system of social protection of the elderly "Neighborhood" ("Dobrososedstvo") [5.] is interesting, the essence of which is to serve the elderly together with social workers. Of particular importance is the fact that many volunteers themselves support the category of people of retirement age. The most common types of support are: communication aimed at overcoming the loneliness of older people; cleaning of buildings; food purchases; cooking, laundry, etc.

It should be noted that health authorities pay special attention to the social protection of elderly citizens. Nurses regularly visit the home where the elderly live, provide first aid, prevent illness, and provide advice on diet, care, and the like. Medical facilities provide the elderly with a variety of sanitary facilities free of charge. The type of service of day or night servants for the purpose of caring for, assisting, caring for the elderly is widespread. Another important form of work of the British government in the social protection of the elderly is the operation of geriatric hospitals, whose mission is not only to provide specialized medical care, but also medical, household services to seriously ill elderly people during their vacations at relatives' homes. Many geriatric hospitals have established day care centers for the elderly, the main purpose of which is to care for elderly patients and provide social assistance after discharge from the hospital. In these departments, the elderly undergo clinical and laboratory examinations, physical and occupational therapy courses [6. S.212].

In our view, the social protection of the elderly, established by the French government, is of interest, with a focus on ensuring that the elderly are in a normal home environment as much as possible. Two types of home care for the elderly are common - "Home Assistant" and "Nursing".

The "House Assistant" service organizes social services at home: buying food, cooking, tidying the premises, washing clothes, paying utility bills, etc. These services are funded by the state insurance system or private insurance companies in France. The mission of the Nursing Service is to care for the elderly who are unable to meet their needs independently due to their health, which includes home care as well as medical care for hygienic services. Provision of such services to the elderly is carried out by the nurse and his assistant (nurse) at the discretion of the attending physician. The task of the "Nursing" service is to provide medical services prescribed by a doctor. The "Nursing" service is funded by health insurance companies [7. S.131].

It should be noted that a "Home Hospital" service has been established in France for the elderly who have been discharged from hospitals and do not need intensive care. Medical, social, psychological and domestic services are provided to the elderly in collaboration with doctors, nurses and social workers.

In France, pension clubs play an important role in the social protection of the elderly. Their activities are mainly aimed at organizing leisure time, overcoming social alienation and encouraging active participation in public life. Such institutions are created by public organizations. The state provides financial assistance to support services that provide assistance to senior citizens.

In France, there is a commission of the National Committee on Pensioners and the Elderly. This committee defines the principles that allow government agencies to regulate the treatment of the elderly:

- The principle of personal dignity of the elderly. The elderly have the right to qualified and appropriate treatment and self-treatment, regardless of their health, income, or marital status.
- The principle of free choice. Every elderly person has the opportunity to choose accommodation depending on their state of health.
- The principle of coordination of assistance. The elderly should be financially supported by the state so that they do not need anything.

It should be noted that Finland has a centralized planning system in the field of social protection of the elderly. Central government agencies manage and control the direction of social services. The provision of direct social services to the elderly is entrusted to municipalities. This direction is organized on the principle of self-government on the basis of five-year plans. The state compulsorily allocates subsidies to municipalities in the amount of not less than 50 percent of the cost of social

assistance to the elderly. Social services are also provided by private organizations and churches [10. S.132].

In our opinion, in the social protection of the elderly in Finland, it is very important to provide services in non-stationary conditions aimed at creating good living conditions for them and to choose a direction for the social protection of the elderly. The most common form of social protection is a full package of assistance (medical, social, psychological and other services) to families, the elderly in need of social protection, low-income families, in addition to helping single elderly people. This form of care can be provided both permanently and temporarily, depending on the state of health of the elderly. It should be noted that the majority of the elderly are assisted by relatives or individuals who pay a special fee.

Social assistance centers offer a wide range of services to the elderly. These are: rooms for rest and relaxation, medical rooms, physiotherapy and massage rooms, sauna, swimming pool, kitchen, medical and labor workshops. Typically, such centers provide hot meals delivery through those served at home. In Finland, it is important to provide housing for the elderly, as well as to equip each household with a 24-hour communication system with social workers.

In the practice of social protection of the elderly in Germany, voluntary associations, primarily church charities and the German Red Cross [11. S.50.] Services should play an important role. In order to provide social protection to the elderly, day care centers and various clubs for the elderly are common. Nowadays, social departments are becoming popular in providing social, medical and household assistance to the elderly. In Germany, there are governmental and non-governmental organizations that provide social protection for the elderly. It includes social workers, council and union leaders, and prominent public figures. The activities of the Association include educational institutions, research institutes and institutes of practical social work. The main goal of the organization is to implement the ideas of social protection of the elderly. First, one of its main tasks is to promote social policy initiatives, develop practical recommendations for the implementation of state and non-governmental assistance in the social protection of the elderly; second, expert activity in the field of social law; third, the creation of an information bank for professionals; fourth, training of leading personnel and staff in the social sphere, development of international cooperation and exchange of experience with other countries; fifth, the publication of works and other publications on social issues [12. S.133].

In Germany, the social policy of the state is reflected in practice in the activities of social workers. In general, it solves the social problems of an elderly citizen of his country. In our opinion, the experience of social protection of the elderly in the United States is of great interest. In America, they create the conditions for older citizens to live at home. This is done through a system of non-stationary types of social assistance. Government and non-government organizations provide financial assistance to the elderly so that they can receive the necessary social services independently [13. S.54]. In the United States, there are a variety of funds that pay for medical care, provide affordable housing, arrange for food purchases, provide transportation services, and so on. A system of monthly payments to relatives or a separate social worker to care for the elderly at home is common. In addition to day care facilities for the elderly, there are specialized toll centers developed in the United States. Their main goal is to provide social, household and medical assistance to pensioners with disabilities. There are separate rooms for people in such institutions for diet, physiotherapy and physiotherapy. Occupational therapy is common among the elderly. Specialized centers pay great attention to the meaningful leisure of the elderly: the organization of excursions for the elderly, dance and sports classes [14. S.134].

The world experience of social protection of the elderly emphasizes the importance of the active

position of the elderly to be independent as a subject of their activities. There are governmental, non-governmental and commercial organizations engaged in the social protection of the elderly abroad. They are closely linked to each other and offer different levels of service and benefits.

In the United Kingdom, France, Germany, Finland, and the United States, forms of social protection for the elderly are very effective. This type of social protection is partially used in Uzbekistan, which has a positive impact on the lives of the elderly. Nevertheless, the perspective model of social policy of the Republic of Uzbekistan must meet the following conditions: first, the creation of the Concept of Social Protection, taking into account changes in the social situation in the country. Second, it should have "feedback mechanisms" that reflect the changes taking place in society with older people. Third, to ensure the effectiveness of the management apparatus, which is able to receive "signals" and turn them into appropriate decisions and programs. The government of Uzbekistan should pay more attention to the social protection of the elderly, and use the experience of social protection abroad wisely for its citizens.

References

1. Козлов А.А. Социальная работа за рубежом: состояние, тенденции, перспективы: сб.науч.очерков. М.: Флинта: МПСИ, –1998. – С.124.
2. Мартин Э. Социальное обеспечение в Великобритании и Франции // Свободная мысль XXI века. 2005. №8.
3. Шахова С.А. Программа обучения кадров для учреждений социального обслуживания граждан пожилого возраста и инвалидов: с использованием опыта Великобритании // Работник социальной службы. – 2004. -№1. – С.88-107.
4. Холостова Е.И. Социальная политика и социальная работа: учебное пособие. М.: Дашков и К, – 2007. – С.15.
5. Мартин Э. Социальное обеспечение в Великобритании и Франции // Свободная мысль XXI века. 2005. №8 // <http://www.polit.ru/article/2005/08/23/martin/>
6. Актуальные проблемы социальной работы: сборник статей и практических рекомендаций / Под ред. О.И.Бородкиной, И.А.Григорьевой. СПб.: Скифия, 2005. С. 212.
7. Василенко Н.Ю. Социальная геронтология. Владивосток: Издательство Дальневосточного университета, – 2003. – С.131.
8. Уша манба.
9. Мартин Э. Социальное обеспечение в Великобритании и Франции // Свободная мысль XXI века. 2005. №8 // <http://www.polit.ru/article/2005/08/23/martin/>
10. Василенко Н.Ю. Социальная геронтология. Владивосток: Издательство Дальневосточного университета, – 2003. – С.132.
11. Корнюшина Р.В. Зарубежный опыт социальной работы. Владивосток: Издательство Дальневосточного университета, – 2004. – С.50.
12. Василенко Н.Ю. Социальная геронтология. Владивосток: Издательство Дальневосточного университета, – 2003. – С.133.
13. Корнюшина Р.В. Зарубежный опыт социальной работы. Владивосток: Издательство Дальневосточного университета, – 2004. – С.54.
14. Василенко Н.Ю. Социальная геронтология. Владивосток: Издательство Дальневосточного университета, – 2003. – С.134.