

# Vpliv dolgotrajne oskrbe na kakovost življenja starih

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## Povzetek

**Raziskovalno vprašanje (RV):** V državah OECD se je delež starejših v ustanovah (domovih za stare) zmanjšal zaradi dobro organizirane dolgotrajne oskrbe na domu. Raziskali smo, kako je z omenjeno problematiko v Sloveniji in nakazali nekatere možne rešitve.

**Metoda:** Za zbiranje podatkov smo uporabili anketno metodo, študija je bila izvedena v 7 nastanitvenih ustanovah, študiji smo dodali polstrukturirani intervju z negovalnim osebjem v institucijah. Model multivariatnih mešanih učinkov z različnimi kovariancami je razkril, da se ocene kakovosti življenja znižujejo.

**Rezultati:** V prispevku smo izdelali analizo scenarijev, da bi proučili potencialni vpliv nasprotujočih si trendov na povpraševanje po institucionalni oskrbi v Sloveniji. Četudi v svetu to povpraševanje upada zaradi pričakovanega povečanja števila starih z manj obsežnimi potrebami, ki jim zadostuje oskrba na domu, pa pri nas učinka uvedbe dolgotrajne oskrbe ni zaznati, še več, zaznati je nenehno rast čakajočih na institucionalno oskrbo (v Sloveniji se število nenehno giblje nad 4000). Ker novih domov za stare v ustreznem številu ni pričakovati, bo neusklajenost med povpraševanjem in ponudbo rasla. Z uvedbo dolgotrajne oskrbe pa bi lahko domove namenjali predvsem ljudem, ki potrebujejo obsežen obseg oskrbe z visokimi potrebami (nega), kot tudi za osebe s kognitivnimi in somatskimi motnjami, medtem ko bi velikemu delu vprašanih starih zadostovala le dolgotrajna oskrba na domu, kar bi bistveno razbremenilo povpraševanje po institucionalni oskrbi. Kljub nenehno naraščajočemu številu starih (dolgoživa družba pričakuje v naslednjih letih še povišanje tega števila), pa ustrezne implementacije strategije ni.

**Organizacija:** Ugotavljamo, da kakovost življenja starih v institucijah v Sloveniji pada, tako zaradi neustreznih kadrovskih normativov, kot tudi zaradi prenapolnjenosti teh institucij. Zaposleni se tako ne ukvarjajo s problemi zasebnosti, varnosti, udobja, samostojnosti, spoštovanja, odzivnosti osebja, hrane; problem se odraža tudi na odnosih z osebjem, prijateljskih odnosih in neustreznimi in številnimi pestrimi dejavnostmi. Kakovost življenja ob neustreznem uvajanju dolgotrajne oskrbe v Sloveniji pada.

**Družba:** »Razumnost in srčnost sta med ljudmi redki vrline, najredkejša od vseh je pravičnost« je zapisal Plutarh. Človeška družba se stara, kar je fenomen dosežkov sodobne družbe je zapisala M. Ovsenik, kjer poudarja, da ne gre le za posledico razvoja medicine, medicine, znanosti in tehnike ter socialnih in družbenih odnosov, temelječih na vrednotah solidarnosti, ampak predvsem za sodelovanje, razumevanje in sožitje med generacijami. V Sloveniji staranju ne namenimo ustrezne pozornosti, zato strategije dolgotrajne oskrbe zahtevajo operacionalizacijo na vseh ravneh življenja starih, če želimo zagotavljati tudi v starosti človeka vredno življenje. Strategija dolgožive družbe, ki jo je objavil UMAR leta 2017, zaznamuje le tri cilje (1) dostojno in varno bivanje vseh generacij v domačem okolju u poštevanjem visoke ravni človekovih pravic, (2) vključevanje vseh generacij v ekonomsko, družbeno, socialno, kulturno življenje in spodbujanje medgeneracijskega sodelovanja in (3) ohranjanje in izboljšanje telesnega in duševnega zdravja vseh generacij. Ne omenja pa, kako ustrezno izobraziti in usposobiti ljudi, da bodo dolgotrajno oskrbo sposobni izvajati.

**Originalnost:** Raziskava kaže, da Strategija dolgožive družbe, kakršno je predstavil UMAR, ne naslavlja celovitih potreb dolgožive družbe – zato potrebuje ustrezno nadgradnjo.

**Omejitve/nadaljnje raziskovanje:** Raziskava je omejena na razmeroma nizko število institucij (7), nakazuje pa nujnost vseslovenske raziskave, ki bo pokazala v kolikšni meri implementacija Strategije dolgotrajne oskrbe odgovarja na sedanje in bodoče potrebe.

**Ključne besede:** institucionalno varstvo, dolgotrajna oskrba, kakovost življenja starih

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**Marija Ovsenik**, zaslužna profesorica in častna senatorka Alma Mater Europea – ECM. Doktorirala je s področja socialne politike in socialnega dela, drugi doktorat pa je izdelala na področju organizacije izobraževanja v turizmu. V redno profesorico je bila izvoljena na Univerzi v Ljubljani leta 2002. Vodila je projekt Tempus, katerega rezultat je bil izobraževalni Specialistični program na področju managementa v socialnem delu. Bila je dekanja Fakultete za turizem »Turistica« pri UP, kjer so pod njenim vodstvom prenovili dodiplomske programe in pridobili podiplomski študij. Bila je predstojnica Socialne gerontologije pri AMEU – ECM, in je avtorica (in bila je vodja tima) programa Socialna gerontologija na dodiplomski (VS in Uni), podiplomski in doktorski ravni, in je soavtorica študijskega programa Management v turizmu pri FOŠ. Predavala je številnih fakultetah (pri Univerzah v Ljubljani, Mariboru, Tuzli, Sarajevu, Na AMEU – ECM, na Univerzi na Primorskem, na Fakulteti za organizacijske študije V Novem mestu in več tujih Univerzah. Vodila je več projektov, sodelovala pri mednarodnih projektih, je avtorica ali soavtorica 16 monografij in številnih člankov v revijah, ki so indeksirane v SCI, SSCI, Scopus in drugih. Bila je mentorica številnim diplomantom, magistrom in doktorjem znanosti. Prejela je vrsto nagrad, med drugim Nagrado za izjemne dosežke na področju socialnega varstva (MDDS Z), nagrado za prispevek k razvoju Socialne zbornice, priznanje odličnosti na FOŠ in dobila je priznanje Ambasadorica znanja za izjemne dosežke na področju raziskovalno-izobraževalnega dela.

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# The impact of long-term care on the quality of life of the elderly

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## Summary

**Research Question (RV):** In OECD countries, the portion of elderly living in long-term institutional care (homes for elderly) has declined due to well-organized long-term care at home. We investigated how this problem in Slovenia was addressed and outlined some possible solutions.

**Method:** The survey method was used to collect the data. The study was conducted in 7 long-term care institutions, and semi-structured interviews with the nursing staff at the institutions were also carried out. A multivariate mixed effects model with different covariates revealed that quality of life estimates were decreasing.

**Results:** An analysis scenarios was performed in order to examine the potential impact of conflicting trends on the demand for institutional care in Slovenia. Even though this demand is falling in the world due to the expected increase in the number of elderly with less extensive needs, for whom care at home is sufficient, the effect of the introduction of long-term care in Slovenia is still undetected, even more, there is a continuous growth of pending applications for institutional care (there number in Slovenia exceeds 4000). As sufficient capacities in new homes for long-term institutional care are not expected to be available in the near future, the mismatch between demand and supply will grow. With the introduction of long-term care, institutions could target primarily people in need of a large volume of high-level care, as well as for persons with cognitive and somatic disorders, while long-term care at home would be sufficient for a large proportion of the elderly, which would significantly relieve the demand for institutional care. Despite the steadily increasing number of old people (the long-lived society expects an increase in their number in the coming years), there is no proper implementation of the strategy.

**Organization:** We find that the quality of life of the elderly in Slovenia is decreasing due to inadequate staffing standards and overcrowding of these long term care institutions. Employees thus often neglect privacy, security, comfort, independence, respect, responsiveness of staff, food; the problem is also reflected in staff relations, friendly relations and inadequate and not enough varied activities. The quality of life is falling with the inadequate introduction of long-term care in Slovenia.

**Society:** "Reason and cordiality are rare virtues among men, the least of which is justice," Plutarch wrote. Human society is aging, which is a phenomenon of achievements of modern society, wrote M. Ovsenik, emphasizing that it is not only a consequence of the development of medicine, medicine, science and technology and social and social relations based on the values of solidarity, but above all for cooperation, understanding and coexistence between generations. In Slovenia, we do not pay adequate attention to aging, which is why long-term care strategies require operationalization at all levels of life for the elderly, if we are to ensure a decent life in the old age. The IMAD (Institute of Macroeconomic Analysis and Development of the Republic of Slovenia) Strategy of long-lived society, published by IMAD in 2017, outlines only three goals: (1) a decent and secure living for all generations in the home environment, and respect for a high level of human rights, (2) inclusion of all generations in economic, social, social, cultural life and promoting intergenerational cooperation and (3) maintaining and improving the physical and mental health of all generations. However, the Strategy does not address how to properly educate and train people to be able to provide long-term care.

**Originality:** The survey shows that Strategy of long lived society, as presented by IMAD, does not address the overall needs of the long-lived society - therefore it needs to be upgraded accordingly.

**Limitations / further research:** The survey is limited to a relatively small number of institutions (7), but it indicates the need for a wider survey that will show to what extent the implementation of the Strategy of the long-lived society responds to current and future needs.

**Keywords:** institutional care, long-term care, quality of life of the elderly

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