

UNIVERSITY OF SS. CYRIL AND METHODIUS IN TRNAVA
FACULTY OF SOCIAL SCIENCES



SLOVENSKÁ SPOLOČNOSŤ
PRE VEREJNÚ SPRÁVU pri SAV



ANNUAL CONFERENCE
FACULTY OF SOCIAL SCIENCES
UCM TRNAVA

Social Policy and Services

Conference Proceeding

Ol'ga BOČÁKOVÁ
(ed.)

Trnava 2017

ANNUAL CONFERENCE
FACULTY OF SOCIAL SCIENCES UCM TRNAVA
Social Policy and Services
Conference Proceeding

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Published by

The Faculty of Social Sciences

University of Ss. Cyril and Methodius in Trnava

4/A, Buciarska St. 917 01 Trnava, Slovak Republic

ISBN 978-80-8105-867-7

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Foreword

Dear readers,

The Faculty of Social Sciences at University of Ss. Cyril and Methodius in Trnava celebrated its V. Anniversary on 1st December 2016. Prior to this date, we have organized international scientific conference dedicated to the promotion of the social sciences disciplines that include political sciences, European studies, public administration and public policy, social services and social policy. The conference took place on 14th November 2016 under the auspices of the Dean of the Faculty of Social Sciences and was divided into three thematic panels.

In three separate academic proceedings, authors who participated at our international conference are presented. In the first one, our colleagues from public policy department deal with issue of public administration from many different angles, whether it is associated with the competences of self-government bodies, its financing forms or from the perspective of individual reforms of the public administration.

In the second one, political scientists deal with issues related to the theories of democracy and their application in Central European perspective, the status quo and challenges of the political science academic and research discipline as well as many other related topics such as the effects of the EU politics towards the nation states, Europeanisation processes, current challenges of the European Union such as Brexit or the rise of extremism and nationalism within its member states.

Third proceeding book, the issue of social work is analyzed by our colleagues from the social services and counselling area. Some other important issues as social care and assistance for seniors, state social assistance to Roma families are also included. There is also an emphasis on the importance of social services and counseling in the context of the planned gradual aging of the European population.

The publication brings forward the arguments of renowned authors from domestic as well as international academic workplaces putting together a framework for further investigation and discussion.

We are proud to present a collection of academic articles related to current trends in social sciences as well as in public administration, political challenges to the process of the European integration and European policy-making and social services and counselling.

In Trnava, 24th February 2017

Peter HORVÁTH
Dean of the Faculty of Social Sciences

QUALITY OF SOCIAL SERVICES – VALUE BASIC FOR THEIR TRANSFORMATION

Kvetoslava Repkova¹

Abstract

The author applies the three-staged models on transformation of social welfare policy with an aim to analyse situation of social services in Slovakia, mainly in reference to an emerging quality system in this field. She presents some analytical backgrounds of social services' transformation (values, structures, processes, outcomes). Then, she informs about main findings of her own research conducted in early 2016 to explore statements of service providers to a need for transformation of services; moreover, to identify what transformational changes should be, according them, in concern. The author states that social services in Slovakia are characterised by a mixture of various elements coming up from all the presented social welfare policy models. To establish supportive conditions for emerging quality system, she highlights necessary cooperation of all interested stakeholders, including universities, and sharing responsibilities for social services of a high quality among them.

KEY WORDS: Social welfare systems, social services, transformation, quality, evaluation

INTRODUCTION

It is not very usual to interpret transformational changes in area of social services within a wider context referring to transformation of social welfare policy systems. A quality perspective can play a role of “moderator” between both levels - the wider social policy (protection) system, on one side, and the social services as one of its subsystems, on another side.

1 EVOLUTION OF SOCIAL WELFARE POLICY MODELS IN A WIDER EUROPEAN CONTEXT

K. Leichsenring and A. Scoppeta (2016) (based on work of J. Ph. Idenburg and M.C.M van Schaik, 2013) describe evolution of social welfare policy (and research) systems as a pathway starting with a paternalistic regime, passing through the Ego-system, and directing towards the Eco-one. **Paternalistic system**, titled also as a **welfare state**, builds upon top-down solutions, central

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steering mechanisms and paternalistic central government. Supply of social interventions is centrally regulated with a *financing of their inputs*. The system is focused on “self-reproduction” of institutions and their professional workers and legally based on causality of people’s social needs. Regulations, norms and protocols are rigorously applied. The mentioned characteristics impact social services’ terminology and practice as they refer usually to patients, residents, institutions and their operational issues.

Central point of the **Ego-system**, being associated with the **New Public Management**, lies in an existence of central frameworks for operating and funding of different agencies, providers and consumer organisations and rules for a controlled competition among them. Organisations are funded on a basis of their *outputs* or *performances*. Such type of social welfare system is primarily focused on people as users, service consumers, clients or customers who are provided with a choice and necessary information to make correct and informed decisions concerning their social lives. To ensure quality of the services certifications on fulfilling of externally constituted standards are required.

Both of the mentioned systems (models) used to be criticized due to some of their characteristics and social impacts. Beyond the above mentioned focus on self-reproduction of organisations rather than “social reproduction” of their services’ users, K. Leichsenring and A. Scoppetta (2016) emphasize their limitations in accepting individual, community or country based traditions in offering support and assistance for persons, groups or communities in social needs. J. Keller (2007: 13) relates such limitations to a general nature of modern society which “...*is ever more abstract (generalisation), ever more disparate (individualisation), ever more specialised (differentiation) and at the same time ever more purposeful (rationalisation)*”.

The latest development leads to enforcement of the **Eco-system**, or system of the **value creation** which works to replace the central position of governments or centrally funded agencies by so called *eco-network*. From the theoretical point of view it reflects on the person-in-environment concept, or the social-ecological model of helping disciplines (Göppner and Hämäläinen, 2004; Matoušek, 2013; Navrátil, 2013). The network is based upon *sustainable values* which are created by individuals and communities in cooperation with connecting governments (at all operational levels), formal, informal and non-formal actors, all on a basis of reciprocity and flexibility of solutions and mutual respect (Levická et al., 2009). The Eco-system is primarily focused on human rights and empowering people to their active citizenship, vitality, resilience and well-being, to their balanced personal functioning and active participation in their communities (societies). Traditional forms of problem solving are combined with comparative good

practices (examples) and social innovations being worked out in tailored - made patterns. All these values are recognised as a ground for providing services of a good (high) quality and lead to their *outcomes - based financing*.

2 TRANSFORMATION OF SOCIAL SERVICES IN SLOVAKIA – STRUCTURAL BACKGROUNDS

Existence of various social welfare policy models which serve as frameworks for organising and providing social services in particular countries can provoke a fundamental question, as follows: “*Is there any ‘pure’ social welfare policy model in Slovakia what is coherently applied with an aim to organise, provide and evaluate social services at present?*” To answer the question we will concentrate our attention to some key analytical aspects referring to values, contexts, structures, processes and selected outcomes in social services field which are symptomatic for a present situation in Slovakia.

2.1 Values in social services as a basis for their high quality

Some authors understand a quality as a distinctive value of a social service, as one value of a service among others (e.g. Dušek and Terbr, 2010). Another approach refers to a set of single values which social services are built upon. The latter one is implicitly applied in the national legislation² which constitutes some general rules what do quality standards mean, how to implement them into social practice and how to evaluate them within usual activities of service providers.

The *national quality system* builds formally upon all fundamental values which are recognised in helping disciplines as a basis to enforce the human-rights approach in social services (A Voluntary, 2010). We can highlight some of them:

- Respect to dignity of every person in need as a basis for adherence all of his/her human rights,
- Human rights constitute a basis for a “normal” every day living of service users at equal basis with a majority (Nirje, 1999),
- Respect to an individuality, integrity and independency of every person in need,
- Support of quality of a person’s life,
- Respect to a person’s natural environment, relationships, his/her own family and community - based sources,
- Individual planning, or widely, individual approach to meeting of person’s needs.

² The valid Act No. 448/2008 Coll. on social services, its relevant articles in connections to the Annex 2.

- Providing person in need with all necessary information as a basis for making appropriate and informed/assisted decisions concerning one's daily living matters (partnership status),
- Support of image and competences as a basis for valorisation of a still devalued client's role (Wolfensberger, 1972, 1992),
- Quality of working conditions in social services (staff, working environment, further education and training, supervision, etc.) as a basis for social services of a high quality and an ordinary contact-based work with users.

Practice which builds upon these values is considered as a way how to overcome still persistent devalued client's role in social services and to provide people in social needs with an access to *good thinks of a life*, such as a respect of others, dignity, acceptance (at least tolerance), positive relationships, integration into valued activities beneficial for others in community, access to well-being, to services of a high quality, to housing, etc. (Thomas – Wolfensberger, 1999). In this regard, K. Leichsenring et al. (2015: 5) point out a change of paradigm in social services, when it goes about “... *a shift from warm – fed – and – clean – care towards creation, support and ensuring quality of life*”.

2.2 Context, structures and processes

The ECO - system's terminology and its fundamental values have been presented in academic literature far earlier, yet by 20 years ago. In our monograph from 1998 we compared main philosophical and methodological pillars of the social care system getting to be expired with an emerging system of social assistance as a subsystem of the social security/protection architecture.³ The social assistance started to be built upon an individual's activity and participation, one's responsibilities for quality of his/her own life; upon individual approach to his/her social needs and natural sources what all required targeting of social interventions. Social workers and other helping professionals started to be perceived as guiding persons of individuals (clients) who were recognised as real experts for their own needs (Repková, 1998).

All the mentioned terminology and the value backgrounds correspond with the presently preferred ECO-system, although they have been formally set up as a *quality ideology* and embedded into social services legislation later, since January 2009. Now, we summarise all important milestones for establishing the quality system of social services in Slovakia since 2009:

³ Comparison built upon the key national document “Conception of the social sphere transformation in Slovakia” being approved by the Slovak Government in 1995.

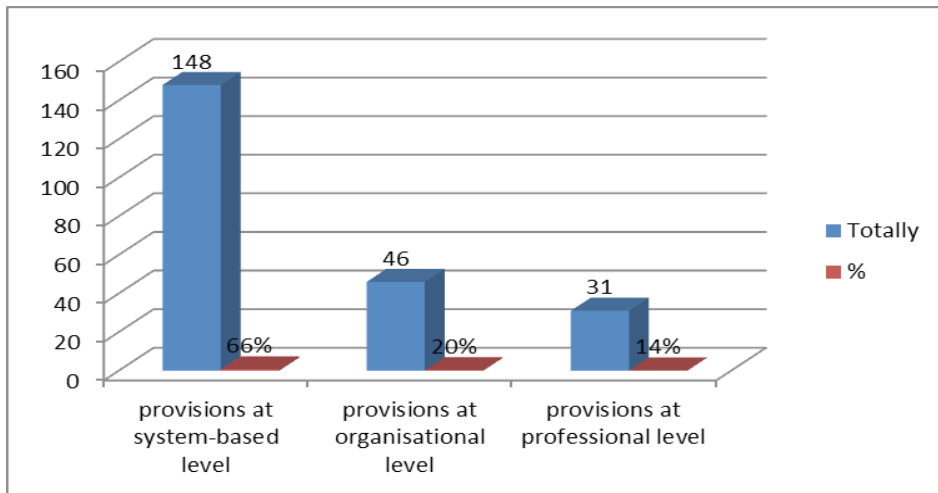
- January 2009: the first single Act on Social services came into legal force; it set up only a basic legal framework for quality issues (Article 104 in connection to the Annex 2 of the act),
- Based on the new legislation the first document titled *National priorities for improvements of social services* was adopted in 2009 (for years 2009-2014),
- At the same time, registration procedures at regional level and accreditation of educational programs for social services, were introduced,
- In 2011 the documents titled *National strategy on deinstitutionalisation of social services system* and its *Action plan for years 2012-2015*, were approved. Based on the documents the first *national project on deinstitutionalisation* of residential social services was conducted,
- Since January 2014 the quality system has been elaborated into details. Totally four areas of quality aspects have been set up, containing of 21 corresponding criterions, standards and indicators. Rules for quality evaluation started to be specified more deeply,
- Since 2015 some intensive methodical works have been started. In 2015 the material titled *Implementation of quality conditions into providers' practice – methodical backgrounds*, was elaborated (Repková, ed., 2015). It became a basis for trainings of service providers how to implement quality requirements into their practise. Subsequently, works on methodical guidelines how to evaluate quality of social services, started to be worked out in 2016,
- In December 2014 the continuing document titled *National priorities for improvements of social services for years 2015-2020*, was approved, with explicitly constituted commitments to enforce quality of social services up to 2020,
- To enforce conditions for implementation and evaluation of quality in social services a *national project* is under preparation,
- According to the valid legislation the *performance of quality evaluation* should be started since January 2018.

3 TRANSFORMATION OF SOCIAL SERVICES IN SLOVAKIA –A PRESENT STATUS

In 2016 we conducted the comprehensive research focused on quality issues in context of social service' transformation (Repková, 2016). Totally 121 service providers of both legal statuses (public, also non-public ones) took place in the quantitative part of the research work. We were interested in their opinion to a

necessity on substantial transformation of social services in Slovakia. Almost 92% of respondents expressed a necessity for it. They were subsequently asked to precise what transformational changes (provisions) should be adopted. From all received answers/statements (totally 225) we compiled three big categories which are illustrated in the Graph 1.

Graph 1: Necessary transformational changes in social services at three levels



Source: Repková, K. (2016: 107)

Totally 66% out of all statements about a need on transformation of social services referred to *provisions at system-based level*, mainly: a need to change financing of social services, to ensure equal status of public and non-public providers, to ensure accessibility and affordability of social services for all in social needs, to establish a comprehensive system of health and social needs' assessment, and integrated long-term care model.

Another category of statements referred to *provisions at organisational level*, mainly a need for deinstitutionalisation of traditional residential services, establishing an effective quality system and its management in organisations, bettering their operational conditions or a need to set up a barrier-free environment. In comparison to the prior category, this one was represented much less, only in 20% of all statements. Significantly lowest representation had a category of provisions at *professional level* (totally 31 statements, 14% out of all) referring to a need for changes in general culture of providing services within a contact-

based interactions with their users. More precisely: a need for more individual approach to service users, a rigorous respect to their human rights, applying of a partner-based communication and treatment, a need for new methods and techniques of their helping practice, also a need for further education and training of the providers' staff.

As can be evident from the selected research findings, according to the professionals conditions for the quality enforcement should come primarily from external environment of service providers (legislation, public funding, general rules and procedures), much less from their own settings and responsibilities (reserves in their own culture of work, approach to service users, methods and techniques of their ordinary practice, and organisational conditions or quality management). According to 95% out of all respondents their services are already of a high quality at present. Although more than a half of them perceived the new quality system as a good idea and a chance to review their own practise, almost 70% out of all do not think the quality system will fundamentally turn their own approach and practise in the future. Nevertheless, some of them recognised a need to better administrative aspects of their services, mainly a need to complete all documentation which will be a matter of future quality assessment, too. In the course of the research (early spring 2016) around 70% of the participating organisations presented their active implementation status, what means they had already started to review their organisational practice according the act's requirements or they had been finishing it (from both, conative, even so administrative points of view).

Contrary to the above mentioned high confidence of majority of service providers in their own practice, domestic academic literature provides some critical reflexions in it. The criticism comes from a side of experts who are intensively interested in quality issues, mainly from the users' rights perspective. S. Holubková and R. Ďurana (2013) have been strongly critical of an institutional culture in social services (originally worked out by Goffman, 1961), of such their *outcomes (impacts)* as isolation of service users from a wider community, preventing them to be fundamentally beneficial for it (for its members), "living under one roof" often against a user's free will, a lack of control over his/her own life, collective treatment, paternalistic relationships between staff and users, social distance between them, operational rigidity and routine, or existence of rules which reflect rather providers' and institutions' needs than those of the users (in previous text we've named it as an organisation's self-reproduction). L. Kost'ová and S. Krúpa (In: Krúpa, 2007) used to criticize preferences of health care aspects in social services and a lack of attention to social needs and rights of their users. In this regard, we pointed out critically getting personal

space of residential service users as “patient-like” or a usage of infantilizing communication with and treatment of users not corresponding with their social status (Repková, ed., 2015).

Taken into account all the available evidence about developments in social services, being incentivised by the emerging quality system, we can formulate some summary observations about current transformational status of social services in Slovakia. When we apply the 3-stages model of social welfare systems (paternalistic, ego-centric, eco-oriented) then we can identify presently some **special mixture** of elements coming out from all of them. *Paternalistic elements* come out from still remaining traditional relations within a triangle: users – policy makers – providers. Users and their families (wide public) expect that governments at all levels, but mainly the state one, are obliged to provide social services “unconditionally”, accordingly to peoples’ needs how they emerge, not taking into account a wider context of social services developments (mainly demographic trends or changes in a family structure). Service providers expect from governments a rigorous organisational and financial support to operate in this type of public interest. Contrary, governments expect from providers, mainly of those with a non-public legal status, to play more active position to get needed financial expenditures on a multisource and quasi – competitive basis. Beyond the paternalistic features of the social services system, we can presently identify a number of elements corresponding with the *Ego-principles*, namely: a persistent tendency to collective treatment with service users whose needs are, in many cases, subordinated to needs of service operation; rigorous registering, protocolling and emerging of formal quality assessment procedures; diversification of social services typology; entrance of new providers into service market, in combination with considerations to regulate number of social services to be supported from public budgets; or, not sufficiently working eco-networks of formal, non-formal and informal users’ sources, yet. Principles of the *eco-system* are embodied in the demonstrated fundamental values of social services (orientation on users’ human rights, activation, participation, respect to dignity, self-determination, partnership, individualisation, community - based interventions).

Despite of an indisputable progress, the current developments show on some discrepancies between the preferred basic values of social services (existing at least formally, as political declarations) and real common practice of service providers. To overcome them a strong effort and cooperation of all actors who impact a picture of social protection, and social service as its part, required is.

CONCLUSION

Since the end of the last decade a very dynamic development in social services field has been observed in Slovakia. Nevertheless, some discrepancies between declarations of a very progressive values in social services, on one side, and the real status of their common practise, on another side, have been emerged (beyond some successful pilot projects). The discrepancies demonstrate still persisting problems and reserves at different levels, including those what are of the system-based nature. “*Sharing responsibilities for social services financing...*” remains still a big and on-going priority and challenge for a coming period, not only for Slovakia, but also for entire European community (Connecting, 2016: 12). In the article, we tried to highlight a need to take into account a wider concept of such responsibilities, in accordance with the ECO-system’s principles. It requires, more than ever before, an effective cooperation of all interested stakeholders, including universities, to deal with multifaceted aspects of quality developments in social services for the future.

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THE MICRO LEVEL OF SOCIAL WORK WITH DYING (CLIENTS)

Marie Macková ¹

Abstract

The paper deals with assessment and intervention on the micro level of social work, in other words, with individuals. The hospice social work includes advocacy for client end-of-life care preference, facilitate communication, the solution-focused approach, the miracle question and the lead of clients rather than directing them. They also discuss the factors influencing intervention – gender, cultural group, sexual orientation and spirituality. Special attention is given to age and personal level of development. Among the main interventions in hospice social work belong crisis intervention, Smith's transegoic model and sense of control.

KEY WORDS: social work, dying, micro level, palliative care

INTRODUCTION

Work with people who are dying or bereaved constitutes one of the oldest specialisms in social work and one of the first instances (in hospices) in which the social worker was established as a valued member of the multidisciplinary team (Saunders, 1990). Equally, the significance of loss was once tacitly accepted as underlying much of the reason and context for all social work intervention (Curren, 2007). During the first half of the twentieth century in the Czech Republic, people typically died at home, cared for by family members. The death of loved ones was a familiar experience. Death was expected as a natural part of life, and religious beliefs about the nature of the afterlife helped many cope with their own deaths or those of loved ones (Haškovcová, 2007). Medical advances in the second half of the century, however, made us think life could be prolonged indefinitely. The major infectious diseases could be controlled through antibiotics, and surgical techniques were developed to control other life-threatening illnesses. Many patients could be resuscitated. Death has shifted from families to hospitals. Our society has become increasingly a death-denying society. Holloway (2007) suggests that four factors shape and mediate our experiences about death (as individuals, societies and professionals): changing patterns of dying; the globalisation of death; shifting boundaries between the public and the private; and cultural pluralism. This prolonged life has not necessarily been

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experienced as a good quality of life. Increased numbers of people living in a serious state. Many of these are without adequate pain control, without adequate emotional support. Loss of dignity during the dying process has been linked with psychological and symptom distress, heightened dependency needs, and loss of the will to live. These patients may be regarded as failures and avoided by health care professionals. In this context created hospice movement.

1 DEVELOPMENT OF PALLIATIVE CARE

A movement founded in the 1960s in England by Dame Cecily Saunders. It is little known that Dame Cicely Saunders is qualified in three different professions; she first became a registered nurse; then a certified social worker, and finally, she became a qualified doctor when she recognised it was the only way she would be able to realise her ambition to help those in pain in the way she wished. Saint Christopher's in Sydenham in South East London, which is Dame Cicely's 'own' hospice, opened in 1967 and had largely been inspired by David Tasma, one of her early patients. Since the opening of Saint Christopher's more than 220 similar units have been set up throughout the United Kingdom. Many of these have specialist palliative care teams which go into patients' homes working with other community healthcare professionals. Many also have day care facilities. Although hospices have cared primarily for people who have advanced cancer, many are now including people with other life-limiting illnesses, such as Motor Neurone Disease and AIDS. Many people from all around the world visited hospices in Britain and saw what was being done to help those in need. Following Dame Cicely's example, they returned to their own countries, determined to give similar help to their own people. In the Czech Republic start hospice movement Marie Svatošová, which opened first hospice in Červený Kostelec 1995. Now there are 17 hospices with 476 beds. See table 1.

Table 1: Overview of capacity hospice beds in individual hospices Czech Republic in 2016

Hospice	Number of beds	Founder
1. Hospic sv. Zdislavy, Liberec	28	o.p.s.
2. Hospic sv. Štěpána, Litoměřice	26	z.s.
3. Hospic v Mostě, Most	17	o.p.s.
4. Nemocnice pod Petřínem, paliativní odd., Praha	13	cpo
5. Hospic Štrasburk, Praha	26	o.p.s.
6. Hospic Malovická, Praha	30	z.s.
7. Hospic Dobrého Pastýře, Čerčany	30	o.p.s.
8. Hospic sv. Jana N. Neumanna, Prachatice	30	o.p.s.
9. Hospic Chrudim, Chrudim	30	z.ú.
10. Hospic Anežky České, Červený Kostelec	30	cpo
11. Hospic sv. Alžběty, Brno	20	o.p.s.
12. Dům léčby bolesti s hospicem sv. Josefa, Rajhrad	50	cpo
13. Hospic na Sv. Kopečku, Olomouc	30	cpo
14. Hospic Citadela, Valašské Meziříčí	28	cpo
15. Hospic Frýdek-Místek, Frýdek-Místek	30	p.o.
16. Hospic sv. Lukáše, Ostrava	30	cpo
17. Hospic sv. Lazara, Plzeň	28	z.s.
Celkem	476	

Note: o.p.s obecně prospěšná společnost,
z.s. zapsaný spolek,
cpo církevní právnická osoba,
p.o. příspěvková organizace

Source: Asociace poskytovatelů hospicové paliativní péče

The recommended number of beds is 5 per 100 000 population, which for the Czech Republic represents a capacity of 516 hospice beds. Hospice sorely missing in the Vysocina region and Karlovy Vary (Ministerstvo zdravotnictví, 2016). Hospices provide palliative care for people in need, they support families during their relative's sickness and also provide them with the support after bereavement.

2 ROLE OF SOCIAL WORKER IN PALLIATIVE CARE

The term multidisciplinary has been described widely across different settings, practices and professionals. The definitions of this term seem to vary from it referring to being a team or a group of people from different disciplines who work together and/or provide coordinated services.

As a part of the interdisciplinary team, social workers will represent the individual/family's wishes at every team meeting and advocate within other systems to enhance their responsiveness and insure that each family receives care that is hand tailored to fit their needs. After death, social workers provide bereavement information, education, and support to help survivors cope with the death and the subsequent adjustment ("new normal") to a life without their loved one. Reese and Raymer (2004) showed, among other things, that there was higher client satisfaction and fewer nights of inpatient care when there was more frequent social work intervention on hospice teams.

Social workers are strong advocates for self-determination and culturally appropriate care. They are trained in evaluating the strengths of individuals and families and understand that good medical care requires that the wishes and needs of the individuals being served are respected. When cure is no longer possible, a host of psychological, physical, and spiritual stressors arise that social workers are specifically trained to assist the individual and family to cope and manage.

Social workers assist individuals and families in the following areas:

Symptom Management. Physical symptom management, such as relaxation exercises to help with nausea or pain, is just one example of the services that social workers provide.

Psychological and Spiritual Stress. Psychological/spiritual stressors such as anxiety, guilt, or depression can be addressed and managed through counseling (including emotional support), education, or short-term psychological techniques.

Ethical Dilemmas. Ethical dilemmas (such as withdrawing or withholding treatment) may also arise, and social workers are adept at problem solving, advocacy and facilitating the proper resources to find solutions that are helpful for each family.

Financial Stress. Financial concerns are often an issue at the end of life, and this is another area where social workers are extremely knowledgeable and successful at helping people navigate resources such as health insurance coverage, medical costs, and bills, or accessing disability income.

Advance Care Planning. Assistance with advance care planning to ensure that all treatments meet the wishes of the people receiving care is also within

the purview of social work intervention. Advance care planning entails making decisions about treatment in end of care and funeral planning, and communicating this with loved ones and in legal documentation.

Grief and Bereavement. Coping with loss and the ensuing grief process is another area in which social workers are well versed. Dealing with the intense emotions associated with grief can be overwhelming without the proper support and information. Social workers have information and skills that help facilitate grief and help people avoid obstacles that can lead to more complicated reactions like depression.

Social workers on hospice and palliative care teams make an initial psychosocial evaluation that is essential to making medical care effective and appropriate for each unique family. In this evaluation, questions include spiritual and cultural beliefs so that social workers can help educate other team members as well as themselves about what each family wants, and even more importantly, what they might not want.

Past history is also crucial, because social work takes into account past strengths of the family, and identifies coping skills and strengths people have already utilized. These skills and strengths are drawn upon and enhanced to help people during their current challenge. If there are special difficulties, such as multiple losses or financial stresses, social workers help make plans to provide extra interventions, support, and/or resources.

3 BIOPSYCHOSOCIAL ASSESMENT AND INTERVENTION

This section will discuss intervention techniques for enhancing well-being in hospice patients and their significant others. While using these techniques, the social worker should always be open to the possibility that some clients will be unable to accomplish these steps. Hospice philosophy's perspective is that, in this case, the worker simply offers his presence.

Terminally ill patients have many threats to their psychological well-being. Addington-Hall and O'Callaghan (2009) noted, that in comparison to patients being actively treated for cancer, hospice patients have less incidence of worrying, feeling sad, and feeling nervous. This may be partly attributable to the impact on development of confrontation with mortality, partly attributable to a unique perspective on the part of hospice patients, and partly attributable to social work intervention with these issues (Reese, Raymer, 2004).

Probably the most important value within hospice philosophy is patient self-determination. This along with hospice perspectives is inherently consistent with values and strengths perspective of the social work profession.

Social workers remind team members of this perspective in their advocacy for client end-of-life care preferences. This includes fostering the patient's active participation in making decisions, advocating for the family's perspective with the team, as well as advocacy with organizational policy (Bern-Klug, Gessert, Forbes, 2001). Many times the patient and family need help communicating their wishes to each other and coming to a resolution of differences in perspectives. The social worker can help facilitate this communication.

The solution-focused approach lends itself to use in hospice (Simon, 2010), because of its strengths perspective as well as because it can be used as a brief model, providing a powerful impact even one session.

The miracle question can be tailored to the end-of-life care situation. "Imagine having a sense of peace, feeling relaxed and calm about this situation. How do you imagine you want to spend your time? What would you like to be doing?" Every day becomes precious for hospice patients, and it is worthwhile to discuss what entails quality of life. In this way clients can be supported in focusing on solutions rather than problems, in developing quality of life for their final days. This approach also follows the lead of clients rather than directing them, both consistent with hospice philosophy and social work values.

3.1 Factors influencing intervention

Any intervention of social workers are affected by many factors. The most common factors can include gender, culture, sexual orientation, spirituality and age. Now we will focus on each factor in more detail.

Gender There are some common differences in the experience of women and men when facing mortality. Women express more distress than men, but this appears to be because they are more willing to discuss issue or are more aware of them. Women use an emotion-focused coping style, while men use a problem-focused coping style (Noppe, 2004). Women may respond better to interventions providing social support, including peer support groups, while men may be more likely to respond to a more problem-focused approach.

Culture Cultural group predicts social support. Some cultural groups are quite communal, and responsibility for each other is expected. In such groups, as with Asian people, elderly parents are cared for their children, and lack of social support is not as common. Cultural group also indirectly affects one's emotional response to terminality. Understanding of cultural norms and perspectives is key to work with clients that differ in cultural background from social worker. One must learn about traditional norms of diverse cultural group (but be aware about stereotyping, each client is an individuality), participate in cultural competence

training, and conduct outreach to diverse community leaders and their people. Tasks for the social worker pertaining to cultural group include exploring patient and family's connection to their ethnic background.

Sexual orientation The lesbian, gay, bisexual, and transgendered population may have special concerns caused by insensitivity to their needs or discrimination on the part of health care providers, lack of legal protections, lack of access to resources, and physician refusal to communicate with the patient's partner despite a power of attorney. Partners may not be allowed to visit the patient while in care, may be left out of medical decision making and do not have rights to social security. Problem is also plans for minor children. The legal documents as wills, advance directives, durable power of attorney must be clear (Smolinski, Colon, 2011).

Spirituality Understanding the client's belief system allows the social worker to gear interventions toward the client's point of view. Spiritual beliefs and practices may be important sources of strength for the client. A belief system may be based on a religion or on the client's individual worldview or philosophy of life. The social worker will want to inquire about religious background and current affiliation with organized religion, any rituals or practices that client or family members want integrated into the care plan, and any religious leaders, or supports that the client would like to be involved. Clients that don't have traditional rituals may be encouraged to create them for the same reason. The role and nature of spiritual intervention is defined by the client, not by the social worker (Driscoll, 2001).

Age Client needs are depend also on age of clients. Erikson's psychosocial theory (1950) describes psychosocial issues according to level of development. Most hospice patients are sixty-five or older – in Erikson's later adulthood stage, the developmental task is acceptance of one's life as it is. The ability to accept one's life the way it is makes it possible to have a sense that one's life has been meaningful.

Different issues arise in work with young adults. It is more difficult to accept one's life as it is when you have not lived as long as expected, when you are just establishing an identity, or are working on establishing intimacy or raising children. Harrawood (2009) noted that younger adults have much unfinished business - they have not yet accomplished or experienced what they hoped for in life and may feel that such an untimely death is unfair. In my experience, they also have higher death anxiety and greater death distress than older adults.

First priority in the needs of adolescents at the end of life (ages 15 – 21) was personal control – including education about their disease, medical information, structured conversations, spiritual support, and assistance with funeral arrangements (Jones, 2006). Their second priority was to continue

normal activities – including school interventions, normal childhood activities, and assistance with talking to friends. The third priority was communication and expression, including ability to talk freely about their fears and feelings, assistance with sharing concerns with parents and siblings, and creative expression. Fourth, they needed consistent caregivers and companionship. Finally, they needed control over medical and treatment decisions, including pain control and symptom management and the choice of where to die (Dobříková, 2010).

A small child may accept death more readily than an adult. At the same time, for a child to cope with one's own terminality, she needs strong family support (Cincotta, 2004). Priorities of younger children (up 15 years) study Jones (2006). First priority was communication and expression – including assistance with sharing concerns with parents and siblings, the choice of where to die, and the ability to talk freely about their fears and feelings. Their second priority was disease information and medical control – including medical information, education about the disease, and control over treatment decisions. Third was participating in normal activities – including school interventions, normal childhood activities, and assistance with talking with friends. Fourth was counselling and support – including companionship and structure conversations. And last was the need for consistent caregivers.

4 MAIN INTERVENTIONS USED IN THE CZECH HOSPICES

The degree of religiosity was small and rapidly decreasing in the Czech Republic during the time of communist regime. Indeed, the beginning of the 1990s was actually committed to the revival of faith in the Czech Republic. The weakening influence of traditional religion does not mean that the Czechs are becoming less religious; it means that another type of spirituality is influential. Spirituality is more than religion and has a place throughout Czech society (Macková, 2011). The Czech hospices are places great emphasis on spirituality and spiritual development of personality.

4. 1 Spiritual development of person

Smith (1995) developed the transegoic model, the therapy based on transpersonal theory. This model uses intervention designed to help clients to develop the awareness of an identity that is broader than social roles and physical abilities. It is based on perspective that dying has the potential for great growth and transformation and aims to foster this process. It is composed of four stages, with two phases within each stage. See table

Table 2: Smith’s transegoic model

STAGE 1: NORMALIZATION OF DEATH
Phase 1: Recognizing role captivity.
Phase 2: Resolving prior grief and fears.
STAGE 2: FAITH IN THE EXISTENTIAL SELF
Phase 1: Discovering one’s meaning in life.
Phase 2: Identifying the will or the “I”.
STAGE 3: EGO “DISATTACHMENT”
Phase 1: Discovering One’s meaning in death.
Phase 2: Disidentification.
STAGE 4: SELF-TRANSCENDENCE
Phase 1: Acknowledging the transpersonal self.
Phase 2: Discovering one’s transpersonal mission.

Source: Smith, 1995

4.2 Crisis intervention

Crisis intervention is also very frequently used intervention. Patients are being referred to hospice only during the last few days or weeks of life. This limits the scope of team intervention and short-term model are key. In a short-term model, immediate needs must be prioritized and met quickly. Needs must be conceptualized in a holistic was, including biopsychosocial and spiritual needs. Chung (1993) notes that in the brief time available for hospice social work intervention a social worker cannot be nondirective. She also makes the point that the nature of crisis is that old coping methods are not working, and the client may need suggestions for new ones.

4.3 Sense of control

Individualism, belief in a right to autonomy and empowerment are inherent in our worldview. Patient self-determination is cornerstone of hospice philosophy and of key importance to many patients. Maintaining a sense of control, including involment in treatment decisions and having preferences honored about arrangements in their environment, may be a vital aspect of psychological well-being (Knight, McNaught, 2011). Hospice social workers have indicated that unmet needs included fear of losing indenpendence and being a burden on loved ones. A sense of control may also reduce the level of death anxiety, grief

and depression. Thus sense of control is an important aspect for hospice social work intervention (Macková, 2015).

CONCLUSION

Palliative care and hospice offer social workers the privilege of supporting individuals and families during some of the most universal—and vulnerable—life experiences: coping with serious illness, facing one’s mortality, the dying process, and bereavement. Hospice and palliative care social workers witness, on a daily basis, the struggle to find meaning in the face of serious illness and death. They have a unique opportunity to help people identify, try to answer, and live with core existential questions. Social workers may also enjoy the positive regard with which palliative care and hospice are perceived by many individuals, families, and other service providers.

Many hospice and palliative care social workers enjoy the collegiality of working closely with an interdisciplinary team and appreciate working in a medical specialty that prioritizes clients’ psychosocial well-being. Nonetheless, social workers in these settings face challenges similar to social workers in other medical environments: the need to be conversant in medical and pharmacological matters (while maintaining scope of practice), to educate other members of the team about clients’ psychosocial circumstances, and to justify the value of social work interventions.

Self-care is vital to professional and personal sustainability in hospice and palliative care. Social workers specializing in these practice areas face loss on a daily basis and may internalize this loss in a variety of ways. On a professional level, hospice and palliative care social workers must maintain strong professional boundaries, continually redefine client “success,” and find ways to honor professional grief when a client dies or experiences a progression in illness. On a personal level, taking time off the job, investing time and energy in enjoyable activities and supportive relationships, and nurturing a sense of abundance can help social workers maintain perspective and energy amid the challenges of hospice and palliative care.

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THE ROLE OF THE STATE IN DIMENSION OF SOCIAL ASSISTANCE FOR SENIORS

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Abstract

This article is titled "The role of the state in dimension of social assistance for seniors". The issue of aging populations is, in the conditions of civilization more and more serious. This problem is undoubtedly related to several factors and it is a complex phenomenon that has to be understood in a certain continuity of society development. On the one hand, there is a better medical care causing that older people reach a higher age, on the other hand, less children are born. The article focuses on the issue of the assistance for seniors in terms of the role taken by state. Crucial role is played by political parties and political movements, which take a control over the state power after the elections, and pursued their political programs. The objective of this paper is to identify how the state through the political parties approaches the social assistance for seniors. The article is divided into two parts. In the first part we deal with the theoretical aspects of aging. The second part analyses the political parties and their attitudes towards aging from the perspective of pre-elections programs. Also, we will focus on the Program declaration of the government of the Slovak republic in the area of aging population. The methods used in the paper are mainly the study of literature and documents, as well as an analysis and comparison.

KEY WORDS: political parties, social assistance, social policy, seniors.

INTRODUCTION

The issue of the aging is becoming more popular as we are aging. By each second we approach to senior age, as the time is relentless. Senior age has its characteristics, which principally include the wisdom and experience, on the other hand, it is inclination to conservatism. The contribution deals with the role of the state in helping the seniors. The paper is divided into two parts. The first part has a theoretical character. It deals with the social state and its connection with aging in general. This section identifies the problems associated with aging. The second part is analytical and is working with documents, which are the programs of political parties of the Program declaration of the Slovak government from the perspective of aging. The methods we use in our work include the study of literature and documents, their analysis and comparison.

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1 THE THEORETICAL ASPECTS OF AGING

Politics in Slovakia started to change its form and direction towards democracy, market economy and integration during 1990s. (Kubičková, Dudžáková, 2015) It also appeared on the character of the state. The social dimension is included among the essential characteristics of the state. (Čemez, 2015) The issue of the welfare state is closely connected with the demographic situation. The basis of the welfare state is a redistribution. In this context, it is possible to select the two political-ideological views. On the one hand, there is right-wing view, according to which the reallocation leads to punishment of those, who create value –mainly entrepreneurs and this leads to their demotivation.

Another view is left-wing, according to which the values should be redistributed through the tax and social policy. These groups declare themselves to progressive taxation, i.e. the higher earnings, the higher percentage of taxes. The resources obtained from taxes are redistributed by social policy to those who need it.

As an example of a welfare state could be the Nordic countries, where the tax burden for certain groups represents more than half of the profit. Because of this reason these countries can afford high standard of living for the population in form of social benefits. There occurs a new problem, which is the migration, or moving of people from their homelands. (Slovák, 2015) The social state should also deal with this issue in certain way.

Another dimension is the wealth of nations (states). There are countries which are rich thanks to mineral resources, present on their territory. The American political scientist Fareed Zakaria defines them as rentier states that due to the richness can follow a generous social policy towards its citizens, even though they may not be democratic. Empirical research shows that these citizens, although they have some fundamental human rights (political rights), are nevertheless satisfied thanks to a rich social policy. By this, we can say that the state buys their loyalty. If we confront above mentioned facts with Slovakia, so it can be said that Slovakia is a small country and is not among the countries with roc mineral resources. In addition, after the year 1989 it is possible to observe the change of property relations in the sense of the privatization of state assets, therefore, profits do not go to the state budget, but into private pockets.

Scientists dealing with aging have developed several theories that can explain why there is actually the aging of cells. These are the following theories: (Mlýnková, 2011)

The theory of external influences–ecological theory says that external influences influence the aging process in a positive or negative way. The

chemical substances on the human organism, food composition, interaction of micro-organisms, lifestyle and exposure to stress and other psycho-social factors are included,

The theory of free radicals—free radicals damage the membranes of cells. Free radicals are harmful compounds generated in the organism. Their excessive amounts harms the body,

The genetic theory—the length of life is genetically programmed in advance. If parents reach a higher age, it is likely their children will also reach a high age,

The theory of immunity—when there is a cell division errors that the organism along with increasing age is not able to recognize and eliminate. The result is auto-immunity process leading to the destruction of its own cells.

Human during his existence goes through several stages of development, each of which has its own characteristics. Each developmental stages solve certain problems. (Kubíčková, 2015) Aging is an irreversible process and significantly manifests itself in most countries of the European continent, and that can be described as the region with the oldest population (Lukáč, 2015). Aging, the seniors and care about them is a complex issue, which has interdisciplinary character and is necessary to choose the cross section approach. This issue is an inter-section and relates mainly to the departments of health, social work and social services. The key issues within the topic of aging include pensions and care for the elderly.

As regards the pensions, often they are not sufficient for a decent standard of living, which the seniors deserve, taking into account that they have worked productive period of his life and now should live from the results of their productive activities. The problem of low pensions lies in the relatively low wages in the period prior to 1989. The amount of these salaries then derives the amount of the pensions. Low pay means low pensions, while prices of goods and services much more increased. Seniors have increased cost of medical care and medicines. The pharmaceutical policy of the Slovak republic is also related to that issue.

If we move to the second issue, which is social care, so currently the seniors reach relatively high age, which is a given by the fact that the medical care is at a relatively high level. On the other hand, a lot of seniors is not capable of taking care by themselves, or their family is unable to take care of them. It is also given by the economic and social changes, which practically already there is no so-called big family, in which man was born, lived the life, and also died. Such a big family was able to take care by their mutual ties of its members. (Horváth, 2013)

Nowadays, it is possible to observe the increasing atomization and individualism in the society and as well as the ruining not only the original large

family, but even the so-called nuclear family, which consisted of children and their parents. It links with the current lifestyle, which focuses on the individuality, performance and profit, and not on the solidarity and togetherness among people. It turns out that the aging of the population expresses that in a few years the number of seniors will be much higher than now. (Kubíčková, 2013)

It is possible to indicate the following obstacles in the provision of care by family members: (Mlýnková, 2011)

- inconvenient housing—a small apartment, there is a loss of privacy, if the senior moves into a family of an adult children,
- central generation employment –the most of people in the working age cannot afford to stay at home with their parents and dedicate them daily necessary assistance,
- the obligation in relation to their own family—the middle generation is dedicated to the care of children, household,
- the distance of the families—aging parents live in their own homes, their children, homes of the two families may be apart from each other,
- the exhaustion and fatigue of family members while taking care of senior—usually, it is not possible for a man at middle age to ensure the family, go to work, and also take care for an aging parent and his household, especially if they are staying far apart.

Problems of the elderly is possible to see in multiple areas:

1. Financial—financial problems are related, as we have already mentioned at another point in our paper, with relatively low pensions and the relatively high prices of goods and services,
2. Social—the current period is eager and is not in favor in older people, while in the previous socio-economic formation we appreciated more the older people. To a large extent this is linked also with the media, which they give as an example of the cult of youth and not the cult of maturity, experience and life wisdom, the seniors are put aside. Social changes are also closely connected with the retirement. This is one of the major changes in the life of person that can affect in a negative and positive sense. Here the role of the working man terminates, who by his work activity generates value for the population and the entire state. The older person gets the new role of the pensioner, which on the contrary receives from the state his pension and by his work he does not contribute the society, (Mlýnková, 2011)
3. Psychological changes—aging is accompanied by various changes in the psyche that with increasing age can affect each person individually. There is a deterioration of cognitive functions, i.e. perception, attention, memory,

imagination, thinking. It may also decrease the flexibility of thinking or mental vitality. Unchanged remains the vocabulary, language ability, mode of expression of thoughts, intellect. Some of the psychological processes, on the contrary improve e.g. endurance, patience, ability of judgement, tranquility, (Mlýnková, 2011)

4. Health—with older age, the human body more and more used and gain more various diseases, by this we mean changes at the mental and physical level.

2 ANALYSIS OF THE PROGRAM DOCUMENTS

The state represents one of the actors of the policy. Its task is to balance the pressures inside of the society. It can be said that according to the formal characters we live in Slovakia in a democratic society. The democracy means the government by the people. It results that people should rule. In fact, we speak in our terms and conditions about the various other forms of government, such as meritocracy, mediocracy, partocracy, oligarchy democracy, etc. It is related to the fact that the people directly do not rule and because of the fact that democracy is in its initial meaning a technically feasible only in smaller communities. In addition, there is the so-called iron law of oligarchy Robert Michels, according to who there is a certain elite in each community, which the government and the mass generates and takes the control. In the Slovak conditions there is an indirect democracy instead of direct democracy, when its representatives give the rules. It can be said that these are political parties, which are governed by the state.

Political parties among themselves differ in what solutions to societal problems they offer. The fundamental division of political parties by ideological affiliation is left-wing and right-wing. In general, the left-wing political parties can be considered as more protective as they put the emphasize on the intervention of the state towards the individual and the redistribution, reduction of differences between people. On the contrary, right-wing political parties consider the differences between people to be natural and promote market solutions, the individual should rely on themselves.

It can be stated that aging is a serious problem in today's society. Nevertheless, some of the political parties in their programs are dedicated to this issue only marginally. As a sample it is possible to use the political parties and movements that entered into the National council of the Slovak republic after the parliamentary elections in 2016.

Ludová strana Naše Slovensko, (transl. People's party –Our Slovakia) chaired by Marián Kotleba, states in their program that they want to change the retirement age to 60 years. (Volebný program Ludovej strany Naše Slovensko,

2016) The presence of this party signalizes that in our society are present antidemocratic and intolerant tendencies in great extent. (Mihálik, 2015)

Political movement **Sme rodina (Boris Kollár)** (transl. We are the family) proposes the extension of the capacity possibilities of the residential facilities of social services in the public sector and the introduction of the assistant in the home for old people, the disabled and for single parents with children. (Volebný program hnutia Sme Rodina (Boris Kollár), 2016)

According to **Slovenská národná strana** (transl. Slovak national party) it is necessary to adopt a strategy of a new financing of the social sphere and the strengthening of the state social insurance in relation to pension insurance. It also recommends to establish the new supplementary pension system focused on long-term care for inactive and senior citizens and the creation of the employee pension plans as part of the pension supplementary savings. (Volebný program Slovenskej národnej strany, 2016)

Political party **Most-Híd** (transl. Bridge) proposes an increase of contributions to the 2nd pillar of the pension system to 9 % and to introduce an automatic entry into the 2nd pillar for young people entering the labour market with the possibility of cancellation introduction of regulatory mechanisms within the management of the funds, which would achieve a greater return of investment. Regarding the 1st pillar, they propose the introduction of a minimum pension. They also enforce the automatic increase in retirement, depending on life expectancy. (Volebný program strany Most-Híd, 2016)

Movement **Obyčajní ľudia a nezávislé osobnosti** (transl. Ordinary people and independent personalities) offer various suggestions. These proposes include the constitutional protection of 1st and 2nd pillar of pension security. The pension management companies, which keep the pension accounts of savers should have a reduced payment. Children should have the opportunity to contribute to the pension of their parents by 1% of their contribution basis, and according to this principle the seniors would have been more rewarded with a greater number of working children. Also, the savers should be annually informed about the estimated amount of the pension from 1st pillar and also about the amount savings for their personal pension accounts from the 2nd pillar. (Volebný program hnutia Obyčajní ľudia a nezávislé osobnosti, 2016)

Political party **Siet'** wanted to enforce a constitutional protection of percentage of the contributions that flow to the second pension pillar scheme, and also a minimum pension. This political party also wanted to introduce a new funding model for home care services, where citizen will be able to choose a residential form of social services or home care service freely. (Volebný program strany Siet', 2016)

Sloboda a solidarita (transl. Freedom and solidarity) wants to gradually strengthen the degree of solidarity in 1st pillar, decrease the remuneration for pension fund companies, to increase the contributions to the 2nd pillar to 9 %, introduce compulsory participation in 2nd pillar to 35 years of life. (Volebný program strany Sloboda a Solidarita, 2016)

If we compare the proposals of different political parties and movements it is possible to see a number of similarities and differences:

1. Retirement age,
2. First pillar,
3. Second pillar,
4. Alternative insurance.

The social policy of political party Smer – SD is based on the steps, enacted by the Government of Slovak republic in the previous election term. The political party Smer – SD and their social policy is created especially through the so-called social packages. These social packages are related particularly to the help of socially disadvantaged groups, economic growth support, employment increase and others. There is an increase of minimum wage, minimum pension, payment of the Christmas contribution for pensioners, and a gap between the earnings of an employed person and the maximum amount of social benefits deepened. Free rail travelling for pensioners and students has been established. There is a support of the dual education, pre-school education and others. (Volebný program strany Smer – SD, 2016)

A very serious problem is **the age of retirement**. This is expressed by two political parties: Ľudová strana – Naše Slovensko (transl. People's party – Our Slovakia) a Most-Híd (transl. Bridge). The first of these parties proposes that the retirement age to be 60 years (Volebný program Ľudovej strany Naše Slovensko, 2016), party Most-Híd (transl. Bridge) proposes to automatically increase the retirement age depending on life expectancy. (Volebný program strany Most-Híd, 2016) If we compare these two proposals, so in the case of Ľudová strana – Naše Slovensko (transl. People's party –Our Slovakia) their proposal is unrealistic. Due to the demographic situation, it will be probably needed to continue to increase the retirement age, as proposed by Most-Híd (transl. Bridge)

If we move to **the first pillar pension scheme**, so the Slovenská národná strana (transl. Slovak national party) proposes the strengthening of the state social insurance. (Volebný program Slovenskej národnej strany, 2016) Party Most-Híd (transl. Bridge) proposes the introduction of a minimum pension in terms of the first pillar. (Volebný program strany Most-Híd, 2016) Movement Obyčajní ľudia a nezávislé osobnosti (transl. Ordinary people and independent

personalities) proposes a constitutional protection of first pillar. (Volebný program hnutia Obyčajní ľudia a nezávislé osobnosti, 2016) Party Sloboda a Solidarita (transl. Freedom and Solidarity) promotes the strengthening of solidarity in the 2nd pillar. (Volebný program strany Sloboda a Solidarita, 2016) At this point, Slovenská národná strana (transl. Slovak national party) supports state 1st pillar of the pension scheme at the expense of the private 2nd pillar. (Volebný program Slovenskej národnej strany, 2016) The party of Freedom and Solidarity promotes the strengthening of solidarity in the 2nd pillar. (Volebný program strany Sloboda a Solidarita, 2016)

As regards **the 2nd pillar of the pension scheme**, Most-Híd (transl. Bridge) proposes to increase the contributions to the 2nd pillar to 9%, and it should be an automatic entry into the 2nd pillar for young people, with the possibility of a cancellation. (Volebný program strany Most-Híd, 2016) Movement Obyčajní ľudia a nezávislé osobnosti (transl. Ordinary people and independent personalities) proposes a constitutional protection of 2nd pillar. (Volebný program hnutia Obyčajní ľudia a nezávislé osobnosti, 2016) The party Sloboda a Solidarita (transl. Freedom and Solidarity) wants to increase the allowances to 2nd pillar to 9%, introduce compulsory participation in 2nd pillar up to 35 years of life. (Volebný program strany Sloboda a Solidarita, 2016)

Some political parties also offer in their programmes **the alternative forms of pension insurance**. Slovenská národná strana (transl. Slovak national party) proposes a new supplementary pension system. That should be focused on long-term care for inactive and older people. They also recommend the creation of an employment pension scheme. (Volebný program Slovenskej národnej strany, 2016) According to the movement Obyčajní ľudia a nezávislé osobnosti (transl. Ordinary people and independent personalities) the children should have the opportunity to contribute to the pension of their parents, 1% of their contribution base. (Volebný program hnutia Obyčajní ľudia a nezávislé osobnosti, 2016)

In terms of the program declaration of the government in the area of aging and seniors, it can be stated that pension scheme and its distribution on the different pillars are considered as the core themes by government. In the first pillar it wants to allow the possibility of choice. The government declares the modification of the valorization of pensions in first pillar. The government also declares the so-called Christmas contribution, especially for the so-called retired people. (Programové vyhlásenie vlády SR, 2016)

CONCLUSION

In conclusion it can be stated that the programs of political parties in the field of seniors and care about them relates mainly to the age of retirement, the first pillar pension scheme, the second pillar of the pension scheme and the alternative insurance. In these areas it is possible to see some differences among the various political parties. In case of retirement age suggests the Ľudová strana – Naše Slovensko (transl. People's party – Our Slovakia) the age of 60 years and the party Most-Híd (transl. the Bridge) proposes a gradual increase of the retirement age. As regards the first pillar pension scheme, so Slovenská národná strana (transl. the Slovak national party) proposes to strengthen the Social insurance agency of the Slovak republic. Party Most-Híd (transl. Bridge) wants to introduce a minimum pension. Movement Obyčajní ľudia a nezávislé osobnosti (transl. Ordinary people and independent personalities) proposes the constitutional protection of 1st pillar. In the framework of the 2nd pillar of the pension scheme the party Most-Híd (transl. Bridge) increase the contributions to 9%. Movement Obyčajní ľudia a nezávislé osobnosti (transl. Ordinary people and independent personalities) proposes a constitutional protection of 2nd pillar. The party Sloboda a Solidarita (transl. Freedom and Solidarity) wants to increase contributions to 9%. At the level of the alternative forms of pension insurance Slovenská národná strana (transl. Slovak national party) wants a new supplementary pension system aimed at long-term care for inactive and older people. Movement Obyčajní ľudia a nezávislé osobnosti (transl. Ordinary people and independent personalities) suggests that children could contribute to the pension of their parents, 1% of their contribution base. In terms of the Program declaration of the government of the Slovak republic, the government committed itself within the 1st pillar to the options and valorization of pensions and to the preservation of Christmas contributions.

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SELECTED ASPECT OF INFLUENCE OF GLOBALISATION ON LABOUR MARKET AND ON UNEMPLOYMENT IN THE CZECH REPUBLIC AND IN THE MORAVIAN-SILESIA REGION

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Abstract

The paper focuses on a brief analysis of the impact of globalization on the functioning of national economies, with an emphasis on competitiveness and the labour market - especially the tendency of its development. In this context, it particularly points out to behaviour of multinational corporations that decisively influence economic processes in the world and at national level. It also focuses on the potential risks and challenges of the world economy, which could directly (in a way of competition, prices, etc.) as well as indirectly affect the national economy. One of these effects is unemployment - mainly the structural one - at both the Czech Republic and the Moravian-Silesian Region.

KEY WORDS: discrimination, globalisation, unemployment, transnational corporations, labour market

INTRODUCTION

The aim of this paper is to point out the correlation among the ongoing globalization processes and their impact on the functioning of national economies. Attention is mainly paid to the influence of transnational corporations, which use their position (which is particularly characterized by the global transfer of production to areas with cheap raw materials and labour; sales in states with higher purchasing power; the use of tax breaks; often based in tax heavens, etc.), to reduce the competitiveness of national economies. Further result is the employment of workers for minimal wages; transferring responsibility for services to subcontractors and importing manufacturing components from cheaper destinations. All this has a negative impact on labour market situation in nation-states. It strengthens existing forms of discrimination and provokes new forms of discrimination in the labour market, and also affects the unemployment rate in the nation-states. The paper points out to these facts particularly in the surroundings of the Czech Republic and the Moravian-Silesian Region. To

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elaborate on the topic, foreign and domestic literary sources as well as statistical data are used in this article.

1 THE CURRENT GLOBALISATION EFFECTS IN ECONOMY

Nowadays one may say that the economic (and social) as well as employment consequences of globalization are enormous. It makes itself felt mainly (but not only) in the form of the global labour market and transformation of whole economies (and their social model). The result of this process is a whole complex of changes in the social and labour field. We are about to mention only some of them.

As a result of globalization the position of nation-states is changing - by creating super-gigantic companies and their actions on behalf of transnational corporations (TNC). They are the driving force in the field of international trade, finances and manufacturing. Other features include transfers of tax sites, outsourcing and off-shoring. It concerns decentralization, which makes itself felt by displacement of activities that are not used by a business entity during the year. They transmit them to sub-contractors, whether in development and transportation fields or accounting, law and so on. It comes to a downsizing to a so-called Core Business, whereas the TNC downsizing has a significant influence on the growth of their financial strength.

TNCs apply forcible pressure on nation-states to take over the utmost share of social, environmental and other costs. They are able to do so because of their concentrated power, planetary geographic mobility and flexibility (Keller, 2011). From the view-point of smaller and economically weaker states a detachment of economic power has had several major consequences: extensive liberalization and deregulation caused their global economic integration. This has reduced the role and influence of the state in external economic relations to a minimum; ties were cut within the territory of the state that is strictly defined by its borders and economic space and which extricated from under the control of its real regulatory and audit engagements; the accountability of businesses has significantly weakened in relation to the issues and problems of the social sphere, which remained tied to the state territory; the links between the mechanisms of democracy that are tied to state-anchoring body and effective economic power that freed itself from the state territory were also impaired (Šikula et al., 2010, pg. 31-32).

A very important part is represented by activities and influence of international institutions such as the World Bank, IMF and WTO, which are trend-making the agenda and direction of globalization under intense lobbying pressure from TNC. Such unbridled globalization has transformed to hyper-globalization (Rodrik,

2011). In this context, many notable works have been written in which the genesis, nature and specific developmental metamorphosis of global governance without a global government is revealed as a result of the unprecedented concentration of power of mainly financial and non-financial corporation; formal and informal super-global structures (Mainly the following authors: Castells, 2004; Bělohradský, 2000; Rubery et. al., 2002; Bourdieu, 2002; Beck, 2002; Held, 2004; Potůček, 2008).

The process of globalization breeds crisis problems of unprecedented scale the solutions of which are no match for any government if it tries to solve it itself. A huge problem and also the cause (not the only one) of the crisis are the global consumption, income stratification of the population that are represented by reducing the middle class and increasing the number of poor people (Keller, 2011). In so doing only a small number of the population is able to move to the top of the social structure of the society (among the rich) due to their incomes. In recent decades, the global elite have emerged that have unprecedented level of wealth and power at their disposal. This modern super-class has undergone globalization faster than any other social group. Out of more than 7 billion people living on the Earth about 6,000 individuals are considered to be a super-class. The defining characteristics that set them apart from others: *“is the power that steadily affects millions and billions of people not only in their own country, but also beyond the borders”* (Rothkopf, 2009, pg. 53).

In the last 15 years the hallmark of globalization is a huge increase in virtual assets in proportion to real assets; consumption puffed up by credits transferred to living above one's means. Unrealistic consumption and property; obtained credits, especially their defaults also lead to the inevitability of streamline of the production capacity in advanced countries. On the other hand, nowadays it makes itself felt by massive layoffs in the workforce and will continue so in the future (Pauhofová, Stanek, Volner, 2013).

Other phenomena include the growing debt of governments and ongoing household debt. Advanced countries cease to have real capital and gold that do not cover the value of their currency. In connection with this fact the geopolitics will become an important factor which will influence the further development - particularly the presence of gold, oil and precious metals on the currency's value. The strong attributes of today are huge debts on a global scale due to corporate bond issues, as well as generational debt. Ecologization matters - at the manufacturing processes level as well as in terms of consumption and the need to rationalize it - also inevitably get to the forefront (Ibid, 2013).

1.1 A new understanding of global competitiveness

Due to globalization the scope of competition on a global scale is increasing. There are two possible tacks we use as the starting points for determining a strategy of global competitiveness. *The first one* is the use of the comparative advantages of low costs. *The second one* concentrates on the creation and use of dynamic comparative advantages based on innovations and quality of products and services. This tack lays increased claims to the systematic creation of conditions in the field of research, development, education, pro-innovation of business environment and political and economic stability (Burda, 2014). Apart from using their own comparative advantages there is also another tactics of the TNC in a global hyper-competition environment and that is the use of comparative advantages of the host country, in which the TNC set its branch.

In connection with the above mentioned facts the role of the state in the field of business support is changing. It must adapt to changes and create a favourable environment and conditions in terms with the globalization process. The aim is to create a friendly environment for domestic producers to increase their competitiveness on foreign markets in terms of export. At the same time the aim is to create an attractive environment for the arrival of foreign investors; sophisticated foreign direct investments. The complexes of stimulus have inextricable connection with this in terms of supporting the development of foreign direct investment in the domestic environment. By choosing a competitive strategy in a globalized context, it is important to use the effect of cost comparative advantage. It is proportional to the cost savings related to reduction of their costs of production under certain conditions (for example, the comparative advantage of low wages in the region where there is a cheap labour). Comparative advantage based on innovation lead or more precisely innovations, allows giving shape to a product at a significantly higher price on the ground of its quality being the result of innovations (Menbere, Workie et al., 2006).

1.2 Challenges and risks of the development of the world economy

The present and the near future are particularly affected by *development of energy prices, labour market and an aging of population*. The energy situation in the world is evolving quite negatively, although nowadays the prices of certain energies are not high (oil, gas, electricity). However, the demand for energy is increasing. EU's dependence on energy imports is high; total consumption comprises of 60% of imported energy (Facts and figures é European Union. In <http://www.europarl.europa.eu>). That is the reason why the EU's energy policy

focuses on investment on new technologies that use fuels such as the fossil fuels. Despite the global economic growth unemployment remains a serious problem in many countries. Another problem which bears relation to the labour market could be the aging of population.

The development trends indicated above point to the fact that the world economy will be exposed to various pitfalls. These mainly include decrease or more precisely fail of a significant portion of national budget revenue, which is consequently related to deterioration in public finances. In the context of demographic disproportions and the adverse economic and social development, the burden of expenditures supporting the ever-increasing unemployed group of population will increase more and more. It will also mean the redevelopment of businesses and entities of the financial sector. Other risks include decrease of the Chinese economy production rate (even if controlled one), which is significant as being an important source of deficit financing, especially the US deficit financing. That could prolong the recession period. In the same way, decrease of the commodities and real estate's prices due to the lasting crisis development, may result in a decrease of activities and termination of the number of entities operating in the sectors in question.

Completely new risks that threaten the world's politics and economy are the crisis in Ukraine, in Africa (particularly in Libya and Syria), Middle East (Iraq, Iran and Jordan), and Afghanistan and so on. The scope of the impact of events in those countries and regions on worldwide development can hardly be estimated today. That is the above mentioned risks have an economic impact both on international trade and foreign direct investments; international capital flows and also on Europe's energy supply, raw materials supply, etc. All these risks are multiplied by the migration crisis in Europe, which has and will undoubtedly have an impact on social systems of European countries.

2 LABOUR MARKET AND SOME OF THE CONSEQUENCES OF ITS OPERATIONS

The target situation is balancing the interaction between labour supply and demand. The balance of the labour market upsets mainly due to a change of the real wages level. When analyzing the factors that upset the balance of the labour market, it is possible to specify a few of them such as the implementation of the minimum wage policy, labour unions actions and the existence of effective wages. Just briefly on individual factors:

- *implementation of the minimum wage policy* - should help unqualified or low qualified persons to improve their position at the labour market. On the other

hand, in most cases its implementation condemns such people to involuntary unemployment;

- *labour unions actions*, which play an important role in solving economic and labour issues. The labour market is mainly influenced in a way of collective negotiations between employers and employees (Samuelson, Nordhaus, 2000); TNC is trying to prevent unions' actions or to completely exclude them from companies;

- *theory of effective wages* - is based on the premise that businesses (companies) produce more efficiently when paying their employees a higher wages than the one that corresponds to its equilibrium level. Therefore, the number of companies is trying to pay their employees higher wages for their work despite the fact that there is excess supply of work over demand for work on the market. The theories explaining the phenomenon of implementation of effective wages include (Martincová, 2000, pg. 41-44): 1. health of workers (Nutritional model), 2. fluctuations (Labour Turnover Model), 3. work effort (shirking model) and 4. quality of workers.

2.1 Discrimination at the labour market

Based on the definition of the bellow mentioned authors discrimination at the labour market is classified into four groups, which is exemplified by the case of inequality between men and women (McConnell, Brue, McPherson, 2009, pg. 432-433): *employment discrimination* - especially affects women; *wage discrimination* - women in the Czech Republic generally earn less than men, despite the fact that they have the same education, experience and skills as men at a similar position (<http://ec.europa.eu/social/main.jsp?langId=en&catId=418>); *professional discrimination* - occurs mainly in cases when it comes to demanding professions that require a relatively great physical strength and proficiency - for example, professional army, fire brigade or police special units; *discrimination when it comes to gaining an access to human capital* - occurs in cases when women have less access to education and occupational training; *in case of aging or age discrimination* we mean the specific, currently widespread discriminatory ground, which is the age of the person and in the case of both sexes. Subjects of the labour market who are in their fifties are the ones who are exposed to this kind of discrimination. According to a survey in the Czech Republic: about 34% of people looking for job experience discrimination because of their age. Another example is the health discrimination - companies are trying to get rid off of these employees. Women with young children also experience discrimination (www.profesia.cz, September 10, 2015).

2.2 Flexibility at the labour market

In recent decades in many European countries, significant changes happen in the so-called standard forms of employment, which is an eight-hour workday, working five days a week or permanent employment (Grice, Govern, Alexander, 2008; Timms, Brough, O'Driscoll, Kalliath, Siu, Sit, Lo, 2015). These non-standard forms of work are expanding to such an extent that they cause substantial changes in the labour market and create the need for a reassessment of the current concept of employing people. Due to the effect of the above mentioned facts, the conception of *labour flexibility* becomes more and more popular when indicating a new concept of work. Ultimately it has double meaning: favouring partial and short-term contracts and looser relationship between the company and the suppliers, subcontractors of products and services. The result is that employers are shifting responsibility for any possible risks arising from fluctuating demand for their goods and services to employees (or subcontractors). The unemployment rate thus does not decrease, quite the contrary a so called "working poverty" arises (Keller, 2006, pg. 27).

Part-time work is the most common form of flexibility in EU countries. It is much more flexible than a full-time job, because it practically enables a flexible expansion, reduction and relocation of the workforce. Unfortunately, it means going anywhere, with no friends, away from the region (country), even if only for a season. Of the all EU member states that had these data at their disposal, the most men working part-time are in the Netherlands (15.9%), Denmark (12.8%), Ireland (12.1%) and the UK (10.3%). The least number of men working part-time are in the Czech Republic (1.3%), the Slovak Republic (2.6%), Hungary (3.1%) and Poland (4.2%). The most women working part-time are in the Netherlands (60.2%), Ireland (38.8%), the UK (38.4%), Germany (37.4%), Belgium and Austria (32.2%). The least number of women working part-time are in the Slovak Republic (5.5%), the Czech Republic (5.8%) and Hungary (6.1%) (finexpert.e15.cz, January 10, 2014).

Nowadays there is a trend of increase in this form of flexible working also in atypical industrial fields, such as banking. Research at the corporate level within the EU countries confirmed that shift work is most widespread in Denmark, Norway and Sweden, where the range of shift work is around 80%. The increase in this form of flexible working occurs in varying degrees in all selected European countries. By taking into consideration the influence of changing forms of employment, new forms of work change and work during the so-called unsociable working hours on health and social life of man, the European Committee drew up and already in 1996 also introduced the Directive

on Working Time, which sets the limits to working time at night and determines the weekly rest period. Implementation of this Directive called for legislative amendments in the individual areas of the EU member and associated countries.²

In all selected European countries, except Norway, there has been an enormous increase in work carried out according to Work Performance Agreement (Sub-contracting). This kind of work has increased among the half of the organizations in Germany and the Netherlands. It was listed that the number has risen by more than a third in countries such as Spain, Switzerland, France, Finland, Ireland and the United Kingdom. Only a small percent decrease was listed within the organizations in any country. As some foreign authors (e.g.: Grice, Govern, Alexander, 2008; Timms, Brough, O'Driscoll, Kalliath, Siu, Sit, Lo, 2015; Langhamrová, 2013) emphasize, there are numbers of other new forms of flexible employment. The common ones in particular are the above mentioned and specified forms of flexible work, such as working hours related to the certain period of employment (Annual Hours), weekend jobs, jobs during the school year (Term-time working), networking and telecommuting. Even though they are not widespread forms of work, their utilization rate is increasing.

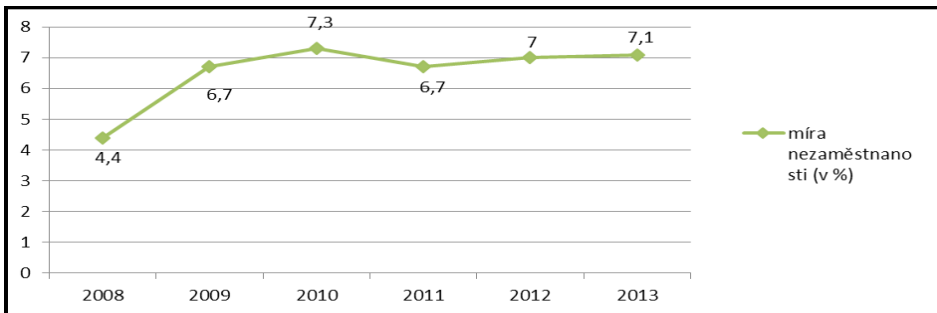
3 ON UNEMPLOYMENT IN THE CZECH REPUBLIC

Development of unemployment since 2008 is shown on the next page in the chart "Development of the unemployment rate in the Czech Republic between 2008 and 2013". The year 2008 still saw a significant growth of economy, which helped reduce unemployment. The general unemployment rate fell to 4.4% and compared to 2007 it was lower by 0.9%. The reversion occurred in 2009, when the unemployment rate soared, the number of unemployed reached 540,000 people. The largest group of unemployed were skilled workers. Often the unemployed persons are those with basic education. Though, in 2009 the number of unemployed school graduates increased by more than a 37.5 thousand and the number of unemployed university graduates slightly increased too (7.7 thousands). However, the consequences of the economic crisis did not become evident in all areas of the national economy in the same way in 2009. A large number of unemployed previously worked in the field of civil engineering and trade. Slightly better was

²In 2014, the proportion of employees with temporary contracts (employment contract for a definite period) reached 14.0% in the EU-28. There were 28.3% people with temporary contracts in Poland, 24.0% in Spain, 21.4% in Portugal and 21.1% in the Netherlands. As for the remaining EU-28 Member States, the proportion of employees with a temporary contract ranged from 19.0% in Cyprus to 2.8% in Lithuania and 1.5% in Romania (<http://ec.europa.eu/eurostat/statistics-Explained/index.php/Employment>). The differences in the tendency to use temporary contracts in the EU Member States reflect the national experience, the supply and demand at the labour market. It turns out the temporary work is more likely in the interest of managers and employers other than employees.

the situation in the field of services, but even there the number of unemployed has greatly increased, as it also did in the fields of accommodation and boarding, administrative and support services, transportation and public administration ([http://www.czso.cz/csu/redakce.nsf/i/trh_prace_v_cr/\\$File/trh_prace.pdf](http://www.czso.cz/csu/redakce.nsf/i/trh_prace_v_cr/$File/trh_prace.pdf)).

Graph 1: Development of unemployment rate in the Czech Republic in 2008-2013



Source: Author's own research (According To: http://www.czso.cz/cz/cr_1989_ts/0501.pdf)

3.1 Development of unemployment

The year 2010 was marked by efforts to cope with the effects of the crisis. The Results were not yet favourable, but the increase of an unemployment rate was not as pronounced as it was in the previous year (it was almost equal both for the men and women). In 2011, it seemed that the economy was slowly getting better. The general unemployment rate fell to 6.7%. There was stagnation in the number of job offers. Therefore, a reduction in unemployment can only represent a visual attribute and does not reflect the real recovery of the positive developments at the labour market (http://portal.mpsv.cz/sz/politikazamest/trh_prace/rok2012pl).

Positive news was reversed in 2012, when the so-called euro-zone debt crisis consequences became evident. There was yet another increase in unemployment compared to 2011 and that up to 7%. The registered unemployment rate did not change due to a decline in the first half of 2012 and it remained at the original value of 8.6 % (<http://www.ekonomika.cz/clanek/pohled>). The year 2013 began with approximately 585,000 unemployed people on the labour market - compared to December 2012, the number of unemployed increased by about 40,000.

The end of 2013 and January 2014 did not result in very positive. The number of jobless people reached the number 629 274. There are two factors that have effect on the labour market. Firstly, the most of last year's seasonal work was finished and new ones were still yet to start. Secondly, temporary work agreements of many people terminated by the end of the last year. Even though an increase in job offers was noticed (in January 2014 there were more than 1,000 job positions offered compared to December 2013), their number did not exceed the expectations by far and thus it was not enough to cover the increase in unemployment rate (<http://zpravy.kurzy.cz/357355-cr-nezamestnanost/>).

The unemployment rate is closely related to job offers. The number of job offers was the lowest in 2009-2013. This is mainly due to the global crisis. In the last 5 years, the number of job offers has increased only very slightly. As expected, the highest unemployment is experienced by the people with basic education and skilled workers. The disturbing fact is that although a number of university-educated graduates is growing, the problem is that their rising interest is in the sciences (Humanities and Economics), the studying of which subsequently make it more difficult for them to assert themselves at the labour market.

The most vulnerable groups are recent graduates with no experience and those approaching the retirement age who have difficulty finding new job positions. It results in growing popularity of job sharing, outplacement or other forms of employment, which would enable more gentle treatment of elderly workers. The unemployment rate increased in the range of 3-5%. The highest increase was recorded in regions that are among the most problematic ones (http://portal.mpsv.cz/sz/politikazamest/trh_prace/rok2013pl).

The labour market significantly changed in favour of job-seekers in the last months of 2015. The number of unemployed rose in January from 14,285 up to 467,403 people. The registered unemployment rate raised to 6.4% in January 2016 from the December (2015) rate, which was 6.2% (in January 2015 it was 7.7%). The number of job offers increased to a total of 107,779, which is the highest number since 2008. 40.1% of unemployed people are unemployed for more than a year (<http://www.kurzy.cz/makroekonomika/nezamestnanost>).

3.2 Unemployment in Moravian-Silesian region

Moravian-Silesian Region (MSR) is situated in the North-eastern part of the Czech Republic. It is located close to the border which enables people to benefit from the opportunities of effective cooperation in the field of industry, science and research, infrastructure development, environmental protection, tourist

sector and last but not the least in the cultural and social field. MSR is known for its rich mineral resources, especially coal or to a lesser extent also natural gas, limestone, granite, marble, slate or gypsum and others. However, it is also an area with very high unemployment rate.

THE FOLLOWING CAN BE CLASSIFIED AS THE STRONG POINTS OF THE REGION:

- The regional economy has diverse industries, including the development of branches within the information and communication technologies.
- There are a number of promising companies that generate high economic development potential compared to other regions, but there are also many established brands.
- There are many properties, grounds and old industrial sites, which could be used to develop new business activities.
- Beskydy and Jeseníky Mountains are suitable areas for tourism business development.
- Advantageous geographical position in terms of prospective traffic routes.
- There is an international airport near the centre of the region with a prospect of a significant development.
- The system of technical, economic and humanities university education.
- Sufficient capacity of network of secondary and higher vocational schools.
- Functional institutional background dealing with the problems in the labour market (Employment Office; Employment Agencies; The Regional Development Agency; Association for the Development of the Moravian-Silesian Region; retraining and counselling institutions, etc.).

THE FOLLOWING CAN BE CLASSIFIED AS THE WEAK POINTS OF THE REGION:

- Unfavourable economic structure - a large concentration of coal mining, metallurgy and heavy engineering industry.
- The slow rate of technological level growth.
- Lack of business infrastructure and facilities to support the development of small and medium-sized companies.
- Hardly negotiable environmental problems, particularly related to coal mining.
- There are difficult conditions for farming at the considerable parts of the region.
- The constant growth of fares and transport charges; reducing the concentration of public transport. Transport services in the districts of Moravian-Silesian

Region and especially in some micro-regions differ a lot.

- Increase in the number of socially unadaptable inhabitants.
- Slowly evolving intellectual base; big problems in obtaining university-educated experts from other parts of the country. The lower representation of people with higher education; long-term tendency of qualified people to leave the region.
- The high number of people with disabilities, mostly as a result of their previous long-term employment in heavy industries.

Long-term structural disharmony between supply and demand sides of the labour market in Moravian-Silesian Region - especially an absence of workers in craft and technical positions (<http://portal.mpsv.cz/upcr/kp/msk/analyzy/otkraj1211.pdf>).

All these above mentioned factors affect unemployment in the region to a greater or lesser extent. The problem occurred after 1995, when unemployment began to rise fast. While in 1997 the unemployment rate reached about 8%, and a year later it reached the bounds of 12%. From that moment until 2004 the unemployment rate had steadily increased. After the Czech Republic became a member of the European Union, unemployment in the region began to decline (due to new job opportunities and financial support from the EU and its programs to increase employment).

Nowadays, the situation is adverse in individual districts of Moravian-Silesian Region. The highest registered unemployment rate exceeding 20% was reached in 2003 in Karviná. Leading position of Karviná which had registered above average unemployment rate for a long time was taken over by Bruntál in 2009. Since 2010 (if need be 2011) due to the global crisis, unemployment has increased significantly (Figure 1).

Figure 1: Development of the number of registered job seekers, job offers and the percentage of unemployed persons for the period of the last twelve months

Indicator (overall number)	Results		12/2013 – 12/2012	
	12/ 2012	12/2013	absolute	%
Registered job seekers	81 099	89 976	+8 877	+10,9
Number of actually reachable job seekers	78 178	87 626	+9 448	+12,1
Number of job offers	3335	2280	-1 055	-31,6
Number of applicants per job offer	243	39,5	+15,2	+62,6
Rate of the unemployed people	9,2	10,5	---	---

Source: <https://portal.mpsv.cz/upcr/kp/msk/analyzy/2013.pdf>

Concerning the job offers, the number of job offers indicated by the Labour Offices is not the accurate one. Therefore, employers use the services of recruitment agencies, internet or their own recruiters etc. Figure 2 shows that the number of the job offers has been significantly lower over the past year (of about 1,055 job offers). In December 2013 there were 2 280 job offers. Compared with the previous year, there was a significant decrease in the number of job offers, namely by more than 30%. Compared with December national average (17 unemployed applicants per one registered job offer) there were 39.5 unemployed applicants per one registered job offer which represents more than a double rate.

Figure 2: Number of applicants per job offer in the districts of the Moravian-Silesian Region

District	Number of applicants	Job offers	Number of applicants per job offer
Bruntál	9741	146	66,7
Frýdek-Místek	11345	501	22,6
Karviná	22811	282	80,9
Nový Jičín	8672	415	20,9
Opava	11214	307	36,5
Ostrava-město	26193	1629	41,6

Source: <https://portal.mpsv.cz/upcr/kp/msk/analyzy/2013.pdf>

LONG-TERM UNEMPLOYMENT

Long-term unemployed people are considered those seeking a new job for more than one year. This category consists mainly of people with disabilities, people over 50, people with no education or those who completed primary education, ethnic minorities, socially unadaptable individuals, individuals looking after a small child or a long-term disabled family member (at the same time these people are considered to be risk groups at the labour market). The long-term unemployment in Moravian-Silesian Region exceeds the national average. Currently there are about 17,000 long-term unemployed people in the Czech Republic. A little over 40,000 of them live in the Moravian-Silesian Region. The increase rate compared to last year is approximately 8,000. It is important to point out to the fact that a significant group consists of people who have been unemployed for more than 24 months (it exactly is 23,753 people), and that is more than a quarter of the total number of long-term unemployed people.

FOREIGNERS AT THE LABOUR MARKET

The main feature of the eastern part of the country is a considerable proportion of foreigners who live and work there. People from Slovakia and Poland live close to the Moravian-Silesian Region. By the end of 2013 there were total of 14,776 citizens from EU / EEA countries and Switzerland registered in the Moravian-Silesian Region; 9,151 (61.9%) of them were Slovak citizens. The

biggest changes in the number of citizens were recorded among the countries that traditionally are heavily represented such as Slovakia (+458 persons) and Poland (-466 persons). These people most often worked as a miner and a mining equipment operator or as an unskilled worker in manufacture; a welder, a mechanic and a worker. By the 31st December 2013 there were also a total of 484 foreign citizens that were legally employed in the county (most of them were Koreans), this number decreased during the year by 264 persons (-35.3%). In 2013 also decreased the number of citizens from Ukraine (-110 persons) and Korea (-87). On the other hand, the largest increase was recorded among the Citizen from China (+4 persons). Most of these foreigners were employed as managers, bricklayers, miners, cooks, masseurs, experts in administration field or as workers in the field of promoting and advertising. They also worked as mechanical engineers, purchasers, doctors or numerically-controlled machine operators.

CONCLUSION

Finally, it is necessary to point out that due to globalization an inconsistency of processes and changes becomes evident. It was not our goal to compare them, but to refer to some of the negative effects of globalization in particular - especially unemployment. It is possible to conclude that due to globalization process (global capital flows) TNCs were established. They currently concentrate the power in their hands because they have a worldwide mobility, flexibility and they are supported by the largest organizations (IMF, World Bank, FED, WTO and others). Consequently, hyper-globalization actually occurs which significantly influences polarization of the countries all around the world into those that are successful or unsuccessful in terms of globalization.

On one hand TNCs' influence is aimed at increasing their own efficiency by reducing the costs (clean and network structures). On the other hand, they put pressure on national states to assume the responsibility for the largest possible part of personal, social, cultural, environmental and other costs. Profit from business naturally does not stay in the states where they operate (just a little part - necessary for reproduction of capital), but is being sent to the foreign bank accounts (often situated in tax havens).

In order for companies to survive within the environment of total competition, the companies had to reduce costs inexorably and increase productivity of labour to the maximum. Globalization thus caused more actions in the area of employment and offered many new work opportunities. However, the job offers were flexible - cheap, temporary and insecure. For those who apply for the

position it means it is a part-time job, temporary work, etc. On the other hand, traditional protection mechanisms lost their effectiveness. Following this, it is possible to define globalization by the following synonym: it is the uncertainty within the development processes and the consequences of their amendments.

The side effects of the changes at the labour market are also displays of employment, labour and professional discrimination, related to women at the labour market in particular. Discrimination in terms of access to human capital or age affects all categories of people, non-excluding young and educated ones.

At the same time demographic disproportion and the negative economic and social development will increase the costs burden to support the unemployed group of population (especially in disadvantaged regions) as well as so called "working poor". Therefore, the state will be forced to provide more support for entrepreneurship and strive to create an attractive environment to attract foreign investors; sophisticated FDI. This is inextricably related to stimulus complexes in terms of supporting the development of foreign direct investment in the domestic environment.

The state and regional public administrations must pay more attention to the problem of unemployment in those regions where the unemployment remains at relatively high level. They should particularly make use of the positive aspects of the regions and try to focus the efforts of all actors that influence the labour market on them. Special attention should be paid to risk groups in the labour market - women, young people, low-qualified persons, people over 50, long-term unemployed, but also members of some ethnic minorities.

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THE ROLE OF THE STATE IN THE CONTEXT OF FAMILY POLICY

Darina Kubíčková¹

Abstract

The family has many definitions. One of them is saying that the family is a basic unit of the society. Within the family an individual person is becoming a social being and identifies himself/herself with social standards of the majority society. In our paper, which we have named "The Role of the State in the Context of Family Policy", we analyse the roles of the state in relation to the family. Family policy as an integrated part of social policy. Family policy represents a set of tools, by which the state influences the family. Social policy or one of its segments, which is a family policy, depends on the economic base of the state. Because of this reason in relation to the family, the policy may be more generous in some countries and on the other hand thriftier in other countries. In this paper we provide an analysis of the program declaration of the government of the Slovak Republic from 2016 from the point of view of family policy and its partial problems. Among the methods which we plan to use in our paper are first of all study and analysis of literature and documents. We presume to divide the paper into two parts. In the first part we are going to deal with the family policy on the theoretical level and in the second part we start doing the analysis of the Program Declaration of the Government of the Slovak Republic.

KEY WORDS: family policy, state, government, program declaration

INTRODUCTION

The presented paper carries the title: "The Role of the State in the Context of Family Policy". The family may be characterised as a basic unit of the society, therefore it deserves a specific position within social policy. Family consists of several levels. In the simplest way the family is divided into a nuclear family and a big family. Nuclear family consists only of parents and children. A big family included several generations living together. As time goes by we can observe how the so called big families are disappearing in the western civilisation and on the other hand the families get separated from each other. This does not influence only the relations within the family, but the whole society. This has been brought about by the time and by the changing economic and social development.

The aim of our paper is to analyse the Programme Declaration of the Government of the Slovak Republic from 2016 in the area of family policy. With

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this purpose we have divided our paper into two parts. The first has a theoretical character and places the family issue into a certain theoretical framework. The second part has an analytical character with concentration on the program document of the 3rd Robert Fico government, which is officially called the program Declaration of the Government of the Slovak Republic.

Among the methods which we have applied in our paper are study and analysis of literature and documents.

1 THEORETICAL CONNECTIONS OF THE FAMILY

The family is a basic cell of the society. The background point of the family is the fact that a human being is a social creature, i.e. sociability is one of his/her qualities. This given fact stimulates a human being to not being alone but to become a part of narrower or broader social connections. The basic social group is a diada consisting of two individuals. Already living in a pair may be considered to be a family. Family also represents a certain micro world, in which the child learns the rules of functioning in the society and has the tendency to apply the rules learnt in a family in later period outside the family. We can also say that the social bonds of an individual to the environment, i.e. also to the family are one of the important predictors of mental well-being and health. (Bočáková, 2013)

The social dimension of the state belongs to its basic characteristics. (Čemez, 2015) Family requires special attention on the part of the state and deserves a reasonable social assistance or support. Under the concept of family support we have programmes on mind, the aim of which is to help the members of the family to fulfil their needs mutually taking into regard the interests of the family. Support of the family does not follow only the interests of the child, but deals also with the fact, how the adults behave and how satisfied they are in the family. (Matoušek, Pazlarová, 2014)

The family represents a sanctuary for an individual, in which there are his/her closest people, to which they can turn to in case of problems. In this context it is necessary to say that it is also the principle of subsidiarity by which the Slovak Republic is governed and which says that the help for an individual has certain gradual progress, i.e. first one has to help himself/herself, then it is up to the family to help this person and the last instance is the state. In this context we can say that social policy often fails in our conditions. It is the homelessness that can be mentioned as the most bulging example, which is a new phenomenon in the countries of Central and Eastern Europe. From this it results that individual levels of social aid are failing. The present system of economic relations causes the appearance of social and economic inequality in the society. (Bočáková,

Dudžáková, 2015) Social differences are getting bigger also in the world wide scale and this can be described as one of the causes of migration, i.e. of moving people from their homes. (Slovák, 2015)

Social policy is likely to be perceived only as a part of public policy that deals primarily with the team how the society should help or to take care of people who are exposed to consequences of a disadvantaged or market failures or families. (Bočáková, 2015) As a cause of increasing social differences it is necessary to see the change of the climate in the whole society under the influence of the Tender Revolution after 1989, when the whole paradigm of social policy inclusive family policy changed. Social policy can be understood in the broader or in the narrower sense of the word. In the narrower sense of the word it represents one of the public or portfolio policies corresponding to the ministry of labour, social matters and family. In the broader sense of the word it includes several ministry policies, such as e.g. also educational and health policy.

In this context it is necessary to ask a question, whether and to what degree the state should intervene in relation towards the family. It was mainly in the course of the previous system of government, where we could observe a more considerable family policy using stimulative as well as restrictive measures. It is possible to mention e.g. the loans for newly married couples, which could be written off depending on the number of children and also the retirement depended on the number of the children. Massive construction of apartments could be seen here and also the socialist housing high-rise developments could be seen here. On the other hand there were restrictive measures such as old bachelor taxes, i.e. for persons that have reached a certain age and were single at the same time, so they paid higher taxes than the rest of the population. Marriage rate and birth rate reached relatively high values.

Under the influence of transformation processes, which took place in the countries of Central and Eastern Europe in 1989 a swift acceleration of social, economic and political changes took place. (Horváth, 2014). As a result of this the change of setting the state family policy is taking place. Intervention of the state towards the family has been decreased in a significant degree. This is connected with the missing resources of the one hand and also with liberal and individualistic paradigm, which is coming from the West. The family started to disintegrate as a consequence of increase of pressure on the performance in occupations, increased demands at work and also as a consequence of overtime hours spent in the employment. These are the reasons, because of which the parents spend less time with the children. The family is being replaced by other social institutions, such as e.g. media, group of peers etc.

The majority of the people feel the best in their home environment, in the family. It is a place, which everybody knows well, here people have the feeling of certainty and security, here they have their family background. The word home and at home have their justified attraction. The children are coming back home to meet their parents, we are happy to return home, when we are returning tired from work. The present day families live as a rule independently, in different housing units than their parents. But it is natural that the family remains to be the basis of provision of care for the seniors. In the majority of families it is obvious that the adult children look after their ageing parents. Sometimes it may happen that an ageing parent moves into the apartment of their children. This step has its positives as well as its negatives. For a middle generation it makes the care easier, it saves time, care may be divided into all members of the family, a senior is not alone and feels safer with a family. (Mlýnková, 2011)

It is possible to say that disintegration is taking place in the conditions of western civilisation. This is conditioned by several factors:

1. Beginning of a new liberal-democratic paradigm - liberalism puts an individual on the first place, who should be restricted as little as possible on the part of the state, this individual should be capable to look after himself/herself and to carry responsibility for his/her person in accordance with the personal freedom. As a consequence of this the collectivities of the type family, lineage, nation are getting on the side track. With the beginning of liberal paradigm the conservative values such as a family, nation, state, national state or traditions are being pushed to the fringe.
2. Private business - in connection with the transformation of the Slovak economy from the planned economy into the market economy or as the case may be mixed economy, private business is appearing, which drives the entrepreneurs to the need to make bigger and bigger profits, therefore they force their employees to give the highest performance possible at the expense of their free time and family, because they spend more and more time at work. This is reflected also in the education in the family. Family education is replaced by media or as the case may be by youth groups etc. which very often divert education in an adverse direction and so pathological or extremist phenomena take place here, which can lead to increase of antidemocratic and intolerant tendencies (Mihálik, 2015).
3. State - lately we have been talking about a corroding state, which is not capable to fulfil its functions any more to such an extent as it was in the past. A strong paternalistic state, which would be capable to take care of its citizens from their cradle up to the grave is becoming a past.

Social aid of the state towards the family has several dimensions or as the case may be directions. Social aid may be directed within the framework of the family to the children, to the seniors or to the parents:

1. *Children* – social aid focussed on the children may acquire various forms, by this we mean above all family allowances, which may be paid out for all the children or only for some of the children or as the case may be up to a certain number of the children or the children allowances may be differentiated depending on the income of the parents; there is a threat of a risk that someone may transfer the family allowances into the money-earning activity; another form may be a contribution for the children from disadvantageous conditions for school aids or for lunches, or as the case may be for travelling costs to school; in the conditions of an institution of higher learning this may be represented by a social scholarship,
2. *Parents* – on this level it is possible to support family, marriage rate, birth rate and parenthood by such tools of social or as the case may be family policy as construction of apartments, construction of rental apartments, support from the housing fund, family allowances, maternity and parental benefits etc.,
3. *Seniors* – in the conditions of the Slovak Republic it is possible to perceive the most clearly the so called Christmas contribution and travelling by train free of charge for persons at retirement age; in this context the question of amount of pensions appears here. They are generally referred to as relatively low in comparison with the pensions in western Europe. The amount of funds that are provided for pensions is dependent on the population development and on the economic power of the state. (Vojtech, 2013)

In principle it holds true that the social policy is determined by economic performance of the state. If the economy is weak, so also social policy corresponds to that. In this context geographical determinism can be considered to be a key approach, according to which geographic factors are decisive for the future of the country, by saying this we mean the geographical position, mineral resources or natural beauties. This geographic factor cannot be influenced, because position, territory and area of the state are given.

The so called explicit familianism is typical for the Slovak Republic as well as for the Czech Republic, this can be seen by the support of long term parental leave, the so called support for care for the children in the family. Poland is included in the implicit familianism by us, which is distinguished by relative low number of care facilities for the children and also with relative low financial

support for the care for the children within the family. From the 2nd half of the nineties the family policy is turning more to the support of employment of women in the Baltic states. Hungary is a representative of the fourth type, where high support is given to the care in the family and where also facilities of care for the children are available. (Mitchell, Hamplová, 2012)

In this context the Slovak Republic can capitalise on its relatively advantageous geographic position, which is situated in the centre of Europe and is in this way creating a natural connecting line between West and East.

An example for Slovakia may be in this context Japan, which is not rich on mineral resources, its economy was destroyed during the second world war, but in spite of that they managed to stand up to such a degree that at a certain time the country belonged to the most developed economies of the world. From the above mentioned facts it results that they are not only geographic factors that are decisive. Also the culture and the mentality connected with it plays its role. In this context it is necessary to mention that Japan is known for its performance, preciseness, discipline, hard work and loyalty. In Japan individualism does not have such position as in western Europe. It is just the other way round Japanese collectivism forces an individual to submit to the interests of a larger unit, which can be seen in the firm culture, which is manifested by the maximum loyalty of the employees against the firm, on the other hand the firm is capable to look after its employees. Fluctuation is minimum, it is a common phenomenon that one employee spends his/her whole professional life in one firm.

2 ANALYSIS OF THE PROGRAM DECLARATION OF THE GOVERNMENT OF THE SLOVAK REPUBLIC

In relation to the family policy the programme declaration stands up for a family support and realises its significance for a society. It has also declared that in the process of submitting acts it will take into regard their consequences for the family and for the marriage. Generally it can be said that the measures that are provided in the Programme Declaration of the Government of the Slovak Republic in the area of family policy are relatively general and concrete and measurable targets have not been stated there. (Programové vyhlásenie vlády SR, 2016)

By generalisation it is possible to create certain categories of the proposed measures from the point of view, how they have been focussed: (Programové vyhlásenie vlády SR, 2016)

1. Pensions and pensioners:

- a. support of voluntary savings for a pension, support for use of

- supplementary pension saving for financing of earlier retirement,
 - b. increase of information about the present and future demands of pensioners,
 - c. the first pillar - adjustment of valorization of pensions,
 - d. the second pillar - possibility of programme selection,
 - e. Christmas contribution - increase in particular with regard to old pensioners,
 - f. recipients of low pensions - payment of increased attention,
 - g. effective connection of health and social services, support of multi-source financing of social services, introduction of contribution according to the level of dependency for all founders,
2. *Young families:*
- a. maternity benefit - increase,
 - b. social services for families with dependent children with emphasis on the children of up to the age of three years,
 - c. harmonisation of family and work life,
3. *Physically handicapped persons:*
- a. optimization and purposefulness of monetary contributions for compensation of social consequences for seriously disabled people,
 - b. increase of amount of benefit for care for physically handicapped people,
 - c. intensification of efforts for their inclusion into labour market,
4. Children – support of abiding of the children in the care of the parents,
5. Claimants of social benefits – tightening of conditions for providing of social benefits for persons refusing to work.

If we look closer at the mentioned measures, so we can say, that the government probably wants to pay the biggest attention to the issues of old age pensions, because the number of the measures that the government is proposing in this area is substantially higher than in other areas. The measures directed into this area are primarily directed towards the pension security, concretely towards its three pillars. In this area it is possible to find the leftist as well as rightist elements. Adjustment of valorization of the pensions from the first pillar can be considered to be an agenda of the party Smer - social democracy. In the area of the 2nd pillar the government proposes a possibility of programme selection. In the programme declaration it is literally written: “It is appropriate that the savers are given the possibility to decide freely, what to do with their savings.” (Programové vyhlásenie vlády SR, 2016) From the mentioned sentence it results that the government is retreating from command economy and is addressing

the individual responsibility of each individual, so we can speak here about the rightist element. Improvement of providing information about the present and future demands for a pension in the interest of achieving the best decision is connected with this.

To the other measures that cannot be assigned to any of the mentioned areas belong: (Programové vyhlásenie vlády SR, 2016)

- *war against discrimination* - relating to all groups of the population,
- *war against inequality* - inequality between genders, war against violence towards women and domestic violence.

It can be said in this context that not only elderly people belong to the discriminated groups, but also young people on the labour market, because there are still prejudiced employers. (Pawera, 2015)

CONCLUSION

At the end we can say that from the point of view of Programme declaration of the 3rd government of Robert Fico from 2016 in the area of family policy, it is possible to mention these categories: pensioners and pensions, young people, physically handicapped persons, children and claimants of social benefits. From the mentioned target groups the Programme declaration of the 3rd government of Robert Fico has been focussed on the issue pensions and pensioners. Other areas seem to be marginal in the text from the point of their significance for this government, because measures that are directed towards other areas are less numerous than those that are focussed on pensioners and pensions. Measures directed at them touch mainly upon the security of pensioners or as the case may be upon its three pillars. From the above mentioned facts it results that the government realises, that in the future there may be a threat of disastrous situation in the area of social security systems. On the one hand the state paternalism and interventionism can be observed here and liberal elements of personal freedom and responsibility on the other hand. In the area of the first pillar the government proposes to increase the pensions and in the area of the 2nd pillar it proposes to improve awareness and knowledge of information, so that the citizens can make a better decision.

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LET US LOOK FOR OUR READINESS TO WORK IN SOCIAL SERVICES INSIDE OURSELVES

Peter Slovák – Angelika Dudžáková¹

Abstract

Every helping professional feels the need to constantly seek motivation for both professionally and humanly demanding work in social service facilities. Primary motivation, like enthusiasm or prosocial behaviour, does not always continue to be an impulse for effective intervention focused on people who require a full understanding and holistic approach to their personality. Naturally helping professionals cannot be available for clients and their requirements all the time. They themselves need stimuli from the environment, relationships and positive human and managing interaction. Then they are able to ask themselves a question concerning their current personal capability to work with people.

KEY WORDS: Capability. Helping professional. Social services client.

INTRODUCTION

Personal capability, disponibility in terms of readiness and erudition are variables that any helping professional working in social services needs to have. Knowing the human psyche and complex dimension of personality is fundamental to careers like helping professionals and client advisors. A helping professional has to reflect an approach to a client, the position of professional, advisor versus client, natural social bonds as well as they have to apply a systematic approach. The reason for this is also the fact, that advisor personality is the first, basic and the most important contribution to their own profession. He must continually look for opportunities to use own potential and know the own limits.

When we are going to say about readiness for work in social services, can start with special areas of intervention.

Helping professionals are often confronted with solving problem areas:

- problems in social relationships, lack of social skills,
- problems in relation to social institutions,
- problems connected with social role performance,

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- problems connected with managing social changes,
- interpersonal conflicts,
- problems connected with handling an unfavourable economic situation,
- social adaptation problems,
- social problems (unemployment, severe physical or mental handicap),
- problems in the sphere of social pathology and others (Mátel, Oláh, Schavel, 2011).

The range of possible intervention by a helping professional is extensive and it is closely connected with their personal capability to deal with a potential wide spectrum of problems that social service clients have. Professional disponibility and erudition are necessarily connected with altruism and empathy disponibility, mainly because many problems have to be perceived through each person's uniqueness and individuality.

A person who is of interest to medicine, psychology, social work or social services is a biopsychosocial being and therefore considerable attention has to be paid to human body and psyche. *Psyche is understood as an attribute and higher function of the nervous system and is connected with brain activity. These two aspects influence humans so that through their feelings and perceptions they are able to perceive and reflect inner and outer realities* (Zelina, 2008, p. 18). This fact has a considerable influence on the way we look at social service clients. Characteristics of the human psyche such as the fact that it is a real reflection of the objective and subjective, it is socially and developmentally determined, entire and dynamic, are important factors that a specialist working with people has to take into consideration. The human psyche is always, in every situation, prompted by current impulses. On the other hand, objective factors create a similar scenario of the functioning of psyche in every human. Biological determinism of psyche involves genetic influences, heredity (genotype/phenotype, vitality, temperament, talent), i.e. a set of observable characteristics. Čemez (2012) says, man during his life goes through several stages of development, each of which has its own specifics.

Reformed ways of adaptation (instincts, urges, reflexes), complex body constitution (anatomy and physiology of the human body, the general state). Last but not least, the regulation and control of human body organs and their functions, coordination of interaction between organs, homeostatic maintenance - maintenance of a stable inner environment (constant values of substances in the body, e.g. oxygen, blood pressure) and the body adaptation to the changing environment. The psyche acts in response to basic human needs (food, water, air, metabolic requirements) and is also influenced by hormonal regulation (glands

of internal secretion, hormones) as well as nervous regulation (nervous system, gastrocolic, defense, sexual, orienting, seeking, statokinetic and locomotive reflexes) (Kopecká, 2011).

Professional and human erudition, capability mean that helping professionals have to respect the principles similar to the principles applied in social counselling.

They mainly have to:

- accept others but not identify with them,
- create a pleasant atmosphere,
- respect the client's authenticity,
- start where the client is,
- choose the pace of work adequate for the client,
- help to find solutions,
- prefer cooperation, not competition,
- set realistic goals.

It shows a change in the relationship between the social worker and client. Until recently this relationship has been considerably asymmetric, based on the fact that it is the social worker who knows what is best for the client, who makes decisions and gives orders and the client just adapts. Now the relationship is becoming more and more symmetrical, monitoring and accepting the client's autonomy and uniqueness (Schavel, Oláh, 2010).

Each individual trait of the social service client requires a specific approach. According to Mojtoová et al. (2008) aging, for example, is a process that is genetically programmed. It is an irreversible and natural process. It is not universal, i.e. it does not apply equally to all organs, tissues and functions (in some of them this process is faster, in others slower). Most changes connected with aging are regressive, leading to the loss of function. Social service workers have to realise these facts when taking care of elderly people. Their position as well as duties resulting from their competencies are very important. Primarily they satisfy the client's needs, from personal psychological counselling, administration and bureaucracy to health security and assistance in finding suitable space for health care provision. Bočáková (2015) points out the aspect of discrimination that is unacceptable in the helping professional's behavior.

The extent of support provided by the helping professional is individual, based on each client's needs. This activity is orientated towards solving real difficulties and problems, which are the result of the client's social reality and which are perceived by the client as too complicated or insoluble. Dávideková (2014) emphasizes that social service is seen as part of care in its broadest sense. Therefore in some cases the problems that clients are confronted with can

require special knowledge, skills and the use of specific procedures within the organizationally developed and professional advice. Real-life situations prove that the elderly generally have low awareness of possibilities like social advice that can reflect and solve the multiple causality of their problems.

Social work competencies are mostly defined in relation to the client. They are determined by the fact that social work is the professional activity aimed at enhancement or restoration of the client's impaired social functioning and creation of social conditions that are necessary for achieving this goal. *At the same time, one of the reasons why the conception of social work is not clear is complexity of circumstances that influence the way people interact with their social environment. These circumstances also need to be considered in the process of helping to cope with difficult interactions.* (Matoušek et al., 2013, p. 507). This raises some questions. To what extent can a helping professional, social worker, be a counsellor? Can they provide therapy? It suggests certain professional specification of a career in social services and advice. Social workers, counsellors perform a lot of tasks when doing their job. Oláh and Schavel (2006) describe these tasks as follows: to prevent the occurrence of indirect social events and problems, to find the cause and nature of social problems, to work on the improvement of relationships between the client and his or her social environment, to assist in solving social failures, to devote to clients who find it difficult to join the society, to encourage clients to adopt right attitudes, to help to overcome social difficulties, to help clients to deal with new information, to reduce negative influences in society which prevent or limit the client's normal social development, to participate in social life, education and culture, to cooperate with other authorities and professionals in order to provide a complex social program, to respect and apply legislative norms in order to improve performance and results in social work as well as to respect the rights of their clients.

Competencies for social work seem to be equivalent to competencies for counselling in social sphere and are directly connected to the counsellor's activities and performance. Among the most important competencies are:

- developing communicational skills as the basic assumption of the ability to listen and be heard; training and practice with clients,
- motivating clients to cooperate with social workers, modeling real life situations which clients learn to cope with,
- the ability to understand the client's problem and find a solution to the client's particular problem,
- supporting clients and teaching them to become independent, using all the opportunities and possibilities of encouraging clients, their confidence,

responsibility and self-control, systemic family therapy, group and community counselling,

- intervening and providing social services on the individual level, face to face and if personal contact is not possible, the social worker has to be able to monitor the quality of provided services (Mátel, Oláh, Schavel, 2011).

As we mentioned before, competencies for social work depend on the type of social activity, regardless of the social worker's specialization. Therefore social workers need to prove certain key competencies when doing their job. These key competencies include such knowledge, skills and abilities that lead to competencies which enable social workers to perform different functions and hold more positions necessary to overcome unpredictable problems under constantly changing conditions.

Hudecová et al (2010, p. 10) states these key competencies:

- communication and cooperation skills,
- problem-solving and creative thinking abilities,
- independence and efficiency,
- the ability to take responsibility,
- thinking and learning skills,
- the ability to reason and evaluate their activities and the results of their activities.

Janoušková a Nedělníková (2008) define the social work competencies within these areas:

- direct work with the user,
- indirect family support activities,
- activities necessary for realization and development of social services,
- methodical management of field social workers according to the organizational structure of the organization,
- professional development activities.

Havrdová (In Hudecová et al., 2010) appears to provide the most precise definition of the set of competencies for social work. She recognizes six key competencies that a social worker needs to have, namely the ability to develop effective communication, to orientate oneself (understand the situation) and plan actions, to support the client and help them to become self-sufficient, to intervene and provide services, to contribute to the organization and professional development of the social worker. Havrdová characterizes the ability to develop effective communication as the ability to establish contact, to adapt

a communication style to clients, considering their age and personality, to recognize the same and different opinions and respect them, to provide sufficient space for the client's feedback, to improve communication between the client and other organizations, to motivate the client to overcome obstacles and maintain a professional relationship with the client. As for the ability to orientate oneself (understand the situation) and plan actions she describes it as the ability to understand the client and their family's needs and possibilities, to understand legislative and social norms, to collect information from all available resources, to consider the possibilities of cooperation with the client, to keep a complete record and help the client understand the consequences of their decisions. The ability to support the client and help them to become self-sufficient means the ability of social worker, counsellor or another helping professional to give emotional support and help the client recognize their strengths and weaknesses, to inform the client about their rights and obligations, to boost the client's confidence in themselves and their own decisions and help the client gain control of their behaviour and actions. The ability to intervene and provide services requires the knowledge of possibilities and methods of intervention and service provision following the agreed procedure, the organization and coordination of service provision from different resources, the ability of service users to manage conflicts and tension and creation of favourable conditions so that it is possible to successfully end a relationship with a client after solving their problem. In order to grow professionally not only a counsellor, but every helping professional needs to constantly seek information concerning social services, continue their education, use contacts and work experience, be able to critically assess their knowledge and the importance of further education, set pragmatic and realistic goals and manage the time they spend at work effectively. When doing this job professionals work with a client directly, they do not use technical interventions or strategies (Merry, 2004).

CONCLUSION

It is very important when considering the social worker's capability and disponibility. The social worker's disponibility is linked to the competency in social sphere. Disponibility means "*the possibility of feeling free to deal with something or somebody*" (Šaling, Šalingová, 2006, p. 298). This term was chosen intentionally as it is connected to the ability of professional to use their abilities and qualities in favour of the client. Capability means readiness to help the elderly client by using the acquired knowledge and skills. However, it is not only knowledge and skills that helping professionals use in social services and

counselling. It is also part of their personality, their world view and life style. Only a balanced person is able to work with other people without involving these people in their problems. The social worker's professional approach and strengths which they demonstrate when dealing with the client are important and can motivate clients to make some positive changes in their lives.

Congruence, i.e. concordance between external manifestation and internal feelings, is equally important because behaviour that contradicts the worker's personality may look artificial, insincere and can make the client behave in a similar way. The professional's personal qualities have to be evident so that clients feel they cooperate with someone who has both professional and human approach. Qualities which professionals demonstrate through their knowledge, skills and experience give the client a guarantee of effective cooperation.

However, this is not always sufficient. Among other qualities that helping professionals working in social services need to have are empathy, kindness, authenticity, creativity, flexibility, commitment, humanity and human approach to the client. They also must possess some personality traits that are necessary for this career – adherence to ethical principles in social sphere, they have to accept their job as a profession and be able to cope with their duties and the results of their job, both inwardly and morally. Their moral attitude should serve as an example to others. It is impossible to deal with the client without communicating and active listening. Looking for capability is connected with the ability to establish contact immediately because it leads to obtaining information about the client. The first meeting with the client appears to be crucial for future mutual positive perception. Unfortunately, this aspect is not given such importance during the preparation for this profession. Many of those who prepare for this profession rarely meet and talk to social service clients face to face, despite the fact there is a possibility of gaining this work experience. Distant observation, mediated interaction and report are preferred. As a result, they develop a distorted idea of behavioral manifestations, personalities, acceptance of changes, the ability to adapt to a new life situation and respect for social norms in the society. If we want to prepare future helping professionals for this role, let us teach them to look for their personal capability and disponibility for this demanding career from the very beginning.

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SOCIAL TRANSFORMATION IN SLOVAKIA AFTER 1989

Alexander Čemez¹

Abstract

The contribution is focused on the social transformation in Slovakia after 1989. The paper deals with the social and political transformation in Slovakia after 1989. To methods used in the paper belong the study of the literature and its analysis. The main objective of the contribution is to analyze the social transformation and the relationships between the political and social transformation in Slovakia after 1989. The paper also deals with changes in the society in Slovakia, which took place after the Velvet Revolution. One of the most significant changes was the privatization, which caused the social mobility within the social stratification. Another change was the deepening of gaps between the classes of the society.

KEY WORDS: transformation, Slovakia, 1989, Velvet Revolution, society

INTRODUCTION

The given contribution is called “Social Transformation in Slovakia after 1989”. The Velvet Revolution in 1989 represented the significant change of social, political and economical relationships. It started the transformation process, which had its political, economical and social dimension. The objective of the paper is to describe these processes.

1 BODY OF THE ARTICLE

After 1989, in the countries of former socialistic block take place the significant changes. These changes influenced also Czechoslovakia. On 17th November 1989 took place so-called Velvet Revolution, which was called in this way, because of its non-violent nature. In this context, it is necessary to ask the question, why did the Velvet Revolution happen and whether it was a revolution in its real meaning.

The official version of the Velvet Revolution which is also taught in schools is that the system became untenable, and therefore it broke. There appeared also various hypotheses, such as the whole process was controlled from the outer side by secret agencies, or by the former State Security, or that the change was also wanted from the side of representatives of former communistic nomenclature.

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The sociologist Ivo Možný states in the book “Proč tak snadno” (“Why so easy?”) that also communists wanted some change.

After the Velvet Revolution appeared significant political, economical and social changes. On the political level was cancelled the well-known Article 4 of socialistic constitution on the major role of the KSČ (Czechoslovak Communist Party) in the state and the society. Instead of it, there appeared plurality of political parties and movements, which started to occur in quite large amounts. For this reason, the significance of the political marketing has increased. Political marketing reduces the core of democracy on the set of market relationships, which are oriented on profit and it degrades the voter on the level of an ordinary consumer. (Čemez, 2010) Candidates use various marketing tools for presentation of their opinions, attitudes or plans. (Šimo, Lukáč, Trnková, 2014) As the example, it is possible to mention the introduction of social packages by the government of R. Fico before the elections in 2016. (Bočáková, 2015)

One of the most important revolution powers was the movement “Verejnost proti násiliu” (“Public against the violence”), of which main representatives were Milan Kňažko, Ján Budaj and Fedor Gál. The “brother” of the movement “Verejnost’ proti násiliu” in the Czech part of the federation was the movement “Občianske forum” (“Civic forum”), in the center of which stood from the very beginning the dramatist and the dissident Václav Havel.

In the left-wing part of the party spectrum took place the transformation of the Slovak Communist Party onto the Democratic Left-wing Party (Strana demokratickej ľavice), which had social-democratic objectives and its main representatives can be considered as the left-wing intellectuals, as for example Peter Weiss, Pavol Kanis, Alžbeta Borzová, Dušan Dorotín, Milan Ftáčnik, Ľubomír Fogaš, Milan Hanzel, Juraj Hraško, Brigita Schmögnerová, etc.

Within the VPN, there starts to form the platform “Za demokratické Slovensko” (“For Democratic Slovakia”), which grew on so-called national wing. Its main representative is Vladimír Mečiar, who becomes also the head of the party “Hnutie za demokratické Slovensko”. From the point of view of the ideological anchoring, it was non-standard political subject of the charismatic type, which is possible to perceive as the product of transformation process.

The success rate of Vladimír Mečiar’s media presentation consisted of several factors:

- charisma, power of the personality,
- great supplementary functions - factographic and photographic memory,
- articulacy, verbal readiness, communication, presentation and improvisation abilities – *“the Prime Minister sat down in front of the camera without any piece of the paper, and without any written notes, and his speech was*

performed without any interruptions”, (Čomaj, 1991, p. 125) “*also, at the Slovak syndicate of journalists, he performed his 40-minutes long speech about the mission and the opportunities of the press, about his criticism regarding to the press, and the most actual problems of the government and the politics*”, (Čomaj, 1991, p. 126)

- the ability to simplify complex problems – Mečiar’s thinking is interesting due to its simplicity and consistency; his speech has nice linear logic, without any blurting or interruptions, (Gál, 1991, s. 131)
- the ability to talk about any expert topic,
- high rate of dominancy, force, directivity – “*his active way of communication gives to each society the clear sign, who is the chief in the given situation, who dictates the topics and the way of the discussion.*” (Juščák, 2003, p. 159)

In this context, very interesting example is Václav Klaus. It is publicly known that he had worked in Economical Institute, later in Prognostic Institute of Czechoslovak Science Academy, thanks to which he became the respected economist and prognosticator. His sport activity complemented and humanized his political personality, of which base was his expert profiling in economics and prognostics. In his youth, he played basketball, and besides this, he plays tennis and likes skiing. Václav Klaus is the kind of a politician, by whom in this way successfully coexist, or parallelly exist, two diametrically different, or even opposing profiles, while one of them is dominant and the second is complementary. In general, Václav Klaus is perceived as the nationally oriented politician, who, as the Euro-skeptic, refused the weakening of the sovereignty of the national states. Thanks to the proneness to the shock Thatcher’s economical politics, his political profile includes also the features of the reformer of the West type.

On the economical level, we can speak about the change of the ownership relationships, so-called privatization and restitutions. These processes also had their consequences in relation to the social processes. Mainly, we mean the social mobility, while it is already known that we distinguish between the inter-generation and intra-generation social mobility. Under the influence of the proximity to the government entities, some persons or groups easily and relatively cheaply got huge properties within the process of the privatization, and in this way, there took place relatively sharp and rapid changes within the pyramid of the social organization, because persons from lower classes got into higher classes.

Also, it is necessary to look at the relation between the pyramid of the social organization and the pyramid of the power organization.

After 1989 old political elites step back and there arise new political elites, which got onto the top of the pyramid of the social organization. They had the interest to get suitable place in the pyramid of the social organization as well. Also this can be perceived as one of the reasons of launching the process of the privatization.

The breaking point appeared in 1992, when in Czechoslovakia took place the elections to the Slovak National Council and the Czech National Council. The results showed the victory of the party “Hnutie za demokratické Slovensko” under the leadership of Vladimír Mečiar in the Slovak part of the federation and the party “Občianskodemokratická strana” under the leadership of Václav Klaus in the Czech part of the federation. This result of elections into the national parliaments is possible to consider as the beginning of the end of the common state of Czechs and Slovaks. To basic contrasts, which occurred between political elites, belonged:

1. The question of the economical transformation – while the party “Občianskodemokratická strana” with Václav Klaus stood for the shock economic transformation, the party “Hnutie za demokratické Slovensko” with Vladimír Mečiar requested the gradual model of the economic transformation,
2. The question of the constitutional law and organization.

The part of the transformation process was also changes in the area of the public administration. In 1990, there were first communal elections. In this context it is possible to note that the self-government and the decentralization of the public administration is one of the signs of the democracy. In 1996, former regions were transformed into eight main regions. Former Prime Minister Vladimír Mečiar justified this act by the fact that in Slovakia were eight economical centers, to which should belong also their own regional organizations.

The state consists of regions. The base of the regionalism is the submission of the part of the central authority competencies to the lower-level authorities on the regional level. It means that the lowest levels are not directly connected with the center, but between them, there is certain level, which ensures the mutual flows of information, energies, finances, persons, etc. Each time, the part of these entities diminishes a bit on the way from one end of the track to the other one in particular intermediary levels, which drain this part for themselves and the rest is further re-filtered. (Čemez, Habánik, 2014)

Regions were excluded from the public administration and became the part of the self-government. It means that there was created the second degree of the self-government – regional self-government. Before that, in Slovakia took place

the stormy discussion about the self-government regions, for example regarding to their amount, while opinions varied from 3 to 16 self-governing regions. The final number of self-governing regions was certain compromise between these opinions.

Each conception had its own arguments. On one hand, large self-government regions have own economic base, i.e. they earn enough for themselves; however, they are distant from citizens. Small regions are nearer to citizens and their problems, with which they encounter on daily basis. If regions copy the natural historic regions, citizens are more likely to identify with them.

In 2001 took place first elections to the self-government regions.

Liberalization of politics, economics and the society after 1989 brought new options for the development of the civic sector. After 1989 occurred the sharp acceleration of civil societies formation, and so also the development of participative politics. In this way, Slovakia catches up the West European democratic states. Evolutionally developing Slovak mentality and political culture, which is marked by long-term repressions under the Hungarian and later German or Soviet supremacy, caused the reduction of independency, conformity with decisions of political centers, passivity, long-term submissiveness in relation to the political power. On completely other pole stands for example, France, known for its radical strikes, which are also related to the local ability of French nation.

In this regard, it is necessary to ask the legitimate question; whether on liberalism standing political democracy is the final and the only possible and correct model of existence of the state organization, as stated by F. Fukuyama, who does not count with the multi-alternative solution of the future global political development. Examples of African countries show that the liberal democracy requires some cultural and historically developing conditions, in order to survive. Artificial, by-West-ordered liberal-democratic political systems were not accepted in many African countries and lead only to further transformation processes, and finally back to non-democratic regimes.

CONCLUSION

In the end, it is possible to state that the transformation process in Slovakia after 1989 included social, economical and political changes. On the political level, it was mainly the implementation of liberal-democratic principles and the plurality of political parties and movements. On the economical level, implemented were principles of free market, private entrepreneurship, as well as privatization and restitutions. On the social level, there appeared the deepening of gaps between particular social classes.

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ORGANIZATIONAL STRUCTURE AND COMMUNITY PLANNING OF SOCIAL SERVICES

Michal Garaj – Oľga Bočáková¹

Abstract

The paper deals with the issue of organizational structure in the process of community planning of social services. The main goal of this paper is to point out and analyze the forms of organizational structures which has been used in three different Slovak cities. Theoretical part deals with the issue of organization and organizational structure. The next part represents a application of theoretical approaches in to real examples of three cities (Žiar nad Hronom, Zvolen a Banská Bystrica). Also presents a results of analysis and comparison of organizational structures in selected cities. The main method that has been used is content analysis of official documents and comparison of selected categories from the view of organizational structure.

KEY WORDS: community planning of social services, organizational structure, organization

INTRODUCTION

Community planning of social services (CPSS) represents the tool of local and regional self-governments, through which they create a system of social policy in their territorial units. According to Dávideková (2014) each self-government creates community plan of social services based on national priorities and local specific need of inhabitants. From the initial intention to create a community plan of social services, to its implementation in practice, the process requires harmonization of many material, information or human resources. In this case, the leading person has to be not only an expert in social services but also an excellent manager. Community planning of social services is a process where we can find and implement all the basic management functions: planning, organizing, management and control. The central topic of our contribution will be one of the management functions, organization and the topic of organizational structures.

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ORGANIZATION AND ORGANIZATIONAL STRUCTURE – THEORETICAL CONTEXT

In order to achieve certain goals, in the case of our contribution the successful processing of the community plan of social services, it is necessary to align the human, material, financial or informational sources. It is possible to provide for efficient fulfilment of the set goals by sound management and utilisation of the sources in question. As stated by Molek (2011), management contains several important functions:

- Planning with setting goals and methods for the fulfilment thereof,
- Organizing as the arrangement of sources and tools for the structure,
- Leading to the improvement of coordination, motivation or communication,
- Control for the comparison of the goals set, with actual fulfilment.

Community planning of social services is a process containing all the aforementioned management functions. For the purposes of this contribution, we will only deal with one of them in the text below.

Definition of organization has been offered by a lot of authors in the past as well as present. All the definitions are connected by the common characteristics of organizing as a process, through which the levels, competences and responsibility aimed at fulfilling the goals set will be determined. Organization in general is inherently connected also with formal and informal organization. As stated by Vágner and Kokavcová (2012), an informal organization originates mostly by the connection and will of people based on their needs and relationships. An informal organization originates mostly for the purpose of creating an organizational structure with an arrangement of all components involved in the process of goals fulfilment.

The organizational structure cannot be perceived in a specific single or ideal form for all cases. Each organization is specific, which is also the reason why the organizational structures created have particular differences. However, even in spite of the distinguishing features, it is possible to arrange the individual organizational structures in typologies, according to their common features. For the purposes of this contribution, we will select two of the several typologies of the organizational structure, which will be assigned in the following part, stating the particular examples. The first one of them is the typology of organizational structures according to Mydlíková (2004), which is based on the individual management levels, dealing with:

- Broad organizational structure: characterized by a low number of management levels; individual levels consist of several units and staff members being subordinated to a single manager only.

- High organizational structure: characterized by a high number of management levels; individual levels consist of a low number of units subordinated to the manager.

For the purposes of this contribution, the second typology of the organizational structures connects the two typologies by the authors Kokavcová (2012) and Dudinská, Budaj and Vitko (2009). Combination of their typologies produces further segmentation of the organizational structures to the following types:

- Linear: characterized by the existence of a single manager, determining the hierarchy and existence of linear bonds,
- Linear-crew: in addition to the aforementioned, also characterized by crews authorized to perform specific tasks,
- Target-program:
 - o Project: characterized by the creation of a group of workers identified as a team, aimed at fulfilling a specific goal,
 - o Matrix: characterized by the presence of linear units and functional units with high flexibility (Kokavcová, 2012), (Dudinská, Budaj, Vitko, 2009).

The current trends in the development and formation of organizational structures are described by Vágner (2011), who speaks specifically about the elements where the hierarchic or high organizational structures are abandoned, delegating the powers to lower management levels, preferring team arrangement or enforcing the bonds between the organization, management and staff. A specific element in the creation of organizational structure is also the type of organizational structure reminiscent of a flower, where other units, work groups or teams are arranged around the managing one.

FORMS OF ORGANIZATIONAL STRUCTURES IN THE COMMUNITY PLANNING OF SOCIAL SERVICES IN SLOVAKIA

The following section of the contribution will deal with the forms of organizational structures in the process of creating community plans of social services in Slovakia. Three cases of towns in the Slovak Republic were selected for deeper analysis. The intention of the study will be not only to determine the actors in terms of particular affiliation (submitter, social services provider, social services recipients, public, experts, institutions), but also to evaluate and determine the utilisation of the type of organizational structure in the community planning of social services. The general view will be focused on the complexity of the organizational structure, its levels, staffing and the proportional representation of individual entities. In the insight and creation of the organizational structure

scheme, some items will be left out, in particular the ones indirectly involved in the community planning, however, not included in the organizational structure in the process of creating the community plans. As an example, we can mention the city council, which is the final approver of the community plan of social services, however, only some of its members are included in the organizational structure, not the entity as a whole. Subsequently, the cases presented will be linked to the aforementioned theoretical concepts.

The criteria, based on which the towns were selected for analysis, include:

- Common regional affiliation to a particular county,
- Status of a district city with common borders to other two towns selected,
- Relatively similar size or population (5,000 – 100,000), character of the town,
- One town always represents a single size category by population:
 - o 10,000 – 19,999 inhabitants
 - o 20,000 – 49,999 inhabitants
 - o 50,000 – 99,999 inhabitants
- Prepared community plan of social services with an available organizational structure of the community planning process.

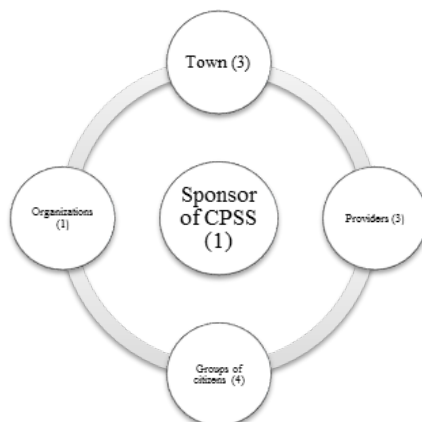
Based on the aforementioned criteria and features, the following towns will be selected as examples:

- Size category by population 10,000 – 19,999: Žiar nad Hronom (19,339),
- Size category by population 20,000 – 49,999: Zvolen (42,786),
- Size category by population 50,000 – 99,999: Banská Bystrica (78,768).

Organizational structure in the community planning of social services – Žiar nad Hronom

The town of Žiar nad Hronom started working on the first community plan of social services in 2012. The community plan prepared was a result of the project apart from Žiar nad Hronom also co-financed by the self-governing region of Banská Bystrica. The process of community plan processing was provided by one work group with different staffing during the two stages of preparation. Apart from the aforementioned two work groups, also meetings with the towns people, town representatives, members of the committee for the social affairs and family and the city council members were utilised. Another form of participation comprised the distribution of a questionnaire for the determination of the requirements and opinions of the towns people on social services, with the option of direct personal, written or electronic commenting (website).

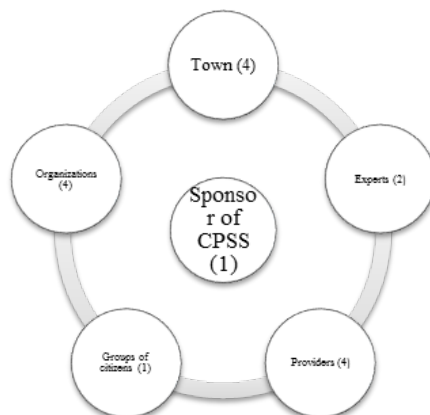
Figure 1: Organizational structure of the CPSS work group in ZH at the stage I. of preparations



Source: (Žiar nad Hronom, 2012), processed by the author.

Organizational structure of the work group at the stage I. of the community plan preparation (according to Figure 1), only consisted of a single level, without significant dominance of one of the entities. A certain form of leading position was taken by the sponsor (town representative), however, in terms of competences and responsibility, he was at the same level as the representatives of other entities. Individual entities in the organizational structure were represented by a different number of persons, which in the end could cause enforcement of an opinion or interest of a certain group when making the decisions. Another factor of the particular categorization comprises the fact that each of the citizens involved represented a specific group (seniors, Gypsies, disabled). In terms of organizational structure type, we may talk about a broad organizational structure in this case. In terms of further typology, the aforementioned organizational structure may be classified as a project type (creation of a work group).

Figure 2: Organizational structure of the CPSS work group in ZH at the stage II. of preparations



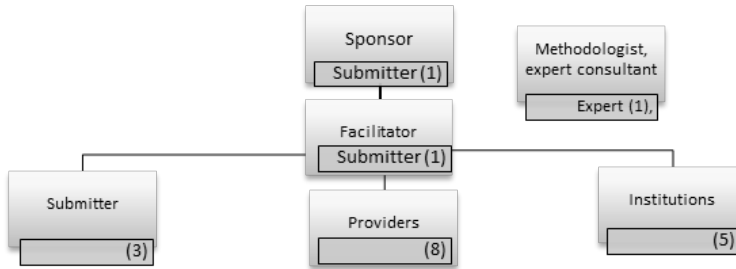
Source: (Žiar nad Hronom, 2012), processed by the author.

Organizational structure of the work group in the stage II. of preparation (Figure 2), unlike the stage I., has undergone a change in terms of increasing the number of entities from 4 to 5 (the sponsor is not considered as a separate entity, only being a part of the town representatives). Experts were invited as a separate entity in the community plan creation process. Another change compared to the stage I. was the number of individual representatives. The representation of citizen groups was decreased, increasing the group of the representatives of organizations on the other hand. The organizational structure of the work group itself remained preserved, working on the principle of equality of all entities again, with a minimum leading position of the sponsor. Classification regarding the types of organizational structures remains the same as in the first stage: broad organizational structure and project arrangement.

Organizational structure in the community planning of social services – Zvolen

The community plan of social services in Zvolen was processed in 2008, within the department of social affairs, health and family. The document originated in cooperation of the public, private and non-governmental sector. The document was created by 21 members of the work group, operating under the leadership of the sponsor, coordinator, methodologist, expert consultant and facilitator. Structure of the work group is illustrated in the Figure 3 below:

Figure 3: Organizational structure of the CPSS work group in the town of Zvolen



Source: (Zvolen, 2008), processed by the author.

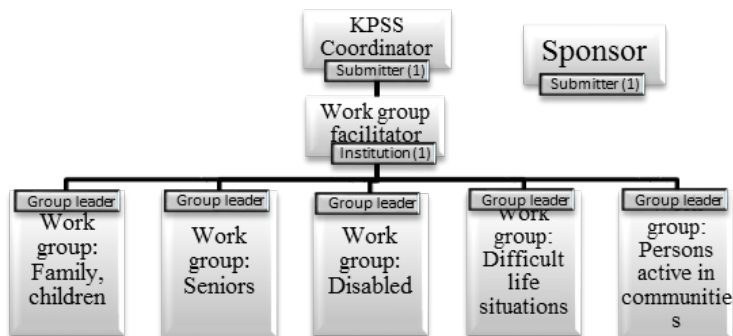
Structure of the work group processing the community plan in the town of Zvolen is characterized by a higher number not only of members but levels only. The leading position within the work group as a whole was held by the sponsor of the community plan, as the representative of the submitter (head of the department of social affairs, health and family). The medium level consists of two separate groups. One consisting of the coordinator and facilitator and the second of the methodologist and expert consultant. The first group was mainly in charge of the management of meetings or mediation of opinions and comments. The second group provided for supervision over the expertise and correctness of methodological procedures, especially in the processing of the analytical parts of the community plan. The lowest level is held by the other members representing the individual interest groups involved in the community plan creation.

Looking at the ratio of representatives of the individual groups, we may state that the submitter did reserve the right of the sponsoring position, however, is not represented by the highest number of representatives in the work group (6). The position of a group with a highest number of representatives was taken by the providers. Also the institutions were represented by a high number of members. On the contrary, the representatives of public or recipients of the social services were excluded from the process of community plan creation in terms of the work group. In this case, unlike the two cases in Žiar nad Hronom, the organizational structure is only different in the case of the facilitator’s input. The expert and methodologist represent a certain form of supervision over the whole planning process. Even in this case, we may talk about a broad organizational structure with a project type of arrangement.

Organizational structure in the community planning of social services – Banská Bystrica

The community plan of social services in the town of Banská Bystrica originated in 2015. In addition to being published on the town's website, the document was also issued separately as a publication. The creation thereof was entrusted to the managing group (Figure 4), consisting of the coordinator, work group facilitator and 5 work groups. The whole process of community plan creation was supervised by the sponsor, who was not directly involved in the managing group.

Figure 4 Organizational structure of the CPSS managing group in the town of Banská Bystrica



Source: (Banská Bystrica, 2015), processed by the author.

Similarly to the previous cases, this is also an example of a broad organizational structure. However, compared to the cases of Žiar nad Hronom and Zvolen, the organizational structure here is more complex. The previous cases were relying on a single work group with different proportional representation of the individual entities. In this case, there are several work groups created, with their own leaders, facilitators and coordinator. The aforementioned organizational structure may be identified as a project type again. In terms of further classification, we may also talk about a matrix organizational structure.

CONCLUSION

Community planning of social services is a complex process requiring not only expertise in the field but also adequate management skills. In order to balance and align communication, material and technical equipment and staffing, the organization and organizational structure requires suitable setting.

The three aforementioned cases of Žiar nad Hronom, Zvolen and Banská Bystrica prove a similar utilisation of the organizational structures in the process of community planning of social services. In all of the cases, we may talk about a broad organizational structure with a low number of levels in a vertical line. Even in terms of project arrangement, the cases represent similar types of organizational structure. Differences occur probably in relation to the size of the town and number of organizations operating in the particular territorial unit, in relation to the establishment of one or several work groups, maintaining the shape of the organizational structure. As a matter of course, it is not possible to confirm the given hypothesis based on the three cases, however, the results represent a basis for future examination.

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OUTREACH AND FORMS OF WORK WITH A CLIENT AT RISK

Tomáš Habánik¹

Abstract

The constant presence of sociopathological phenomena contributes to the process of social exclusion of individuals and whole groups of persons living in society. In connection with the issue of social exclusion there is a set of social services aimed at different groups of customers. In spite of its existence, there are people in society who refuse to take advantage of the aid available to them. Actively seeking and reaching out to clients at risk in modern society represent an important type of social services, in an effort to prevent, solve or alleviate their difficult and crisis situations. This paper concentrates on the significance of the outreach being done in conjunction with street work, currently a key method for helping clients at risk. It presents a theoretical definition of outreach, along with harm reduction approaches, as well as an analysis of the number of contacts made and other determinants in the implementation of outreach by an example of our chosen organization. Based on the presented results, attention can be subsequently fixed on the type of social service whose further rapid development will be critical in the future in order to continue minimizing risks resulting from preferred behavioral forms by client at risk groups.

KEY WORDS: Drug addiction. Outreach. Harm reduction. Street work. Social services.

INTRODUCTION

The existing social services system is presented as a tool to solve the adverse social situation of individuals and whole groups of persons living in society. The scope and extent of social services is determined, depending on the selected target group of clients to be addressed. Although a portfolio of generated social services presently exists, a deepening and accumulation of different sociopathological phenomena is continually occurring in society. The process of drug addiction can be characterized as a compelling social phenomenon whose course and consequences constitute for society a serious risk touching upon several dimensions. This paper aims to point out outreach's importance and benefit when working with a group of drug addicts, while identifying the significance of low-threshold programs, in order not just to increase a client's quality of life and minimize the risks connected to his or

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her preferred life style, but also to protect overall society's public and social health.

1 OUTREACH AND CLIENT ACCEPTANCE

Society is constantly seeing the occurrence of different social events negatively impacting the social independence of both individuals and entire population groups. Social policy mainly strives to respond adequately to the search for solutions to social problems (Horváth, Sekan, 2014), so it is not a static, but rather reacts to socioeconomic changes (Markovič, 2015). Social services can consequently be characterized as a process of either short-term or long-term intervention, while at the same time it can also be considered a significant social policy tool. In terms of individual target groups, a system of available and existing social services is being created (Bočáková et al., 2016). Even though these steps have been taken, there are both individuals and entire groups of people in society who for various causes are refusing to seek the existing set of social services provided by brick-and-mortar institutions. These causes can include prior negative experience with those facilities, mistrust or possibly just their own lack of interest in existing aid possibilities. In this context, such persons can be identified by their preference for a risky lifestyle, with behavioral expressions deviating from the majority society's. In order to eliminate the consequences of behavior by clients at risk, social workers are being forced to move out of brick-and-mortar institutions and direct their activities in the natural environment where their potential clients reside, thus leading to street work, a currently effective method used in social work (Nedělníková, et al., 2006).

In this context, street work is closely linked to outreach, consisting of *actively reaching out to clients* where primary outreach signs can be described as the process of working with a client based on *low-threshold treatment* coupled with *anonymity* and *predominantly free service provided by social services*. Actively seeking clients at risk, alongside low-threshold services, becomes the underpinning for people facing problems whom a social worker offers advice as part of outreach, as well as either the possibility of assistance or an alternative of spending leisure time more effectively. Social workers develop their own activities mainly to minimize the risks that exist as a consequence of the person's preferred dangerous lifestyle (Klíma, Jedlička, 2007).

Success is determined not only by the organization providing social work in the field directly at places where clients reside, but also in how social workers are trained both technically and psychologically, preparation essential for doing their jobs. A social worker must be empathetic, neither evaluating nor condemning

a client's behavior, but on the contrary accepting it and seeking an acceptable solution to the client's situation (Slovák, 2016).

Important signs affecting outreach's success include becoming thoroughly familiar with the situation, screening and mapping it, as well as professionally concentrating on the selected client target group to whom social workers will be reaching out. The people who can become the focus of outreach work are mainly drug addicts, the homeless, sex workers, children and young people growing up in undesirable settings, those living in different subcultures (skinheads, squatters) and also people situated in marginalized or segregated communities. The interdependence of individual client groups that often occurs in practice can be considered a significant factor (Matoušek, et al., 2013).

1.1 Reaching out to drug addicts

The remainder of the paper discusses outreach with a selected group of drug addicts. The effects of drug addiction (to both alcoholic and nonalcoholic drugs) represent a critical risk to society, while emphasizing the risk of accumulated dependence on other sociopathological phenomena. Outreach in this context can also be seen as the initial phase of working with clients, while new contacts can be sought and made using the following three principles:

- a) *Active approach* - social workers are directly in the field, in the natural environment, with the initiative and outreach to clients on their side;
- b) *Passive approach* - social workers may indeed be in the natural environment of clients, although they do not reach out to them, but rather they are waiting until either until clients contact them or gain confidence;
- c) *Mediated approach* - experienced social workers utilize their already existing contacts in reaching out to other clients. These clients subsequently can fill the role of mediators in establishing contacts with other people (Klenovský, 2006).

In light of the initial phase of working with clients, outreach mainly plays a short-term interventionist role. Nevertheless, social workers aim toward gradually directing their clients from the natural environment to low-threshold daily outreach centers where, besides the low-threshold services these centers provide, the clients can spend their leisure time more effectively. Low-threshold programs are used mainly by clients that do not accept other types of existing services, do not know where to turn and are in acute crisis, yet have no interest in fully stopping the abuse of drugs. However, low-threshold programs are not used solely by clients, but also their relatives, friends and acquaintances who have

received social advice from professionals. When working with clients in low-threshold programs, they represent an important factor since they may shift clients to a set of subsequent services (long-term cooperation with the client) including substitution, outpatient and residential treatment programs, or to mediation by medical specialist outreach assistance and social services (Janíková, 2008).

From these facts, basic differentiation can also be identified in terms of initial contact, reasoning either with the natural environment of clients or the environment in outreach or advice centers. The nature itself from the clients' way of thinking can be considered the primary difference from this point of view. While in the natural environment social workers primarily develop activities through street work in the natural environment, clients feeling the need for personal and social change are the ones mainly developing activities in outreach and advice centers. Under these circumstances, outreach center staff must approach client assessment at two basic levels, namely the client's personality and character from his or her inherent capabilities and also the dependence determined by the impact and effect of drugs on the body, including the client's thoughts, actions and behavior (Broža, 2003).

1.2 Harm reduction as part of outreach

When reaching out to clients, an important part is harm reduction, which may be characterized as approaches oriented toward minimizing risk and associated with the client's preferred risky behavior. From a historical perspective, these approaches were first applied in the Netherlands and the United Kingdom to drug addicts (Jirešová, Javorková, 2003). Drug addicts themselves constitute the group of clients most at risk and are the most important group in harm reduction, while justification can be found in the steadily rising number of hard drug abusers throughout the world whose addiction and the resulting risks can be described as an international or global problem. Injection and administration of drugs is a significant factor in the spread of HIV and hepatitis C, whose consequences represent a major health and societal risk not just for the drug abusers themselves, but also for all of society (Werb et al., 2016).

As a low-threshold program, harm reduction distinguishes the types of damage at various levels, such as individual, community and societal, while at the same time also distinguishing further damage into health, social and economic dimensions. The primary idea of harm reduction consists of not judging clients in the context of preferred lifestyle and behavior. Basic attributes of these approaches can be further classified as follows:

- a) *Pragmatism* – recognizing the risks associated with drug use while also

accepting definite benefits which the drugs bring to the user. Instead of complete abstinence, attention is given toward promoting safer drug use in conjunction with mitigating the damage caused as a consequence of abusing drugs;

- b) *Humanist values* - despite disagreement about drug use, it is not assessed by the drug user, but rather he or she accepts it as a free human being, while maintaining his or her dignity.
- c) *Focusing on damage* - mainly reducing the negative consequences associated with drug use for both the abuser and society is the primary task;
- d) *Cost benefit balance* – searching for optimal assurance leading toward a resolution of the most critical problems, in conjunction with identifying, measuring and considering the relative significance of the drug-related problems and the damage caused by abusing drugs, as well as the costs and benefits of intervention;
- e) *Prioritizing immediate goals* - staking out and realizing actual objectives while stakeholders, target groups and communities strive for a solution to primary needs (Hunt, 2005).

In this context, harm reduction objectives are significantly oriented toward the need to protect the health of both the individual and public health, while concentrating on enhancement of the client's quality of life. However in practice, social work itself and reducing harm are both psychologically and physically demanding jobs which social workers have to do (Shepard, 2013). The most important harm reduction activities can be classified, in addition to programs to change injection material and aids necessary for administering a drug, as providing information to clients about the effects of drugs, overdosing and safer alternatives and information on safe sex, alongside the provision of basic medical attendance and social advice (Jirešová, Javorková, 2003). Low-threshold principles are exceptionally important in harm reduction because prompt abstinence by drug abusers is not anticipated. For this reason, a low-threshold form contributes toward endeavoring to reach out to as many clients as possible as well as effort to take the most open approach available with them (Rogers, Ruefli, 2004).

In offering low-threshold treatment services, there are certain differences depending on the following determinants:

- a) *In outreach centers* deepening contacts with drug abusers and providing exchange programs leading toward safer use of drugs, providing information about the risk of drug abuse, opportunities for treatment and practicing safe sex, testing for contagion and sexually transmitted diseases

among drug abusers, giving urgent first aid and basic treatment, situational and structural advice and having additional services such as hygiene, food and vitamins;

- b) *in outreach programs* limited providing of services including harm reduction (exchanging injection material and aids for safe drug use, social and health advice, crisis and assistance services), together with an effort to motivate clients toward changing their risky behavior and lifestyle;
- c) *Multiple-purpose drug service* - its existence and mission is influenced by the existence of outreach center programs along with field and specific primary prevention programs. This service is conducted mainly in smaller towns and regions, where it specializes in local aspects of the drug scene. An important role is played here by networking and linking with other institutions and services, not just centrally, but also at the local and regional level;
- d) In addition to the types earlier mentioned, some countries' harm reduction include so-called "*drug consumption facilities*" - safe places where drugs brought there are administered under expert supervision. (Janíková, 2008.).

DISCUSSION

Even though harm reduction can often meet with negative responses, implementing them in society in the interest of prevention remains exceptionally current and necessary. Yet at the same time we can witness the diverse approach taken in different countries toward the issue. The scope, options and number of programs likewise vary among member states of the European Union (EU). In this context, we decided to draw attention to activities organized by *Podané Ruce, o.p.s.*, an organization endeavoring with a long-term horizon to give all persons in difficult circumstances a helping hand, while its objectives are to address clients' social, health and personal stabilization, taking into consideration the long-term stabilization of their quality of life. The organization's scope includes striving to provide a portfolio of quality social services in different areas. Despite the existence of several types of services, what can be classified among the organization's existing programs is primarily operation of outreach centers, outreach programs, outreach and low-threshold facilities for children and young people (NZDM), drug services for persons serving sentences, first aid for pathological players and news in *Hard & Smart*, a program which constitutes a process of actively seeking out clients, focusing on large numbers in dance parties and using the opportunities presented by unrestrained entertainment and nightlife, and *Stacked Deck*, a gambling prevention program (Podané Ruce o.p.s. 2016, Annual Report).

Table 1: Overview of the number of outreaches and advice given by Podané ruce o.p.s. in 2014 and 2015

Services provided	Year 2014		Year 2015		
	Number of contacts	Number of clients	Number of contacts	Number of clients	Amount of advice given
Brno Prevention Center	17 010	14 829	19 803	16 443	345
Center for Prison and Post-Release Advice	1 784	478	1 800	454	4 989
Vyškov Drug Service	635	117	768	123	159
Brno Outreach Center	8 191	702	7 778	650	337
Znojmo Outreach Center	2 160	168	2 604	219	279
Olomouc Outreach Center	9 798	418	9 730	430	1 646
Prostějov Outreach Center	2 544	285	3 250	300	723
Uherské Hradiště Outreach Center	4 614	290	3 694	243	599
Blansko NZDM	6 162	282	5 121	220	4 086
Brno NZDM	-	-	2 336	209	1 224
Mohelnice-Zábreh NZDM	2 590	144	1 855	144	98
Olomouc NZDM	7 097	307	6 020	290	350
Prostějov NZDM	1 510	145	1 431	120	444
Regional Primary Prevention	3 590	-	4 365	-	-
Brno Advice Center	-	97	1 196	112	1 851
Working with Clients in Conflict with the Law	2 595	411	3 150	548	1 081
Brno Field Programs	5 000	718	5 448	1 272	418
Olomouc Field Programs	1 787	192	1 420	210	82
Šumperk Region Field Programs	1 930	270	2 432	250	229
Olomouc Children and Youth Field Programs	2 401	230	2 514	246	222
Prostějov Children and Youth Field Programs	938	152	867	173	84
Blansko Region Multipurpose Drug Services	1 485	121	1 366	182	400
Total	83 821	20 356	88 948	22 838	19 646

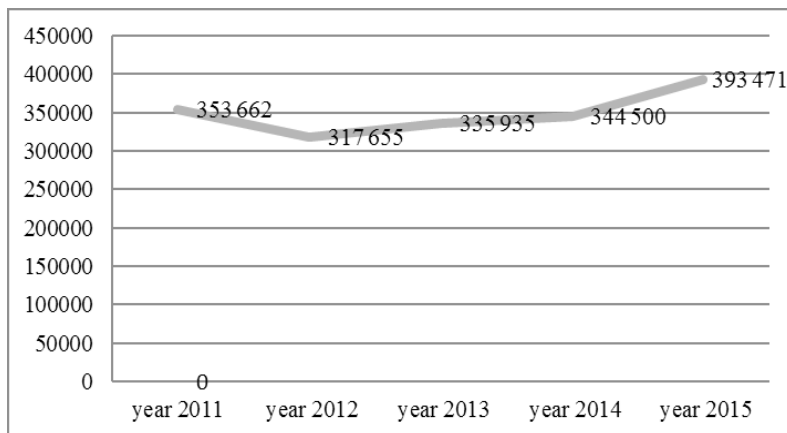
Source: Annual Report issued by Podané Ruce o.p.s. for 2013, 2014 and 2015, own work

Table 2: Summary of the number of syringes exchanged by Podané Ruce o.p.s. in the observed years 2010-2015

Service type	Year 2011	Year 2012	Year 2013	Year 2014	Year 2015
Brno Field Programs	100 931	81 770	61 060	65 203	106 530
Olomouc Field Programs	23 154	20 063	36 293	30 986	26 552
Šumperk Region Field Programs	-	-	18 422	13 229	17 120
Brno Outreach Center	89 413	89 590	76 126	95 033	110 484
Znojmo Outreach Center	21 038	23 607	17 637	13 496	17 829
Olomouc Outreach Center	30 183	29 937	39 320	44 430	43 106
Prostějov Outreach Center	38 114	26 243	28 048	22 602	20 464
Uherské Hradiště Outreach Center	11 191	10 056	18 145	25 004	24 809
Vyškov Drug Service	10 906	16 709	13 992	14 981	11 378
Blanensko Region Multipurpose Drug Services	28 732	19 680	26 892	19 536	15 199
Total	353 662	317 655	335 935	344 500	393 471

Source: Annual Report issued by Podané Ruce o.p.s for 2013, 2014 and 2015, own work

Graph 1: Number of syringes exchanged by Podané Ruce o.p.s. in the observed years 2010-2015



Source: Annual Report issued by Podané Ruce o.p.s for 2013, 2014 and 2015, own work

In terms of outreach, attention can also be drawn, in an examination of individual facilities while comparing 2015 to 2014, to the rise in the number of client reached out as well as the growing number of clients to whom its specialists have reached out. An essential part of their activities are also seen in social advice given and social assistance provided to clients who are not able to take steps on their own because of their ability and knowledge.

In terms of exchanging injection material, the analysis can point to the total number of exchanged syringes at individual facilities and the types of social service provided over the last five years (2010-2015). In this context, it can be stated in respect to the increasing number of injection material distributed through either stationary street work (low-threshold outreach centers) or as part of mobile and street work on foot (outreach programs). Likewise in this context, the analysis of a declining trend in the number of exchanged syringes almost at all facilities outside Brno is also remarkable, although on the other hand just in Brno, the second largest city in the Czech Republic, this trend continues growing regardless of whether it involves outreach or stationary street work. Despite the growing number of contacts, clients and exchanged syringes, the existing prevention system can be considered properly conceived and playing an important role in taking the early mentioned harm reduction approaches, as well as likewise from a psychological point of view in the clients, and their relatives, who are aware that low-threshold programs where help can be found are constantly close at hand and present. The merits of harm reduction and actively seeking out clients have therefore met with a positive response from users and also their relatives, stressing the possibility of realizing short-term and long-term work with a client in order to minimize any further rapid development of sociopathological phenomena.

CONCLUSION

Outreach and its mission currently represent an easily understandable and key factor in social work with selected client target groups whose behavior can be described as specific or dangerous. Outreach's success is contingent on several determinants, starting not just with the technical and psychological preparation by social workers but at the same time also applying street work methods and harm reduction approaches flowing from it which in essence focuses on minimizing the risks resulting from the preferred lifestyle of clients at risk. The primary challenge for the future is to expand outreach availability further among clients at risk as well as to extend the scope of other, follow-up services to be applied according to the needs of clients within different outreach target groups.

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MOVEMENT ACTIVITIES FOR THE IMPROVEMENT OF SENIORS' BALANCE

Monika Orliková¹

Abstract

Movement activity of elderly people is becoming more and more topical today. Physical and psychical abilities make the whole process of aging substantially easier. The aim is not only the prolongation of life time but mainly the achievement of a well being feeling and improvement of the quality of seniors' life. The article points at an important role of movement which has a big impact on the quality of seniors' life. The author has provided a set of exercises which can help improve the seniors' balance.

KEY WORDS: Quality of life. Seniors. Movement exercises. Balance.

INTRODUCTION

In the last years, the issue of life quality is very actual. Quality of life depends on the value orientation of understanding the meaning of life. It has its external as well as internal pages. The term "quality of life" is used in many human areas. WHO definition from 1946 says that quality of life is a state of complete physical, mental and social well being and not only the absence of disease (WHO, 1946). Almost 30 years later the quality of life is how one perceives their position in life in the context of the culture in which he lives and in relation to the objectives, expectations, lifestyles and interests (WHOQL Group, 1994). Křivohlavý (2001) assessed the quality of life of the plane oriented society, social groups, personnel planes with health assessments, pain, satisfaction and physical plane of existence. One of the factors of quality of life is physical activity that can be deliberately used as a support in order to improve the lives of seniors.

Physical activity positively affects physical and psychosocial health at any age of an individual, and therefore the promotion of physical activity an effective factor to improve the health and quality of life (Minaříková, 2002).

Physical activity, exercise and sport are an integral part of human life at any age. It is known that the movement is generally provided a basis for the survival, self-reliance, self-sufficiency.

Effect on maintaining mental and social activities, reduces the feeling of loneliness, it helps prevent various diseases, eliminating the impact of adverse

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psychological and last but not least slows down the aging process. Blair and team (1995), based on scientific evidence, proposed transfer of the strategic focus from physical activity on physical fitness, to a new strategic focus on physical activity, public health. This new strategy, also called as a strategy for lifetime physical activity differs from previous strategies by three indicators:

Promote the lifelong physical activity modern man may be one of the steps to increase the knowledge of people about the need and importance of regular exercise, leading to health promotion, adequate performance and long energetic life (Čornaničová, 2007).

Physical activities suitable for seniors

Physical activity of older people is becoming increasingly topical. Physical and mental fitness significantly facilitates the process of aging. The goal is not only the extension of the life, but first of all achieving a sense of well being and improve the quality of life of seniors.

For senior is necessary to understand the importance of physical activities for a healthy life. It is important to note that the older body becomes less flexible and less strong. If seniors are not active, they may experience physical and psychosomatic illnesses as backache, neck, feet, circulatory problems, and the last, but not least. obesity. Muscles atrophy is performed and accumulation of physical and mental tension leads to losing vitality. Only physical activity can limit or at last slow down this proces. Relevant studies show that man older than 80 after a few month of excercising gets back significant part of his muscle power. People, who were excercising all their life perform much more cardiac, respiratory and circulatory efficiency as passive people. Effective prevention of aging are just different forms of selfrealisation of older people. The positive effects of regular physical activity also take place in the senior age, following an appropriate choice of its quantitative and qualitative indicators. They must respect health restrictions, taking into account the level of physical fitness, motor skills and acquiring interests). Definitely, the physical activity prolongs life, slows down aging and decrease need for medical care or hospitalisation (Zvázalová and team, 1994).

Uhliř in his publication for older seniors (2008) summarised positive effects of excercising into these main areas:

- ▶ improving physical fitness variables (tidal volume, cardiac output), control of blood pressure, reduce the risk of coronary heart disease and heart failure, representation of fat in the blood serum treatment
- ▶ improvement of blood sugar level control, improvement of cotrol of

insulin receptors sensitivity (possible dose reducing)

- ▶ reduction of bone mass loss, (esp. postmenopausal women)
- ▶ reduction of the risk of falls and fractures of bones
- ▶ improvement of mobility and the functions of joints, reducing pain of joints
- ▶ improvement of urination disorders (urinary incontinence, etc.)
- ▶ reduction of the risk of colon cancer (improvement of peristalsis), breasts, prostate and rectal cancer
- ▶ improvement of sleep quality, learning ability, short-term memory
- ▶ reduction of the symptoms of disorders in the development of vascular closure, reducing the risk (tromboflebitid, pneumonia, etc);
- ▶ increasing metabolism (organism to burn more calories), optimal body weight control
- ▶ antidepressive effect, increasing social contacts.

When creating physical activity programs for seniors, we should take into account the fact that in the senior age there is some (but individual) limiting the physical and mental performance. Functional reserves are falling, reducing the ability of regulations, increasing overall adaptability of the organism. Physical activity in old age should be consistent with the morphological changes. When building exercise program it is important to take into account the technical factors, which include the factor of velocity, ie the time required to perform one repetition. Slower movement during exercise produces greater muscle tension and reduces torque, which in turn can increase muscle stimulation and reduce the risk of injury during exercise. Another factor is the factor of the range of motion, where attention is set on the maximal, but still controlled range of motion. The last factor is the factor of proper breathing during exercise. It appears that the physical fitness of older individuals is more dependent on the state of power than the endurance (Hunter and team, 2004).

Seniors are suitable with many types of exercises. Everyone can choose activity, which once already done, or may start with a brand new physical activity.

A set of exercises to improve balance.

Balance - stability is one of fundamental movement skills. It is actually the ability to keep the stability of the body and its parts in conditions of unstable environment. Correct balance is necessary for life and is one of the basic movement skills.

Dividing balance:

- static balance - maintaining the stability of the body in standing, sitting
- dynamic balance - the ability to perform everyday movements such as lifting the object off the ground, dressing, turning up, walking, running

Throughout life, with the passing years, the balance deteriorates in humans. Balance disorders manifest a number of symptoms, the most common: a feeling of dizziness, instability, sensation of falling, disorientation etc. Loss of ability to maintain a balance leads to crashes, injuries, fractures and restrictions to perform normal physical activities. Exercises to improve balance and maintain stability help to maintain body condition, senior independence, and reduce the risk of falls, so it is important to bring these exercises systematically on the exercising programs for seniors. Balance training exercises for seniors can take place anywhere. It can be incorporated into other physical activity. Seniors can go on without tools or exercises using aids (Baisová, Kružliak, 2014). For exercises we use various tools such as: BOSU - rubber hemisphere, overball, fit ball, balance device, trampoline, beams etc.

Exercising without tools

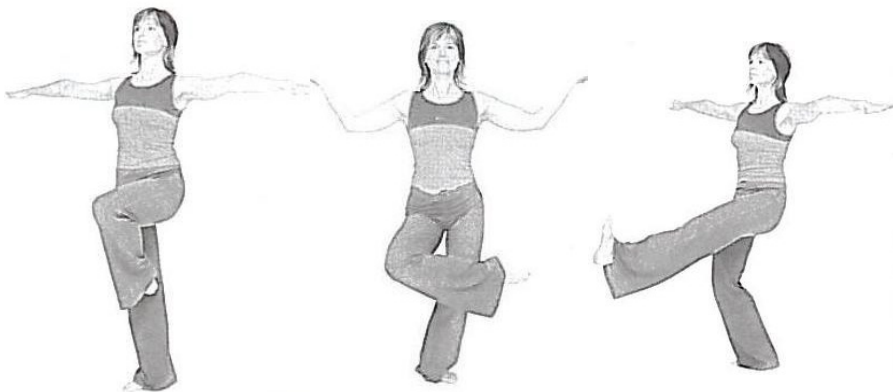
- Stand

Stand astride, feet are parallel (distance between the feet is gradually decreasing), senior transfers the weight from one foot to the other with rhythmic breathing. There should be felt foot contact with the washer (if necessary you can do this exercise with chairs)

- Standing on one leg

Stand on one leg with eyes open (60 -69 years - 27 seconds, 70 to 79 years - 17 seconds, 80 -99 years - eight seconds). The exercise can be practiced also in the apartment. If the senior can handle easily 30 seconds, exercise can be made more difficult by closing eyes.

Picture 1: Standing on one leg



Source: internet

- Stright line walking

Just go twenty steps ahead in a straight line by small steps, put right heel in front of toe. If it goes smoothly senior can try the same way backwards.

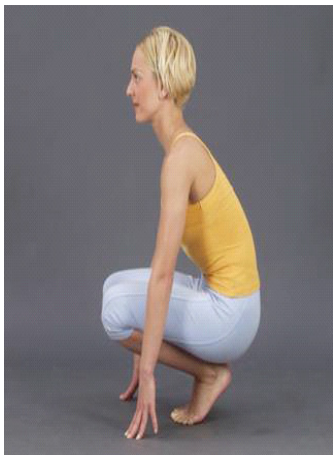
- Sitting and walking

Senior sitting on a chair 40 -50 cm high, stands up and moves three meters, turns around, goes back and sits down. The average values of the measurement time: 69 to 69 years - 9 seconds, 70 - 79 to 10 seconds, and 80 more - 12.5 seconds

- Squats

Tight muscles can prevent seniors from stumbling and falling down. If permitted by health, seniors , can strengthen muscles by simple squats. In this exercise it is necessary straddling legs on the width of the hips, bend knees and slowly move down (just like if you sit on the chair).

Picture 2: Squat



Source: internet

Exercising with tools

- Posturomed

Posturomed is a device that consists of a square-labile tread surface with two brakes and the frame. If lost stability, seniors can catch the frame. Lability is controlled by brake systems. The device helps to improve stability and muscle coordination. Exercising can be done also at home after previous instructions provided by doctor or physical therapist. Senior walks on the unstable surface and stops. When senior stops, he has to balance the stability.

Picture 3: Posturomed



Source: internet

- **Balance trainer (BOSU)**

Balance trainer makes senior to keep stability as long as possible. That makes

him to strenght muscles which are not in use by ordinary exercising. There are many variations of balance excercising, depending on level of difficulty. The basic one is to stand on the trainer and try to keep stability. When this is managed, there may be added more different movements, as squat etc. It is ideal to start with senior's own body weight.

Picture 4: Bosu

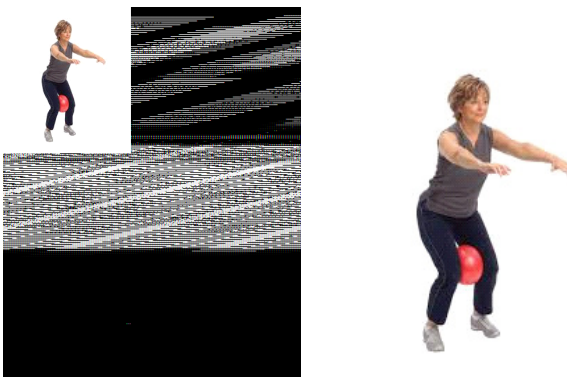


Source: internet

- **Training with overballs**

Overball is a small inflatable ball with a flexible surface and 150-200 kgs load capacity. Diameter is 22-29 cm. It was used as a physical therapy tool in the past. Now it is used in fitness and relaxation exercises or the exercises, aimed at training and improving the balance of the body. Overball belongs into group of balance training tools. These tools help to improve proper body posture. Its advantages are low price and possibile home use.

Picture 5: Overbals



Source: internet

For exercising are used two balls. Senior stands on two balls and tries to keep stability. Exercise can be made more difficult by passing different things each to other exercisers.

For exercising are used two balls. Senior stands on two balls and tries to keep stability. When done, he tries to make a squash with hands behind his head.

- **Training with fit balls**

Fit ball (named also as a gymnastic ball, balance ball) was created as a toy. Later it was used in rehabilitation process as a physical therapy toll at school or fitness centres. It is a big ball made of unbreakable material, wit load capacity up to 200 kgs. It is suitable for different exercising, suitable for all ages, if choosen corect set of exercises. For senior is this exercising very difficult. We usualy start with sitting on the ball. If this is managed, we try to lift legs and try to keep stability.

Picture 6: Fit balls



Source: internet

CONCLUSION

Promoting active senior model becomes the center of interest, not only health professionals and social workers, but also economists and politicians because of the constantly increasing number of older people in our community. It is necessary for seniors to start to take physical activity as a normal part of their life. The goal of this activity is to help to keep independency of seniors and increase, or at last keep the level of physical fitness of seniors, decrease need of long time health care and improve quality of their life. (Matouš, 2004). For

seniors is balance exercising very important. Regular balance training helps prevent injuries and keeps body of seniors in a good condition. We start with easy kind of exercise without tools and graduate to more complex exercising, using different tools.

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FORMS OF SOCIAL CARE AND SOCIAL ASSISTANCE TO SENIORS IN THE REGION OF POVAŽSKÁ BYSTRICA

Peter Mát'oš¹

Abstract

All developed social systems provide social services to seniors as an essential component of help to this age group of citizens. We look closer to Act No. 448/2008 Coll. on Social Services, focusing on seniors as the target group. The paper points out the importance of linking social care and health care thus this connection is helping to improve the quality of life in old age stages. We highlight home care service as the most progressive tool of social services. Also we point out the importance of decentralization and deinstitutionalization of the social services. Moreover we deal with the analysis of social services for seniors in Povazska Bystrica region. Further on we focus on the quality of life of older people and also on adaptation of elderly in the context of institutional environment.

KEY WORDS: Senior. Social services. Social care. Social assistance. Quality of life.

INTRODUCTION

Social reality considered as the subject of social policy in terms of social security and welfare system is very complex. It is interdisciplinary and refers to many fields that are difficult to understand integrally. Taking demographic development into consideration with the population progressively aging, the social services for the elderly are becoming more important and more significant. There are also other target groups to whom the social services are very important.

1 FORMS OF SOCIAL CARE AND SOCIAL ASSISTANCE FOR SENIORS

Stanek (2011) argues that social policy is defined as a set of activities that thoughtfully intend to improve basic living conditions of the population as a whole group or as particular groups and leads to providing sustainable social sovereignty and social security in the framework of economic and political orientation of the country.

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Tokárová et al. (2007) says that social policy stands on four fundamental principles:

- social justice
- social solidarity
- subsidiarity
- participation

Social justice is the key principle of social policy. Strieženec (1999) emphasizes that social guarantee provided by the state is the core element of social rights. Welfare system, state institutions and public social security systems such as social insurance, social support and social assistance are included as well. Initiatives of civic associations plus public, private and religious charities are also considered.

Each person, perceived as a social being, is dependent on other people to some extent, says Krebs (2010). The person is dependent on the co-existence of society as the whole. The author also says that solidarity is an aspect of human understanding and fellowship, mutual cohesion and responsibility. He highlights that the principle of subsidiarity is emphasized. According to it everyone is obliged to help himself, and if he fails, family members must help him. This also applies to municipalities. If they are unable to deal with their duties and responsibilities themselves, they call for help from regional bodies, autonomous regions, and finally the state itself.

Strieženec (1999) emphasizes the principle of participation. All individuals are responsible for their own quality of life, citizens are not only consumers but also co-creators of social policy.

Bočáková (2015) mentions that social security is the indicator of social dimension. Social security is not only a subject, but also an active tool in terms of social policy and guarantees the implementation of human rights. The priority number one of social security is to provide individuals and their families certainty and stability, appropriate living standards and quality of life so as to avoid risk and reduction of their social or economic situation.

Social security can be regarded as the fundamental institution of social policy according to Stanek et al. (2011). Since each author puts emphasis on different social events (e.g. diseases, aging, childbirth, unemployment etc.) it is impossible to come out with a clear definition of social security. In general, social security can be divided into three basic systems:

- *social insurance*
- *social support*
- *social help*

Social insurance offers financial security to individuals or family members against predictable and foreseeable events under the policy of their insurances. Social security benefits include:

- *sickness insurance* – sickness benefits, caregiving benefits, maternity benefits, compensation benefits
- *pension insurance* – old-age pension rent, early pension, disability annuity, survivorship annuity, orphan's annuity
- *accident insurance* – accident allowance, accident annuity, one-time compensation, survivor accident annuity, lump sum compensation, rehabilitation compensation, retraining fee, pain allowance, accidental death benefit, funeral expenses damages, treatment expenses compensation
- *guarantee insurance and unemployment insurance* - entitlement to salary and compensation for sickness leave, entitled pays for holidays, obstacles to work, legally required severance pay, travel expenses claim and more

Social insurance can be applied whenever an insurance event may occur (Stanek, 2011).

Social support, says Stanek (2011), is focused on financial support to individuals and families in particular. Social support is designed to improve (raise) the income of low-income families who are employed and paid poorly and also to help families during their poor social situation.

Rievajová (2010) states that the current system of social support consists of nonrecurring (one-time charge) and repeated financial contributions - social benefits.

Nonrecurring charges are the following:

- *child-birth allowance*
- *allowance for mothers who repeatedly born twins in the course of two years*
- *parental contribution to those who were given birth of three or more children concurrently*
- *disposable payment for children in ward*
- *funeral allowance*
- *others*

Examples of repeated financial contributions are:

- *children benefits*
- *parental allowances*
- *maternity allowances*
- *repeated allowances for substitute parents*
- *others* (Rievajová, 2010)

Social support unlike social security, is not bound to deductions from employment income or payment benefits of beneficiaries of entitled persons.

Social help is the third pillar of social security. The aim of social help is to facilitate or overcome the state of indigence to secure their integration into society. Social help is provided to residents who can end up in material and social distress (Stanek 2011).

Material need is a situation when the income of household members is below the minimum income standard (living wages). People are in social need when they are unable to take care of themselves and their household, mainly due to serious diseases or due to their old age.

Social services have an irreplaceable role in social policy. Repková (2012) points out that social services are focused on social needs of those people who would find themselves below minimum income standard, or at least would undertake a risk to live below adequate income without being provided the social services.

As Hrozenká et al. (2013) mentioned, social services are provided to people who are in danger of social exclusion and the aim is to integrate them into society and improve their quality of life. The amount, extent and form of social support and social assistance through social care must maintain human dignity.

What is significantly important while taking care of the elderly and other target groups is the nursing home care (domiciliary care). This type of care is financially more convenient and the seniors can stay in their own homes. The main objectives of domiciliary care are to provide services to clients and guarantee their basic needs, their relatively independent life at home, an option to keep in touch with the known social environment and to postpone the urgency of residential care in care homes (Križková, 2010).

Bočáková (2015) argues that social changes increase burden and psychological distress and represent some risk for seniors from the aspect of their mental health. The most demanding changes in particular are those, listed below, which disrupt social relations:

- *retirement*
- *moving a house*
- *leaving a residential care home*
- *death of a loved one*
- *others*

Radičová (1998) says that social support is a set of legislative, financial and administrative measures aiming to provide help, assistance and support to citizens in need. One of main targets is to avoid their social exclusion.

The system of social care is based on the following principles:

- *demonopolization* – based on breaking up a centralized state management and the transfer (distribution) of social care from one centre (the state) to various entities that provide social care
- *decentralization* – social care is brought closer to citizens, the activities at local level are increasing, the powers of government are redistributed from central authorities to municipalities. It means that municipalities have more competencies and need to spend more money to finance social care. The state only administers the laws and applies legislation to keep the social system going.
- *adequacy* – social care must be provided in the right form and extent so that do not cause demotivation
- *effectiveness* – social services must have a specific goal, be provided for a particular purpose, must be applied according to conditions stated in advance to achieve the desired effect
- *plurality of sources* – social care is not provided exclusively by the state, the functions are dispersed to municipalities and non-governmental organizations and the state is only responsible for functioning of social care scheme
- *professionalization* – professional qualification is required from all workers engaged in the social care system

Community Plan on Social Services is a document that helps to achieve the objectives of social services, it means to reduce or overcome the state of social need. Municipalities are obliged to design such a Community Plan and to disclose it on the Internet.

Social services are financed by following sources:

- *municipality budget in villages or towns*
- *budget of higher self-governing regions*
- *providers*
- *grant programs*
- *structural funds*
- *grants from the Ministry of Labour, Social Affairs and Family (Law 448/2008 on social services)*

Act No. 448/2008 on social services is applied when social services are provided within the administration of municipalities.

A Community Plan on Social Services is designed and approved by municipalities to create conditions and promote community development. The cities also work as administrative authorities concerning the creation and expiry of social assistance and services. They also define and deal with regulations to

determine requirements for obtaining social services for people in need. Our municipality provides various types of social services in a dormitory, low-threshold day center for children and families, facilities for elderly, nursing care facilities and daily stationaries. It provides not only nursing services, transportation and facilitate services, but also basic social counseling.

Details of social services provided in the town of Považská Bystrica are listed in tables 1, 2, 3.

Table 1: Social services available in Považská Bystrica

NAME	AVAILABLE CAPACITY
Senior Care Home and Social Services Home	160 beds
Senior Care Home	35 beds
Social Care Home Tulipán	69 beds
Senior Care Home Katka	118 beds
Children Charity Home	25 children
Shelter for Homeless	20 people
Daily Senior Centres	268 members
Crisis Centre Čakanka	20 beds
Dormitory for Homeless (in winter time)	

Source: Municipality of Považská Bystrica, 2015

Table 2: Social assistnace services provided in Považská Bystrica

Number of care givers, dated 31/12/2014	102
Number of care takers, dated 31/12/2014	131
Age structure	
90 and more years old	10
85 – 89 years old	25
80 – 84 years old	40
75 – 79 years old	18
70 – 74 years old	10
65 – 69 years old	10
18 – 64 years old	17
0 – 17 years old	1

Sources: Community Plan on Social Services in the town of Považská Bystrica

Table 3: Social counseling in Považská Bystrica

Target groups	Number of councilors
Children and families	0
Seniors	1
Disabled residents	3
Summary of all target groups	4

Sources: Community Plan on Social Services in the town of Považská Bystrica

The foundation base for the correlation between social policy and social cohesion is defined by global and European social, economic, political, cultural and legal systems. Social policy and social work are currently being created and implemented at various levels (Hetteš, 2013).

CONCLUSION

Providing social security for the citizens is one of the key roles of the state. The system of social services is used to achieve these tasks, including social insurance, social support and social assistance and help. Social security is implemented through social policy which depends on the economy of the country. Paying attention to social policy, social security and social services is a must for the government at all levels. Therefore there is a Community Plan designed in Považská Bystrica, based on the Concept of Social Services Development for the Trenčín Region. Finally, it is important to point out how essential it is to listen to the demands of residents, because only then the satisfaction with the work of local government representatives will be achieved.

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INDIVIDUAL PLANNING IN THE SOCIAL SERVICES

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Abstract

This report reflects on the individual planning in the social services of the social service recipient. Moreover, it offers access possibilities to clients and care philosophy, which can be beneficial not only for the client, but also for the employee working in social services. Now, when we are introducing quality standards into practice we are selecting processing criterion aimed at individual plans creating from different vantage points. In our point of view we are considering specific social services recipient – adult client of social services centre. We are presenting the view on recipient in connection with the increase of quality of life via individual planning. Quality of life is a subjective view a person has about how they live, where they live, what they live through, what are their opportunities. In this report we will investigate life and feelings of an adult client a social services recipient.

KEY WORDS: Social services. Individual planning. Client. Therapy.

INTRODUCTION

The National Council of the Slovak Republic Act No. 448/2008 of the Codex on Social Services and on Amendment of the Act no. 455/1991 of the Codex on Entrepreneurship delimitates a social service as a professional, servicing and other activity aiming at prevention of initiation of an unfavorable social situation and solution or mitigation of this situation. We ensure preservation, recovery or development of abilities to follow an independent life and promote integration of the receiver into the society by the means of social services. We also ensure indispensable conditions to satisfy basic needs for living, solving a crisis social situation and prevent social exclusion.

A duty of the social service provider is to reflect individual needs of the social service recipient, make them active and provide a social service in a professional manner. Cooperation with the family, municipality and community is inherent. Part of the social service is the elaboration of the individual plan for the social service recipient.

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1 SOCIAL REHABILITATION

The social service provider is required to plan a social service according to individual needs, capabilities and targets of the social service recipient, to lead written evidence on its course and to evaluate the course of the social service in the presence of the recipient. If the social service recipient is a person requiring another person's help, part of the individual plan is also a program of social rehabilitation.

Social rehabilitation is a professional activity aiming at support of independence, self-sufficiency of a person, development and training of their capabilities, activating of their abilities, strengthening of habits during self-servicing, household activities and basic social activities. It refers especially to various activities such as training of capabilities, adjusting of the everyday life of the person with disabilities to a maximum independence and integration of the social service recipient to the everyday life. If the person requires help of another person, it mainly refers to training in use of tools, training in household activities, training in spatial orientation, training in independent motion.

Subject matter of the social rehabilitation lays in:

1. the area of perception - sight, hearing, touch,
2. the area of orientation and mobility,
3. the cognitive area,
4. the communication area,
5. the social area,
6. the emotional area,
7. the area of everyday tasks.

2 INDIVIDUAL PLANNING AND SOCIAL SERVICE RECIPIENT

Individual planning is a dialog between a key worker or another employee and the social service recipient when they plan together actual aims and needs and the course of the social service.

The fundamentals of planning are closely connected to the quality of life and normalization. Our aim is to make the life in the house of social services as much similar to the life in families and households as possible. Focus is put on respect of personal goals, needs, capabilities and health or psychological state of the social service recipient.

The planning comes out of options and capabilities of the recipient, support of the activities and independence support of the standard way of life, it derives from real needs and goals, when every client has a right to change their goals.

They propose terms of goals execution and their evaluation via their participation. Key worker investigates the needs of the recipient, plans and evaluates the whole process, he or she is very close to the recipient - coordinates the service execution, administers the documentation and holds the position of a consultant and confident to the recipient.

For individual planning we use approaches of: Maslow, Rogers, Satir and others.

A.H. Maslow's pyramid depicts the bottom-up sequence of securing particular needs of the social service recipient. The system of needs of this American psychologist reflects the sequence according to the level of urgency. The urgency lowers from the basic needs to higher needs. The recourse of the hierarchical system of needs is their experienced urgency and principal that the above mentioned needs in this system are satisfied only when the lower needs are satisfied at least to some extent. This expresses the system of dominance: higher needs enter only when the lower needs are at least partially satisfied.

Maslow divided the needs from the lowest to the highest into five categories, physiological needs, needs of safety and security, need of love, acceptance and companionship, need of recognition and appreciation and need of self-expression.

Satisfying of deficient needs to the recipient of the social service ensures mental well-being and development of personality. It follows that when creating an individual plan we take into consideration mentioned needs but also basic criteria for plan creation:

1. complexity - should contain all needs of the recipient,
2. coordination - contains cooperation of professionals,
3. individual adaptation - plan is created on purpose for a specific receiver of the social service.

Based on individual criteria and principles of planning of the social service one must mention the stages of creation of the individual plan:

- stage of mapping of life situation,
- stage of goal creation,
- stage of method selection,
- stage of creation of the plan of activities,
- stage of documentation.

We always take into account the positive change of the quality of life of the recipient in his or her presence and complete participation. Therefore, the goals should be real, measurable, taking into account their personality, gradual from the most important, from simple to more complex, supporting qualities of the

social service recipient.

The methods of the social rehabilitation are for instance:

- training of spatial orientation,
- training of self-servicing activities,
- training of work with compensation tools,
- training of social communication,
- training of pictorial communication and others.

Worktherapy can be considered as a method. When working with the recipient we recommend to use the elements of various therapies such as musictherapy, arttherapy, bibliotherapy, animal therapy, farming therapy, dramatherapy, therapy by playing, psychomotortherapy, reminiscence therapy, elements of snoezelen and many others. Therapeutic activities represent a qualitative dimension of impact on the social service recipient with the aim of achieving a positive change in the quality of life. In this process, we consciously shape the receiver – we stipulate individual sources of the social service recipient. All mentioned therapeutic activities offer help, in their simplicity, to those who live in the houses of social services. They offer social-educational effect, re-education, relaxation, positive influence on the mood, process based on dynamic interaction between the recipient of the social service and the worker, they consciously shape opinions, beliefs and stances.

One may recommend a few approaches in work with recipients of social services. In practice, the most time-proven approach is the humanistic approach oriented at the people. C. Rogers perceives people as whole, unique personalities, that every person can naturally develop. Self-perception is important. Postulates such as empathy, acceptance, congruence, positive feedback have their place here. We help the client without evaluating their stances and behavior. Their approach is non-directive with non-evaluating stance of the employee, with active listening and authenticity.

Another representative is the already mentioned A. H. Maslow. The third, behavioral approach is represented by for instance Watson, James or Lock who identify themselves with the idea that humans' behaviors are a summary of reactions to some stimulus. A quality feature of behaviorism is a stimulus - reaction, meaning response.

The above proves measurability of goals in the individual plan. We receive a response as long as we create enough stimulus for the social service recipient. If we choose a suitable goal or method, we provide support to the client - we can expect a positive feedback.

3 THERAPEUTICAL ACTIVITIES

In individual planning we often use therapeutical activities, as methods, for example: arttherapy, musictherapy, bibliotherapy, dramatherapy, worktherapy, animaltherapy, psychomotortherapy, therapy by playing, reminiscence therapy.

Therapeutical activities represent qualitative dimension of influence on the receiver of social services aiming at acquiring recovery of the life quality. Human creativity is the basis of people's existence not excluding people with disabilities. This process consist of a conscious effort to form opinions, convictions, stances and actions or a stimulation of individual resources of the social service receiver, alternatively in his surroundings.

In the care centers offering social services we apply most of all arttherapy, musictherapy, bibliotherapy and reminiscence therapy. All mentioned therapeutical activities, in their simplicity, offer help to those looking after the receivers of social services.

Stress is an indivisible part of today's hurrying era. We all talk about it, we make excuses, we apology... but does it have to be this way? Sixty percent of stress is connected to our work and other working activities. Therefore, the number of people suffering from stress has a raising tendency. On the one hand there is insecurity, high emotional demands from the employers. On the other hand there is a mentally demanding work with the receivers of social services in the care-centers. How to protect ourselves from the emotional baggage at the workplace and what can we do for ourselves to prevent unpleasant mental states and exhaustion? We hear from here and there that a good book, time spent in the nature, relax of any kind, body movement, good family ambiance, having a few minutes just for ourselves to "switch off" can help. Let's get inspired with therapeutical activities, applied on receivers of social services.

3.1 Arttherapy in individual planning

Arttherapy is one of the methods used in social work. It can be helpful in the personnel's day to day work with client. It brings along a variety of possibilities, themes, techniques on how to better know the client and so help him or her.

Arttherapy is defined as healing with art. This expression derives from Latin, "art"/"artis" meaning art. Art is used in the process as a communication medium helping all stakeholders express their feelings in a non-verbal manner. It offers an opportunity to get to know information about ourselves and, in the meantime, discover new possibilities. The interactive process in the group creating the piece of art is of prime importance. It brings us back to the state of harmony with

ourselves and others in our surroundings. Artetherapy is also used as a means of prevention in subsequent care in healthcare, social care and education, when healing somatic disorders, to overcome fear, to understand ourselves and others. It uses activities like drawing, painting, collage, work with clay soil, modeling, etc.

Self-expression and development of creativity stimulates self-recovery mechanisms, process of creation. Many authors agree on the definition of artetherapy: "Its driving power derives from within the personality. It is a means of bringing order into the chaos of inner feelings and motives and relieves an amazing amount of impressions. It is a means to discover ourselves and the world also as to create mutual relationships. Connection of internal and external reality into the new entity is a product of a creative process". They call artistic work to be the meeting place of the internal and external world. We can only agree with this characteristics.

Various kinds of artistic activities are currently used by many workplaces, care centers, leisure organizations or educational institutes. What about grasping the pencil, colorful crayons or for instance aquarelle and spontaneously express your own feelings on a sheet of paper? This way, one can get back to the childhood and use his or her free creativity to release that day's carried baggage on the paper. Let release everything that our organism could not bear during the day. Let our external world match the internal world. We will feel a huge relief if not a pleasure from creating something in just a short moment.

In the client's individual plan, with his or hers full participation, we opt for ways of improvement of the client's quality of life - via participation at artetherapy once or twice a week. Alternatively, by using elements of the therapy during other activities for example in worktherapy.

3.2 Musictherapy in individual planning

Second methods is musictherapy. The expression musictherapy means healing with music - "muzika" and "terapia" means music and healing. Music's means of expression is organization and harmony of tones. Music is exactly what our brain processes, affects people's emotions, their movement functions and their imagination.

When someone says "music" everyone imagines his favorite composition or song. Many people recall their memories and emotions experienced when listening to a composition. Music helps us handle our every day worries and joys. Music is perceived as a means of self-reflection and relax that is closely connected to its therapeutical effect on people. Music effects us with its core features, rhythm, harmony and melody. Based on its classification, music also

has other facets like sound color, dynamics, tempo, etc. Let's consider now together its basic features.

Rhythm indicates various kinds of a somehow chronologically organized motion. Rhythm is not a privilege of music. It is part of our entire life. Everything, we see around us, is pulsing: human life, life of animals and plants, the whole universe, rhythmic changes of day and night, high and low tide, seasons, heart pulse, pulse of blood in arteries, breathing, sleep, walk and other.

Melody is a time organization of relations between tone features (color, height, strength and length) on a horizontal level of the music space. Melody is an ideological holder of the music idea, represented mainly by a song. The more personal experiences the melody contains, the better it is. It offers an insight into a person. The melody of speech has the same importance as the melody of a song. A melodious course of someone's speech symbolizes his own inner world, his current being.

Harmony in terms of music is a means of expressing the mood by melody. Harmonious traits of a piece of music are expressed with a sound character of specific accords in different tonalities.

Techniques of musictherapy, applied when working with receivers of social services, can be used for relaxation after a tiring day. Hence recommended as the second type for the emotional baggage elimination and bringing back well-being into everyday life. Here are a few hints: Musical improvisation as a spontaneous creation of music by playing on your body, singing and playing the musical instruments. We create a musically and emotionally favorable ambiance supporting relaxation, self-healing processes and joy.

Musical interpretation is based on reproduction of a known material. Playing on the body, singing, playing the musical instruments along with additional movements and artistic devices. This therapy is convenient for those seeking to strengthen self-confidence and feeling anxiety of spontaneous expression. Musical interpretation helps to develop musical capabilities, perceptive, motional, social and cognitive functions. It builds self-discipline and self-control.

Singing songs helps people since prehistory. It provides them with emotional background. Our ancestors have been often meeting during the year to follow traditions while singing. Group singing makes people gather, offers anonymous expression and possibility to relax. Listening to the music supports expression of ideas and feelings in a non-directive way. It makes it easier to get to know others, to communicate and interact. Music evokes memories and emotional feelings.

We recommend to match elements of arttherapy and musictherapy into one approach. We can appreciate it especially when fulfilling the recommendations during the individual plan based on the conclusion set up.

3.3 Bibliotherapy in individual planning

Bibliotherapy means in its simplicity healing with literary work. It is proved by research in the area of application of bibliotherapy that a book has a huge therapeutical impact, fills with optimism, brings along positive role models, helps to mobilize mental strength, is a meaningful way to spend time. Reader searches impulses from the literature that allow him or her to overcome tough periods in live more easily. Therefore, the third type of elimination of emotional baggage is to spend some time with a good book. The choice is ours.

Bibliotherapy still haven't acquired the position it deserves. The tool of bibliography is a book. But only a well chosen book can positively influence us and prevent moments of disgust and doubts. To fulfill its positive role, the book must reflect someone's needs and life circumstances of a specific period.

An interesting explanation of bibliotherapy is offered by some authors who see it as a lifelong enriching constructive and creative process. Many people go to libraries. Long discussions about a book make people. If we give a book as a present we offer the receiver space for a healing process of bibliotherapy.

Application of some bibliotherapy elements in their receptive or expressive forms is highly justified when working with receivers of social services. Reading a text is rather concentrated on sensitivity of perception, hence a receptive facet of a person. Writing is a rather expressive facet, hence developing creativity and discovering capabilities with words. Reading as an activity is a physically complex process mediated by senses (sight, hearing). It also is a mental activity through mediating and activating the mind.

Bibliotherapy represents a method that can be linked to other therapies. For instance the combination with the reminiscence therapy is suitable for older clients. Here, we focus on remembering of specific periods in the person's life, also as reminding of the moments of life with gravity or in a funny matter. It brings joy into the client's life, re-living of joyful moments also as a relief of the negative memories and experiences.

3.4 Reminiscence therapy in individual planning

Reminiscence therapy is an activation and validation cure using client's remaining long term memory to activate him or her via memories. This therapy aims at memory strengthening and activation of mental activity of the client via reminding moments from the their life. It uses memories and their reminding through various impulses like old photography, items, music and everything that is aligned with the active life of the client. We can see connection with

bibliotherapy and musictherapy already at this stage. It refers to reviving of the former experiences, especially those which are positive and important for the client. These are for instance family events, periods that they enjoyed and like to remember.

Reminiscence therapy is designated to older people. Besides memories, it is very important to use items that create a relaxed environment suitable for a spontaneous reactions of the clients. The therapy itself is able to positively influence the quality of recipient's life because they offer time and space for self-expression.

This therapy is of importance in the areas of the stimulation of the cognitive functions, improvement of the overall state of the client, development of verbal and non-verbal communication, activation of cerebral activities and personality activation, induction of a mental comfort, strengthening of self respect, opportunity for self-acceptance, realization of their own identity, support of dignity and memory practice.

Emotions are released while remembering. Life situations are lived through repeatedly. We can confirm this mostly means remembering of memories from the long term memory via use of impulses and tools. It is executed in a suitable environment choosing the appropriate communication.

Individual and group reminiscence therapies are the two types used in the direct contact with the older client. We use mostly the group therapy in practice. Clients have the opportunity to meet each other, talk together, recapitulate their life and exchange experience from the past. This considerably helps to the improvement of cooperation and strengthening of mutual relationships. While at the meeting, that are repeating, the clients gradually find their mental balance. They express their satisfaction, good mood and self-confidence.

Clients, during the reminiscence therapy, express not only their positive memories but often remember also their said times. This helps them to openly speak about their negative experiences floating on the surface helping the client to relieve. They gain the space for expression of their grieves restraining them from satisfactorily experience their old age.

We recommend to use the techniques of the reminiscence therapy such as the book of life, the map of life, the story of life. As for the tools let me mention a few - music, photography, books, documents about the client, elements of the musictherapy, arttherapy, dramatherapy, dance, older items of daily use, smells, materials, hearing and tasting stimulus.

During the reminiscence therapy we adapt to the changing state of the client, we opt for suitable communication, environment, atmosphere, topic and working materials. We offer a loving attention, interest and touch with the aim of helping -

reducing the expression of the illness. We offer the recipient of the social service a fully-fledged experiencing of the moments spent in the conditions of the center.

CONCLUSION

As it was mentioned in the introduction, an inevitable part of our lives is calming down the emotions and mind, diving into our own inner world, getting to know ourselves better, our possibilities, needs and feelings.

We have offered you a view on exploiting elements of arttherapy, musictherapy and bibliotherapy that are in their simplicity parts of our everyday lives. Sometimes, we do not even realize that we support our negative emotions to wash away, eliminate stress and fatigue with music, by reading a good story or a book or with a random look at a beautiful painting or an imperfect children's drawing. Then, you need no more than to become aware of the moment. Feeling it and searching for alike moments in our demanding but meaningful working time while in contact with receivers of social services or in our free time when in contact with our relatives.

To conclude, when putting together the principles of work with the recipient of the social service, our first interest is on individualisation, an important individual approach to the recipient of the social service. We recommend to create space to expression of feelings on the side of recipient in a confidential and discrete relationship with the key worker. In the interaction employee - client we focus on empathy, acceptance and congruence. Equally important is the non-evaluating stance towards the recipient of the social service and creation of space for self-determination.

We are convinced that also the mentioned aspects of philosophy and the access to the recipient increase the quality of life of the recipient of the social service. When we offer our heart and human approach, we achieve a positive feedback on the path to a maximum independence and self-service of the recipient of social service.

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SOCIAL WORK AT SENIOR HOMES

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Abstract

Aging and old age represents an important and integral stage of human life. Care for the elderly at senior homes, realized through social work and carried out by social workers, constitutes an important part of social policy. The main task of social work with seniors is providing assistance, therefore social workers become social work mediators in the context of social policy. Except for the relatives and family, social workers often become the only contact of a senior with the outside world, thus the work often brings unexpected problems and obstacles. Communication of a social worker with a senior is very important, it is based on respect and trust, and it should be more pleasure and interest, than mere duty. During the communication with an older person it is necessary to see a senior as a person who suffers, with the wish to relieve his difficulties. Particularly they may occur during the senior's adaptation to a new environment of the social service facility, where the seniors are being placed: when their children are afraid of them, when loneliness becomes unbearable, or when they are themselves not able to cope safely with the situation. The adaptation process to the social service facility starts immediately after admitting the senior, when the social worker coordinates the adaptation process with providing sufficient information about the environment he joins.

KEY WORDS: Social policy. Aging. Old Age. Social work with seniors.

INTRODUCTION

The important part of taking care of the elderly people, living in senior homes, belongs to social work. The social work is provided by social workers with completed special education. Their task is not only to help seniors with daily needs (small shopping), and manage the issues with authorities, but their mission is to help the seniors when adapting to new environment, what can be for them very stressful. The next important part of the social worker's task is taking care of leisure time activities for all the senior home residents, adapt the way of spending their free time based on their interests and hobbies, as to start feeling the senior home is becoming their real home. The seniors, are offered to find solutions through social policy, as an inseparable part of social life. It helps them with everyday problems, looks for solutions in the sphere of social work, social services, counselling and health care. The social worker is becoming the

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right mediator of social work for the senior in the context of social policy.

1 SOCIAL POLICY, AGING AND SENESCENCE, SOCIAL WORK

The phenomenon of **social policy** can be encountered in everyday life. Sociologists, political scientists, lawyers, economists but also educators deal with this issue. Strieženec (1996) describes social policy as an interdisciplinary field aimed at observation and implementation of social measures, which are necessary for the balanced development of every modern society. Bočáková (2013) reveals that social policy is associated with a number of common issues, including the aging population. Balogová (2005) says that aging and old age belong to important stages of ontogenetic development and constitute natural part of human life cycle. Age is in the literature mentioned as an important factor determining the periodization phases of human life. Aging is a natural process that captures bio-psycho-social-spiritual aspects of life of each individual. This process is called aging or senescence. Krajčík (2000) discusses necessity to distinguish between old age and aging, where aging is the process, while old age is the period of life. Aging is an inevitable biological process, it is impossible to avoid it, and old age is accepted as a tax for long life.

With the period of aging and senescence are associated following terms: older person, old man, senior, senescent, Geront, person in post-productive age, pensioner (Balogová, 2008). Haškovcová (1990) says that the old person has in certain age problems with self-sufficiency, particularly his dependence increases mainly due to the disease. For this reason, it is not easy to learn and take the role of a dependent person, to ask for help and assistance but also to accept it, and the elderly consider it as undignified and degrading.

Social work as a form of social help to older people leads to exceptional situations caused by social and health factors. It points to the very old people, the most vulnerable elderly people who live alone, to seniors discharged from the hospital care, to older people living in poor social conditions, further to those who suffer from dementia, depression, and whose health status is associated with decreased functional capabilities and self-sufficiency.

Social work with elderly brings many problems and critical situations:

- It is not possible to determine proper boundary between health care and social work. Their intersection should occur in health care facilities, as well as in social services. Worsen health usually brings the need for social services, so it is becoming necessary that both types of services are provided in parallel. From the above mentioned comes out, that the social worker has to work in the team with the health care staff.

- Valid is also the opposite relationship. Social changes represent for seniors an increased burden and risk concerning their health. Particularly difficult are changes brought by cancelled social relations - retirement, change of residence, institutional care, death of a beloved one. The social worker helps the client to adapt to the change or to integrate into new social network, but remember the need to keep the life continuity, keep the links between the past and the present, as he works with the client's life story, and thus supports his health and quality of life.
- Social work with older people must be provided with quality, even if the client has a serious problem with communication, because of the disability (dementia, mental illness). The social worker must have necessary skills to make contact and recognise the needs of people.
- Base of social work with seniors is tackling with relations and trust. It is necessary to create the sense of safety and security, which belongs among the most basic needs of the elderly. Social worker is in many cases the only mediator of the senior's contact with the outside world, through him the senior may express his will, with his support can make decisions and control his own life.
- Social work with the elderly is also work with his family, and help to the family members (Matoušek et al., 2005).

1.1 Social worker

A social worker is an intermediary of social work, his role is to interact in social and cultural life of an inhabitant, increase his satisfaction when he is not any longer able to secure his needs through the own efforts or with the help of the surrounding people. The social worker, who works with the elderly, means with the elderly people who cannot any more participate in normal course of society life. The social worker helps to improve relations and interactions of social environment with the client (Olah et al., 2008). According Bartošovič words (2006), a social worker, who is an important part of the team, takes care of the elderly in a nursing home. A part of his performance in the institution is to:

- Inform the public on the Senior Home and discuss with possible candidates for stay
- Perform terrain social work before joining the facility
- Have intensive communication with seniors before and during their stay as well as during the admittance to the facility
- Support with independent implementation functional and cognitive examination of the client in cooperation with healthcare professionals

- Implement psychological principles to the work with clients
- Provide administrative servicing to the senior
- Keep contact with the family of an elderly person
- Launch the volunteer programme
- Control observance of the seniors' human rights, work with the senior home residents' complaints
- Participate in activation programs for seniors
- Participate at regular medical-social ward rounds of residents in order to address social problems of seniors
- Become the support for the new inhabitants of home through personal devotion

Good communication with the client is the base for the relationship and trust of the social worker and the client. When communicating with the Geront client it is necessary to accept him as a person, who suffers, and we want to easen his troubles (Bartošovič, 2006).

For the daily meetings of a social worker with the senior home residents Rheinwaldová (1999) recommends the following principles of communication:

Be always kind and welcoming, the residents expect peace and joy.

Address each resident as Mr. and Mrs., never grandfather and grandmother, use polite way of communication

Never talk to them from the position of superior.

Do not talk to them like with children.

Help everyone to maintain the sense of self-worth.

Be a good listener. If the resident does not hear, do not shout, but, come closer to him.

Speak slowly, clearly, but briefly.

Allow the residents to do everything for themselves what they can do. Assist them only what reinforces their self-esteem.

Always knock the door before entering the room.

Try to meet their requirements according to your own abilities, if you cannot, explain them why.

Addressing the elderly as grandfather, grandmother, aunt, etc., deprives their integrity, dignity, social value and puts them into a submissive and dependent status. Everyone has the right to be addressed as Mr., Ms. and the name. To *thou* someone adult is not acceptable (Hegyí, L. et al, 2016).

Decrease of functional capabilities of an individual is limited in meeting his everyday needs, while performing the plans to keep control over own lives to such extent that they were used to. Quality of their life is thus enormously

reduced. The aim of social work with seniors is to provide help to elderly person (Kasanová, 2008).

1.2 Process of Senior's Adaptation

Older people usually need longer time to adapt, to change themselves and not to have the feeling that change is like pressure. It is claimed that they are able to adapt only a little, because they are captured by their habits (Kalvach, Z. et al., 2004).

Hrozenká (2008) reported that older people go to social service facilities when their loneliness is becoming unbearable, they are not able to cope safely with things at home and when their children are afraid of them. In most cases, they realize that that it is till the end of their life. To leave their house, means to say goodbye to their past, to everything that formed their previous life. Admission to a nursing home means a serious life event. It is much worse if the person is not ready for it. People who decided by themselves to do so, they adjust for some period of time and they better integrate into the new environment.

The process of adaptation of the senior to the new environment starts after admitting the client when he needs to be devoted with maximum attention. It is the task for the whole team of workers who work with the client. The social worker can be the right person, who coordinates the whole process. It is important that a new client from the very beginning is given his key staff, the person who will be nearby in the facility, who can be addressed with the confidence and who will pay him the maximum attention from the very beginning.

Important is that the new resident receives sufficient information about the environment where he will live, so as to be supported for making friends and new neighbourly contacts, to recall or adopt new environment to get the opportunity and perform the activities that seemed to him meaningful. The process can be very effective with the help of family, friends, neighbours from the former environment, come and bring him information, things, memories and thus interconnect successfully what was in the past with what is now in his life (Matoušek et al., 2005).

Bartko (1990) writes that the older person is more firmly fixed with his stereotypes, and it is harder and slower for him to adapt to new and complicated life situations. Person in older age clings to his previous way of life, attitudes, and only with difficulties adjusts to his new biological nature. Adaptability is the characteristic for the youth. Elderly people are not willing to adopt the habits that are contrary to their previous ones. Customary patterns give him a comfortable way of life, how to cope successfully with common situations. To change them

is very strenuous. It is connected with a lot of fear of the risk with only a little enthusiasm and interest. The motives that pushed them forward in young age, are losing their strength and appeal. Reduced adaptation ability causes that any new, unexpected and strong impulse can distort the internal balance.

Not to cause stereotypical way of life in senior homes, it is necessary to integrate older people into everyday life through various motivational and interest activities (Zimermanová, 2012).

Matoušek at al. (2005) speaks about the individual care plan, which is based on evaluation of health and mental state of the client, with estimation of self-sufficiency and needs assessment. The plan identifies the most important problems of the client and the gradual steps that can help and improve his current state (i.e. rehabilitation, nursing care, nutrition, regulation and contact with family, creating opportunities for activities etc.), or to improve the quality of his life. The plan specifies regular time horizon and tasks for individual team members. The plan allows regular evaluation of client's state and changes of the client's needs. The main actors, when preparing the individual care plan is the client, principally he has the opportunity to realize what can he do and wants to do for himself.

Határ (2011) notes that the senior homes should be located in residential areas, close to the community. Calm area is very important for seniors, because too noisy place cannot allow them to live in quiet and safety environment. The calm environment, where the person lives or accomplishes his last phase of life is very important. For seniors it is important to adapt to the senior home regime, where the senior is provided with accommodation, catering, washing, social rehabilitation, social counselling, nursing and other specialized activities. Here is clearly set order, which must be observed by the facility clients. Every person has its own regime, life style, certain customized behaviour and acting, and it is the same with older people when they come to a senior home and they have to change their routines or adapt to new conditions. *Social, educational and pastoral work is considered to be the care for such a person which is more than substantial, and it can be seen as a part of hospice care* (Határ, 2011, s. 103).

The social worker should coordinate the whole process in which is definitely important family, neighbours and friends who should come and visit the senior, and help him with better adaptation to the new environment. Some seniors cope with the situation themselves, others are not able to cope with it and need certain period of time and the help of a social worker who helps them, directs them to the right path of their adaptation (Határ, 2006).

CONCLUSION

When the social worker cares for the elderly, in addition to the obligations arising out of his employment responsibilities defined in the Act 448/2008 Coll. on Social Services (and amendments), at the forefront should come real, empathetic and kind interest in senior, who are being provided with social care for several reasons, namely: because of reaching the retirement age, because of dependence on another person's assistance, or providing the social services because of the lost housing, because of the health problems, because of other person's abuse or the fact, that old people already cannot even take care of themselves and are not able to take care of their household. The entire team of specialists as well as the social worker, play an important role during providing care to an older person in the process of his adaptation in the social service facility. On the daily basis he offers the senior advice how to overcome life situations in the environment of the senior home, so that enable to live the autumn of their life in the best possible conditions and with dignity. Those who have no chance to spend this period with the family, deserve to spend their retirement with dignity and confidence in the institutional setting.

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SOCIAL FIELDWORK (STREETWORK) AND THE SYSTEM OF SOCIAL SERVICES

Maroš Potočný¹

Abstract

The paper focuses on the target group of homeless people. We point out to the causes of homelessness and psychosocial reintegration barriers of homeless people. In this paper we emphasize the social field work - streetwork. We describe the social services toward the homeless people. Act No. 448/2008 Coll. on Social Services says that everyone has the right to receive assistance in the form of social services. The point is that everyone has the right to fulfill their basic human rights, strengthen its self-sufficiency and preserve human dignity. In the objective of this paper we focus on social counseling and edification activities, also on social assistance, mobile social services.

KEY WORDS: Homelessness. Fieldwork. Social services. Social counseling. Integration into society.

INTRODUCTION

Nowadays, we often deal with the term of poverty. The poverty is a negative phenomenon of 21st century. The concept of poverty includes various forms of default, it has a multidimensional character.

The disease and the lack of education are obstacles for getting a productive employment and, at the same time as a consequence, the development of economic and other abilities needed for getting out of the poverty (Bočáková, 2015).

1 THE HOMELESSNESS

Basically, the homelessness means to have problems with housing, and has its roots in poverty. As the standards of living are declining, individuals and families situated at the bottom of the social stratification fall into a condition of homelessness (Ondrejko, 2009). The author Ondrejko (2009) excepts the structural causes, identified biological determinants that create the real homelessness. These include:

- *defects and pathologies* – psychological disorders, drug addiction, alcoholism, crime are the most common. The individual who suffers from at

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least one of the following pathologies is more prone to become a homeless. S/he is not able to orientate at labour market, to benefit from the social security system, s/he loses the support of family, friends, relatives

- *the lack of family support* – the family of the homeless is often dysfunctional, so homeless people prefer the life on the street. Some individuals did not have anyone who to lean on. Others are a burden and shame for the family.
- *bad luck* – as the first and final impuls
- *voluntarism* – many people perceive the homelessness as the lifestyle of the individual – homeless, who wants to live freely this way, so the homeless are responsible for where they got.

According to Giddens (1999) a homeless is a man with an absence of housing, socially excluded and incorporated into non-residential areas, containers, cellars, demolitions, railway and bus stations, parks, bridges – all of this can be seen as a replacement housing.

Ondrejkovič (2009) states that poverty means the scale of homelessness, of which the accompanying characters are lack of, vulnerability, misery and helplessness.

According to Matoušek et al. (2007) the response to poverty is based on the idea that every individual, or every family needs a certain amount of material resources and services to a decent life.

Matoušek (2005) writes that we recognize different types of homeless people:

- *evident (apparent)* – we know they are homeless, they become clients of social services
- *unapparent (hidden)* – who we do not know about, they are not the clients of social service
- *potential* – they are at risk of poverty, loss of home

When the man ended up on the street for any reasons, it is clear that in some time, some barriers preventing him from integrating into normal life in society will appear. Therefore, it is necessary to know the current status of the client more than his past, which we cannot change.

Marek et al. (2012) state these following causes of homelessness:

- *primary causes* – *Why do people end up on the street?* It is a question of prevention.
- *secondary causes* – *Why do people stay on the street?* It is a question of out-patient services.
- *tertiary causes* – *Why do people return to the street?* It is a question of social work.

According to Marek et al. (2012) psychosocial barriers of reintegration of homeless people are:

- *unemployment* – during the previous regime there was an obligation to work, rejection of work was considered as the dependency. Nowadays, the work has mainly economic value and at the same time expresses also the social status. Many homeless people consider the loss of employment as the primary cause of their miserable condition.
- *dependence on addictive substances* - legal, illegal drugs
- *family breakdown and social isolation* - it brings the economic, psychological and social problems
- *stay in the institution or in prison*
- *social breakdown*
- *psychological problems and illness*
- *setting up the social and health system*—debts, execution of orders, non-payment of health insurance, mistrust in the authorities and other.

Matoušek (2005) divides the causes of homelessness as objective and subjective. Objective causes include:

- *unemployment policy*
- *housing policy*
- *the status of ethnic minorities*
- *the attitude of the majority of the society towards the marginalised groups*
- *social policy of the state and other*

As for the subjective causes, the factors include:

- *the adaptation ability of the individual*
- *the presence / absence of a handicap*
- *the highest education level*

Social services in the Slovak republic are predominantly provided by the ambulatory or residence form. Not each client can find the help of a social worker. Through the terrain social work, a social worker provides social services outside the institution, facility, office. Social services in the street perform the role of:

- *social inclusion*
- *prevention of socially pathological phenomena*
- *moderation of negative consequences and risk in the life situations of clients*
- *moderation of the inequalities*
- *provision of assistance in obtaining social competences*
- *information intermediation*

The aim is to achieve that the client takes responsibility for himself and his loved ones, to increase the autonomy, the ability to solve his own needs. (Matel, Hardy, 2013) Matoušek et al.(2008) states that great importance is attached to the social work by preventive activities for persons living with the risky way of life. It conceives a new type of social worker so called the social assistant, whose main method of work is a streetwork.

According to Bednářová and Pelech (2003) the goal of the streetwork is to provide basic counseling, crisis intervention, distribution of medical materials and create a space for the application of preventive measures and programmes.

We distinguish the following types of streetwork:

- *specific streetwork* – is focused on the problem of socio-pathological behaviour, not on the person
- *nonspecific streetwork* – focuses directly on the person, the social worker helps him to solve his life situation

Due to the lack of clarity and the impossibility of exact identification of the target group, many authors do not agree with this division.

The most common target groups of beneficiaries, streetwork service users according to Nedělníková (2004) are:

- *persons without shelter, without a home*
- *persons providing paid sexual services*
- *persons threatened by addiction*
- *street children*
- *the group of unilaterally, specifically oriented youth (football hoodlums, skinheads, extremist-oriented groups)*
- *youth from the alternative groups (punkrockers, graffiti)*

The purpose is to establish contact, to work with people who cannot or do not want to look for the institutionalised aid, search for the right solutions.

Klenovský (2006) states that based on the way of performance we divide the streetwork into the following categories:

- *walking streetwork* – social workers come in the exact time interval of a pre-arranged route (they carry medical supplies)
- *mobile (movable) streetwork* – social workers are moving to a larger territory, they bring more health material for clients in the adjusted supply or transit. It includes an exchange service and counseling services
- *stationary streetwork* – is residence in the building through low-threshold centres or contact centres CC. This type allows you to provide comprehensive services such as food service, laundry, relaxing room, and other.

People without a home, homeless people suffer from one of the extremest form of social exclusion. The services provided through the terrain social work include:

- treatment and medical supervision - the primary diagnosis, the subsequent distribution of clients to other professionals.
- basic counseling – assistance in ensuring the basic personal documents, health records, housing, permanent residence, and other
- social assistance – accompanying the client to the doctor, on the authorities, a court hearing and the other.
- transport in threat – to the homeless shelters, the emergency room especially in the winter months
- the dispensing of clothes, diets, sleeping bags
- food service – the dispensing of the diet directly in the terrain
- mediation of the information leaflets, information about aid and social services (Mátel, Hardy, 2013)

Schavel et al. (2008) report that due to the fact that our society ignores and threatens the homeless people in an unfriendly way so also they have apathetic and hostile attitude towards the society and also to each other. Some groups of homeless people still seek the social integration, but the other part of the group consists of “voluntary homeless”, who have already resigned a new way of life.

Bočáková et al. (2016) emphasise that it is necessary to direct the trends in social work and in the provision of social services so that the beneficiaries, the users can realize their fundamental human rights in order to preserve their human dignity.

In addition to the various foundations, charities, civic association Proti Průdu plays an important role for this target group. The mission is to help people without a home, integrate them into the society, carry out the prevention of homelessness for socially disadvantaged persons and to impact positively on attitudes of the public towards homeless people. The basic activities include the issue of street magazine *Nota bene*, the creation of media campaigns, organizing professional conferences, lobbying on the territory of the state and local administration in favour of this target group, provision of individual social counselling, terrain social work – streetwork (Mydlíková, 2010)

CONCLUSION

The homelessness is a complex phenomenon with various causes and implications. There is a need for multidisciplinary cooperation if we want to improve the situation of people without homes.

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INSTRUMENTS OF THE EUROPEAN SOCIAL COHESION AND INCLUSION

Anton Rehuš¹

Abstract

The role of each country is to achieve the lowest unemployment. Instrument of the social and economic cohesion is the European Union's cohesion policy. The paper discuss the European Regional Development Fund, the Cohesion Fund and the European Social Fund. We emphasize the promotion of social inclusion, inclusion under the European Social Fund. Principally we address the issues of an employment and unemployment, social inclusion and social exclusion. Also we pay attention to the social work with unemployed people, to the social services for this target group. The paper also highlights the role of social counseling in the areas of unemployment, with the focus on the social work as one of the options to help to unemployed people in their integration into society and the labor market.

KEY WORDS: Cohesion Policy, Exclusion, Unemployment, Social Work, Social Services

INTRODUCTION

The title of presented paper is “Tools of European social cohesion and inclusion.” The European Union has been founded on certain values, which include social cohesion and inclusion. The European Union has been founded on the mutual balancing of differences between countries, more closely between regions.

Presented paper will be discussing the instruments of European social cohesion and inclusion.

One of the key problems of contemporary society is unemployment and the aim of member countries, as well as the European Union is to achieve the lowest unemployment rate. Being employed is one of the important needs of people and it is connected with a sense of usefulness a sense of importance to society. It is also necessary to perceive work as a source of livelihood and a certain material base for each of us.

In the context of this topic the European Union funds will be discussed, in particular European Regional Development Fund, the Cohesion Fund and the European Social Fund.

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1 EU AND ITS SOCIAL POLICY

The European Union is hardly definable entity which is located between the international organization, a union of states and federation. The very concept of union is rather vague; it is therefore not clear what the European Union represents.

The European Union has come a long way and its original objective was to ensure peaceful coexistence in Europe. This goal or objective can be considered successful s there were no military conflict in the European Union.

Nowadays the European Union is facing numerous challenges. There is a question of its future and also the tendency of the supranational union and the intergovernmental paradigm. The first one tends to create a multinational political union where negotiated power is delegated to an authority by governments of member states. The second paradigm stands on the opposite position meaning that the States should maintain their competences.

The European Union Institutions respond to two principles. Supranational principle is represented by the European Commission. Intergovernmental approach is represented by the Council of Ministers in its different formations depending on the subjects under discussion.

The European Union is thus a kind of complicated conglomeration of various interests. In the recent period of time more supranacionalized environment in the European Union and the increasing transfer of powers from nation states towards the European Union can be observed.

The basic principles of the European Union include solidarity and cohesion. Nevertheless, the other aim of European Union is mutual balance between regions.

We also have to stress that the European Union is a part of global environment and must therefore respond to the pressures that come from the outside.

Social policy can be seen as part of a public policy that deals primarily with how the society should help or take care of people who are exposed to consequences of a disadvantaged or market failures or families. (Bočáková, 2015).

European Union social policy is based on the European social model. This model is based on values and rights stated in the Universal Declaration of Human Rights, the European Convention on Human Rights, the European social chat, the Charter of Fundamental Social Rights of European Union, Charter of Fundamental Rights of the EU. The European social model is based on a combination of economic efficiency, social justice and social cohesion. (Dudová, 2011)

Social cohesion can be seen as a company or community that holds together. Lack of social cohesion is defined as the risk of poorer sections of the population being cut off from the rest of society. Social cohesion has two principal models. The Relational model is focused on the quality and nature of interpersonal and social relations, i.e. way different parts of the company work together. Distribution mode looks upon the manner and extent of the distribution of resources and opportunities within the company. (Beblavý, 2009)

The European social model is based on the following principles: (Dudová, 2011)

- *A well-functioning economy*
- *High level of social protection*
- *High level of education and social dialogue*
- *The fundamental values of democracy, freedom and social justice which are common to all member countries*

Implementation of European values in the social sphere is to facilitate the creation of a single European identity. The model also supports the identification of common social problems at European level to develop joint solutions to all EU countries and the creation of a Pan-European consensus on a transnational level. This whole concept, however, is struggling with the EU's efforts to create transnational political concept of placing the emphasis on the sovereignty of its member states. This creates regulations and directives that define a certain concept, but are open-ended, which allows Member States to implement with regard to their national traditions. (Beblavý, 2009)

The objectives of the social protection of EU unemployment include: (Dudová, 2011)

- *To guarantee a minimum means of subsistence for employed persons, subject to availability of active labor market*
- *To promote their integration to the labor market to provide various trainings for unemployed people especially for young people and long-term unemployed people*
- *To provide compensation for job loss to maintain the standard of living in accordance with participation in appropriate social security schemes and subject to active availability for work or admission to vocational training for employment.*

2 EU FUNDS

The European Social Fund is the EU structural fund. Its main objective is to finance the growth of labor force in the EU member states, facilitating the growth of poorer regions and support their settlement. In contrast to other Structural Funds this Fund supports the regional development projects, mainly based on investment subsidies for public or private sectors. These grants may be used for various purposes related to human capital development, the development of educational activities and programs, building of national retraining schemes etc. (Beblavý, 2009)

The European Social Fund provides support to: (Lipková, 2011)

- *Development of active labor market policies to combat unemployment, prevent long-term unemployed in the labor market and to promote the professional integration of young people and the others returning to the labor market*
- *Promotion social inclusion and equal opportunities for all in entering the labor market.*
- *Development of education and training systems as part of lifelong learning policy to improve and maintain employability, mobility and labor market integration.*
- *Improving systems to promote skilled, trained and adaptable workforce, fostering innovation and flexible work organization, to support entrepreneurship and job creation as well as the development of human potential in research, science and technology.*
- *Increasing the participation of women in the labor market, including the development of their career and access to new job opportunities and entrepreneurship as well as desegregation in the labor market.*

The European Social Fund provides funding through two programs in Slovakia: (Beblavý, 2009)

- *Education* - this program is covered by the Ministry of Education and is used mainly to finance education (lifelong learning, various training courses, etc.)
- *Employment and social affairs* - these funds are covered by the Ministry of Labor, Social Affairs and Family and its main aim is to provide help to unemployed ones.

The additional arrangements to national employment policies are funded and supported from the European Social Fund. The Member States determine the most

appropriate way for funds from the European Social Fund for their development plans to contribute and to improve the national employment and human resources policies that are in line with the European Union's employment. Member States decide their priorities. The only limit to this process is the requirement that all supported activities must fall within the policy area. The priorities emphasize on improving systems to promote a skilled, trained and adaptable workforce and on increasing the participation of women in the labor market. Countries themselves decide on the financial contribution to be allocated to intermediary NGOs. Regulation of the Fund contains provisions intended to enable local partners and NGOs participation in programs funded by the European Fund through the provision of small grants scheme. (Lipková, 2011)

The resources from the European Social Fund are properly redistributed to active labor market policies. These financial resources support the cost of voluntary work, education of unemployed people etc. Furthermore, the funds are used to support the employment for particularly disadvantaged unemployed such as long-term unemployed. (Beblavý, 2009)

The European Social Fund is also used to promote social inclusion and equal opportunities, to combat poverty, growth in the skills and adaptability of the workforce, as well as career guidance. Private entities can also utilize these funds. The European Social Fund directs its funds mainly to promoting employment, improving the qualifications of the unemployed, improving the business environment, the provision of education, improve the quality of life, increasing labor mobility, reducing regional disparities and by excluding parts of the Roma ethnic group. (Beblavý, 2009)

The European Regional Development Fund:

This Fund is part of the main funding instruments of European cohesion policy. Its main objective is to assist in reducing disparities in levels of development of European regions and limit the underdevelopment of the most disadvantaged regions. In particular, it deals with regions suffering from severe and permanent natural or demographic handicaps such as northernmost regions with very low population density and island, cross-border and mountainous regions. (European Parliament: We are here for you).

This fund is managed by the Directorate General for Regional Policy. The fund provides the means to co-finance programs aimed at reducing differences in the level of socio-economic development of individual regions and Member States. (Hrivík, 2013)

The investments from the fund are focused on key priority areas. This approach is known as "thematic concentration" (Regional Policy: InfoRegio)

- *Innovation and research*

- *Digital Agenda*
- *Promotion of small and medium-sized enterprises*
- *Low-carbon economy*

The amount of resources from this fund depends on the category of region. (Regional Policy: InfoRegio)

- *In developed regions at least 80% of the fund's resources must focus on at least two of key priorities*
- *In transition regions it is 60% of the fund resources*
- *In less developed regions it is 50%*

Some resources from this fund have to focus directly to the low-carbon economy projects (Regional Policy: InfoRegio)

- *Developed regions: 20%*
- *Transition regions: 15%*
- *Less developed regions: 12%*

The Cohesion Fund:

Cohesion fund is a separate fund with its goals similar to those of the Structural Funds. The purpose of the Cohesion Fund is to provide the least prosperous member states support for their participation in economic and monetary union. Individual investment projects are financed via Cohesion Fund and the funding is up to 80-85% of the total public expenditure. The aim of these projects is to improve the environment and to develop the transport infrastructure in one of the eligible countries (Lipková, 2011)

Shorter average duration of employment for the same employer and the number of turning points, such as people fluctuate between employers throughout their careers is visible in Europe. Nowadays the Slovak citizens are worried about losing their jobs, among other social problems and deficiencies. The threat is serious as the loss of work will affect certain groups end their careers. (Hetteš, 2013)

The aim of the funds is social inclusion in its broadest sense. It is one of the principles on which the Union has been founded. And social inclusion is a trend in European Union these days. It mainly helps the poorer parts of the population. Social inclusion enables their inclusion among other population groups.

Social services are a form of social assistance for people who are in an unfavorable social situation. State though these social services supports the social integration and saturates the social needs of people who are in an unfavorable social situation. (Olah, Igljarová, Bujdová, 2013)

The focus of social services is as follows: (Ministry of Labour, Social Affairs and Family)

- *To preserve, restore or develop the ability of the individual to lead an autonomous life*
- *Prevention of social exclusion*
- *Supporting the inclusion of individuals in society*
- *The prevention, resolution or mitigate adverse social situation of an individual, family or community*
- *Addressing the critical social situation of individuals and families*

The aim of counseling activities for unemployed people is to provide information, assistance and expert advice to to choose an appropriate. It is done by taking into account the specific needs, requirements, skills, health, and particularly the situation in the labor market. These consulting services are provided by the offices of labor, social affairs and family mostly for free. (Schavel, Oláh, 2008)

CONCLUSION

In conclusion we can say that in our paper we examined the issue of the European social cohesion and inclusion. Social cohesion and inclusion in European Union environment is determined by the fundamental principles governing the EU. By this we mean solidarity in its broadest sense. This means that within the European Union are working funds, which shall act in cohesion within the EU. It is possible here include the European Social Fund, the Cohesion Fund and the European Regional Development Fund. In Slovakia, the European Social Fund assistance through two programs, namely, education, employment and social affairs. European Regional Development Fund is intended to help in reducing disparities in levels of development of European regions. The Cohesion Fund has financed investment projects.

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FACILITIES OF SOCIAL SERVICES AS A PART OF PARLIAMENTARY ELECTORAL PROGRAMMES OF POLITICAL PARTIES IN SLOVAK REPUBLIC

Martin Vavruš¹

Abstract

The contribution analyzes the degree and quality of adaptation of the electoral programmes of selected parliamentary political parties in Slovakia in the field of social service facilities. It submits proposals and ways of solutions that these political entities come with. In conclusion the contribution points out the link between the facilities of social services and political representation.

KEY WORDS: Facilities of social services. Citizen. Political parties. Electoral programmes

INTRODUCTION

Mikušová and Gajdošová define social services “as a specialized activity to address the social emergency.”(Mikušová, Gajdošová in Draganová, 2006). According to Benčo, social services are divided on the basis of the nature of their outputs to: care service, the organisation of common meals, transport service, care in social service facilities and social loan. He further states that the facilities of social services provide care in the following institutions and facilities: social care homes, retirement homes, facilities of sheltered housing, children’s homes, homes for lonely parents, stations of care services, foster care facilities, shelters, crisis centers, resocialisation centres, nursing care facilities, houses and pensions for retirees.(Benčo, 2005). Habánik deals with the vertical structure of the provision of social services and states: „ The provision of social services belongs to the equally important field of competence of the municipalities, at the local as well as at the regional level.“(Habánik, 2015).

1 FACILITIES OF SOCIAL SERVICES AS A PART OF THE ELECTORAL PROGRAMMES OF THE GOVERNMENT COALITION OF POLITICAL PARTIES

In the category of government political parties we include these parties: SMER – SD, SNS and Most – Híd. Originally, the government coalition was formed

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of four political subjects, the fourth subject was the party Siet', which was left by the majority of the members of the National Council of the Slovak Republic shortly after the election and subsequently there has been a transformation into the three –party government coalition.

1.1 Facilities of social services in the electoral programme of the party SMER – SD

In the introduction of this sub – chapter it should be noted that the party SMER – SD formed itself the ruling coalition in the years 2012 – 2016, thus also itself created policy of the state and of the government towards the facilities of social services. It is important to note that the most of the political parties responded to the adopted legislative changes made during the previous election period in their programmes and took their own opinions to them. The party SMER – SD conducted their policy through the so- called social packages in the electoral period 2012 – 2016. During its government it implemented two social packages and the third social package represented a substitute for the electoral programme. The facilities of social services were indirectly touched upon by two measures from the first social package, namely: the increase of the Christmas allowance for recipients of old- age and early retirement pensions and the introduction of a minimum pension institute. The government also agreed to the contribution increase for the assistants of the disabled pupils in schools. These measures contributed to the increase of income by recipients of pensions, which increased financial capabilities of such clients of social facilities for the financial coverage of the costs associated with their residence in a particular facility. The second social package again included only clients and potential clients of social institutions , rather than facilities themselves. It came to the reduction of the living costs by a group of the social care users by reducing the VAT on selected primary foods, by lowering the supplement on medicines for children and pensioners and it also came to the increase of financial scope for financial participation of the affected groups on the expenditure related to their stay in the facilities of social services. In the third social package the party SMER – SD announced the increase in the volume of funds intended for caregivers of children with disabilities and pensioners and the doubling of Christmas allowance for low – income group of pensioners. The party SMER –SD did not hold a coherent electoral programme before parliamentary elections.

1.2 The facilities of social services in the electoral programme of the Slovak National Party – Slovenská národná strana (SNS)

Before the parliamentary elections, even extra – parliamentary Slovak National Party appeared in front of the public with electoral programme for a strong state 2016 – 2020 and election slogan: „ Proudly, professionally, politely.“ The party declared in its programme that it will adopt the strategy of the new financing of the social sphere and strengthen the position of the state social insurance company in relation to pension insurance. It announced in its programme that it will establish a new supplementary pension system aimed at long-term care for the immobile and senior citizens. It would like to carry out the National Programme for social sector , which includes amongst other things: „ The development of care services for the seniors in the family - type facilities.“(SNS,2016). By reflecting on the increased demand for medicines among clients of the social service facilities, the SNS committed itself in its programme to ensure that there was at least one drug without supplement in each group of drugs within the context of drug policy, thus making the patient partially reduce the cost of treatment.

1.3 The facilities of social services in the electoral programme of the party Most – Híd

Party Most – Híd named its electoral programme Civil vision. It was about one hundred seventy –four page document. The party states in its programme in the context of the long –term health care the following: „ It is necessary to draw up policies and long – term health care financing system in the scope of nursing care for the chronically ill, handicapped and geriatric patients.“(Most – Híd, 2016).

The party further states that the social services in Slovakia are in decline and that Slovakia lags significantly behind the developed european states in the field of social services. It further draws attention to the growing demand for social services, which creates tension, as the availability of social service facilities is low in Slovakia. It indicates the absence of a truly sustainable system of financing social services as the cause of the current unfavourable situation. The party advocates the adoption of the law on long – term care, which would define the mandatory obligations of health care providers and the ensuing social care.

2 THE FACILITIES OF SOCIAL SERVICES AS A PART OF THE ELECTORAL PROGRAMMES OF THE OPPOSITION PARLIAMENTARY POLITICAL PARTIES

The parties that got into the National Council of the Slovak Republic, but at the same time did not get into government coalition, form the opposition after the parliamentary elections. These parties are: the party SaS, the movement OĽANO – NOVA, the movement „Sme rodina“ – „We are a family“ – Boris Kollár and the political entity Kotleba – „Ludová strana Naše Slovensko“ – „People’s party Our Slovakia.“ Despite their non- participation in the government coalition, these parties may initiate legislative changes, submit their own proposals and they can subject the proposals of the government coalition to a professional criticism through its members on parliamentary level as well.

2.1 The facilities of social services as a part of the electoral programme of the party Freedom and Solidarity – Sloboda a solidarita (SaS)

Bočáková, Kubíčková and Vavruš in the context of social service facilities and the electoral programme of SaS report: „ The measures relating to social services represent for example such services , such as the financial support for the custody of a member of the household as an informal forms of social services, because the party is aware of the enormous pressure on families with disabled members dependent on nursing; the introduction of the financial rules according to the nature and form of social services to cover the cost of providing social services for all.“(Bočáková, Kubíčková, Vavruš, 2016a). SaS in its programme suggests that the funds were tied to the beneficiary of the social services, which would allow customer to choose the social service and its provider freely. It would introduce the financial contribution for clients dependent on the assistance of another person, and subsequently those clients should be being provided with the selected kind of social services from the state budget. The party promotes the establishment of normative according to the type and form of social services to cover the cost of providing social services for all the providers. In the context of protection of the children and social service facilities the party states in its programme the following: „ We will carry on making further steps aimed at the de- institutionalisation of raising children in the orphanages, so that every child under ten years of age will have to be placed into the foster family.“(SaS,2016).

2.2 Facilities of social services in the electoral programme of the movement Ordinary people and Independent personalities – Obyčajní ľudia a nezávislé osobnosti (OĽaNO)

The movement states in its programme that the Social Services Act of 2008 and the annual amendments failed to fulfil the expectations and remove the discrimination of citizens and clients, who benefit from social services of non-public providers, as well as the discrimination of the non – public providers themselves. The movement considers the large number of unsatisfied requests for placement in a facility of social services as one of the most problematic issues in social policy. The movement recommends , inter alia, in its programme that: „ The competences in the provision and procurement of social services should be maintained by the municipality, however with the obligatory duty to contribute to the operation of the social services providers.“(OĽaNO,2016). It also proposes to continue the transformation of institutional services into community services with emphasis on the direct provision of social services and their quality. The same conditions should be established for public as well as for non- public providers of social services. In every district of Slovakia it would establish a coordination center that would provide advice and information on the different types and forms of social services. It would also introduce an optional introduction of a family assistant services for those citizens who need help and assistance in the home , but also are not dependent on the use of care services.

2.3 Facilities of social services in the electoral programme of the movement We are a family – Sme Rodina – Boris Kollár

The movement states in its programme that it perceives sensitively the annual growth of the backlog of applications for placement in facilities of social services that are being managed by higher territorial units and municipalities. The movement presents the following solution on this issue: „It is necessary to extend the capacity and availability of such public service providers' equipment. At the same time it is necessary to consider the support of private residential facilities of social nature, in order to make the stay in them available for a wider group of the population.“ (Sme rodina – Boris Kollár, 2016). Sme rodina proposes the introduction of a new service called the assistant in the household. The legislation that would create the legal framework for this service, would react to the situation of lone elderly people, who are able to take care of themselves, but at the same time they need the assistance of other persons by certain acts and activities. An important feature of this service should be its financial modesty

and availability. The movement would like to offer this service also to other groups of citizens, who already are or could find themselves in a difficult social situation at one day.

2.4 Facilities of social services in the electoral programme of the party Kotleba – People’s party Our Slovakia – Ľudová strana Naše Slovensko (Kotleba - ĽS NS)

The scope of the electoral programme of the political entity Kotleba – People’s party – Our Slovakia was four A4 pages, which does not create the space for deeper analysis of individual policies in the programme of the party. From the foregoing, it is apparent, that the party does not address closer the theme of social services in its programme. Therefore, we will introduce the components of the electoral programme which are in lesser extent associated with the facilities of social services. The party asserts that the retirement age for old- age pension was set at sixty years. Bočáková, Kubičková and Vavruš further refer to: „It wants to restore the free health care under the Constitution of the Slovak Republic.“(Bočáková, Kubičková, Vavruš, 2016b). It proposes the restoration of one state emergency service and that all ambulances would be procured with doctor. Mothers should be restored to the honor and dignity by the party. The second part of the sentence of the party programme is closely related to the orphanages and the adoption of children: „ We will not allow registered partnerships and adoption of children by perverts.“ (Kotleba – ĽS NS, 2016).

CONCLUSION

The nature, quality and quantity of the facilities of social services are significantly influenced by the state through legislation adopted by the members of the National Council of Slovak Republic. Due to the fact that the members of NRSR are elected by citizens in direct elections and represent the values and the programme of the political party which they ran for, it is necessary to analyze deeper the electoral programmes of political parties within the context related to the facilities of social services. The party SMER – SD failed to present a comprehensive programme on the occasion of parliamentary elections – the programme was replaced by the third social package; and the programme of the entity Kotleba – People’s party Our Slovakia was the shortest and briefest of all the other programmes in its extent. Ideology and value profiling of political parties have also the impact on how the issue of social service facilities is perceived by particular political parties and the solutions these parties eventually

come with. Most of the political parties adheres to the need to adopt legislative changes that would reflect on the insufficient capacity of public social service providers, high financing requirements of customer care in private facilities and the ever – increasing demand for social services as a result of the population aging. The political parties identify these three attributes of the current system of the social service facilities as being the main problems and challenges that the current Slovak system of social service facilities has to face.

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MULTISENSORY ENVIRONMENT SNOEZELLEN AS AN INNOVATIVE METHOD IN SOCIAL SERVICES

Anna Suchá¹

Abstract

The paperwork deals with the use of multisensory environment - Snoezelen when working with the recipients of social services, and characterizes the effect of multisensory environment on grade the recipient's quality of life. It refers to an individual approach to the client, to the way of developing his/her personality according to the degree of disability with an opportunity of personal self-fulfilment and social integration. It describes how to create a pleasant and inspiring environment, how to valuably fulfil their lives and promote their self-reliance and creativity through innovative, useful and interesting activities, how to mediate sufficient incentives to them for their self-fulfilment through various forms of activation that lead to their personal development. It concerns the creation of more supportive and stimulating environment, space for their self-expression, creativity, and inventiveness.

KEY WORDS: snoezelen, therapy, multisensory environment

INTRODUCTION

Removing barriers, enabling "normal life" to disabled persons, deinstitutionalization, opening gates of facilities, technological progress, and other changes have contributed to the fact that the society has started be more interested in increasing the quality of care and services and has searched for new ways, methods and approaches to disabled people.

Since its origin, the Snoezelen method has gone through a number of changes (Filatova, Janků, 2010).

Its authors Hulsege and Verheul (In: Schreiberová, 2013) state that there are a number of definitions describing what exactly the Snoezelen method is, but it is not possible to show only through words and partially delivered ideas what exactly is meant by this term. Only personal experience and practices can give us a real picture of this method.

The international association of experts and persons interested in this method (the International Snoezelen Association – ISNA) characterizes Snoezelen as: "*...an environment creating the feeling of well-being, relaxing, calming down,*

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but also activating and arousing interest, managing and classifying incentives, bringing back memories, organizing the complex development, decreasing feelings of fear and anxiety, arousing feelings of certainty and security, supporting socialization and the development of relations, bringing enjoyment“ (Filatova, Janků, 2010).

Snoezelen is performed in a specially equipped room, in a peaceful, relaxed and pleasant atmosphere where senses are stimulated by music, light effects, fine vibrations, pleasant scents, the possibility of positioning and basal stimulation. The main target of Snoezelen is increasing the quality of life and the development of disabled people personality (Ponechalová, 2009).

1 HISTORY OF SNOEZELLEN

The origin of the Snoezelen concept dates back approximately to the 1970s. The development of multisensory environment is typical of this period from which the Snoezelen concept has originated. Already in this period, a number of multisensory rooms were created all over the world.

The Snoezelen concept itself has originated on the basis of theory by two American psychologists Cleland and Clark (1966) who have created the room “Sensory cafeteria” and published research implemented in this room. Primarily, Ad Verheul and Jan Hulsegge proceeded from this research, Dutch experts considered to be the founders of the Snoezelen method who developed, under their own conditions in the institutional care facility, the sensory activity as a spontaneous leisure time activity for people with severer mental and combined disability. Just these issues have been inspiration for building the first special rooms. The term “Snoezelen” is an original neologism of the aforementioned authors who participated, during their civilian service, in activities with mentally disabled citizens of the Centre de Hartenberg’s Heeren Loo in the town of Ede in the middle area of the Netherlands. The terms itself has been created by combining two Dutch words “snuffelen” (smell, examine) and “doezelen” (snooze, have a rest, relax).

Verheul and Hulsegge started by setting up a “sensory tent” including aids for the development of sensory (mainly visual, auditory and olfactory) incentives. After their primary success, educators started creating some other special rooms. After more reconstructions, the “Snoezelen Centre” has been established in the Netherlands with many rooms, today having the area of approximately 350 m². It has been transformed in the spirit of the Snoezelen concept where disabled clients live, work and relax, and it is also an important place for meeting of experts, the place of conferences, research intentions and alternative programmes.

The first understanding of the Snoezelen concept has been based on the assumption that the primary feeling and current experience are strong means for establishing contacts with severely disabled persons (Filatova, Janků, 2010). The term “Snoezelen” is mainly used in Europe, Israel and Japan. The abbreviation MSE (“Multisensory environment”) is mainly used in America and Australia. During years of their work, experts from the old continent and the New World have arrived at the opinion that it would be clever to unite it in one aggregate where experts from the whole world will complete each other, discuss and mainly enrich the Snoezelen-MSE concept (Filatova, 2014).

2 ALTERNATIVES AND IMPORTANCE OF USE OF SNOEZELLEN IN ZSS

Each Snoezelen room is different and it is created based on the user’s requirements and needs. Currently, it is considered by its representatives in the whole world to be a leisure time activity; it has been elaborated as a pedagogic supportive method with the main emphasis on education in the form of experience, and it is also already perceived as a rightful therapeutic method that has its own rules and system (Filatova, Janků, 2010).

Snoezelen can mediate various types of experience (Ponechalová, 2009), such as relaxation (fine stimulation), choice (interactive, stimulating items), movement (discovering, experience and stimulation), senses (smell, tactile, audible, taste, visual incentives), sharing (comfort with one client or group activity).

2.1 Snoezelen as leisure activity

Originally, this sphere concerned in particular persons with severe mental disability. Snoezelen was already considered to be a leisure activity by its founders. The multisensory stimulation method offers possibilities that, thanks to the atmosphere of arranged environment, increase resistance to external impacts, cause positive changes in the neurovegetative system of the organism and harmonize personality in a complex way. Shortcomings in verbalization and specific expressing of feelings and interests of human beings can be replaced at the level of Snoezelen with physical reactions, facial expressions, touching, and body language. With a leisure activity, we offer new experience, physical and psychical calming down, occupying our senses and choice of activities that we like and that are pleasant for us. The most important principle in this environment with the aim to spend leisure time is therefore the freedom of choice, liberty, enough time; the client is not motivated by a guide but the environment, items,

materials, technical equipment and aids leading to activation and stimulation. The client can choose himself from the offer, thus creating an individual pleasant atmosphere (Filatova, Janků, 2010).

2.2 Snoezelen as pedagogic and supportive method

Snoezelen as a pedagogic and supportive method represents supportive measures of the educational and teaching process, in particular the support of cognitive processes (perception, extending of cognition, an increase in concentration), and integration (Ponechalová, 2009).

2.3 Snoezelen as therapy

As we consider Snoezelen to be therapy, then it must contain a systematic and clear target planned in advance. At the same time, it must be based on the client's complex diagnostics and the course of stay in the room must be monitored and continuously evaluated (it leads to a certain monitored conclusion). The feedback and effectiveness ascertainment follow. The specification of the purpose always depends on the client's, guide's/therapist's possibilities and on the environment. The aforementioned therapy should be based on psychotherapy, expert training of therapists is necessary (Filatova, Janků, 2010).

The Snoezelen concept also allows us blending a number of other therapies and therapeutic procedures. We can include here the following (Filatová, Janků, 2010):

- *Music therapy* – the most frequently used therapy in multisensory rooms thanks to the created acoustically appropriate environment;
- *Drama therapy* - Snoezelen is a suitable environment for solving problems with including problems in social relations or with resocialization of *children* and adults; rooms are created for adapting conditions to activation or relaxation, which is suitable for training drama therapeutic techniques;
- *Therapy by means of puppet* – it is used for solving severe and psychiatric problems of children, it also helps in the cognitive development of children with mental and sensory impairment;
- *Bible therapy* – the Snoezelen environment creates excellent conditions for both passive and active bible therapy, i.e. for listening and reading aloud; it is mainly used for elder and senior clients;
- *Aroma therapy* – it is a permanent part of multisensory rooms, it mainly uses essential oils, aroma lamps and incense sticks; it is necessary to monitor the effects of specific scents on the client;

- *Art therapy, ergo therapy* – we have to create conditions for the creation of artefacts and active activities of this kind, therefore it is suitable to create a room specially for these activities;
- *Animo therapy* – using this therapy in Snoezelen has mainly an effect on the emotional component of personality and emotional experiencing; using animals is mainly recommended for children and psychiatric clients.

In Snoezelen, we can also use alternative therapeutic methods that we divide into supportive, facilitating and rehabilitation and massage ones. The supportive methods include the Basal stimulation concept, the Vogel concept of Prenatal rooms, the Psychological motor activity, and others. The facilitating methods and rehabilitation and massage methods include the Bobath method, the Veronica Sherborne method, ball throwing, therapy through hugging, the Vojta method, orofacial stimulation, and others.

The Snoezelen concept is designed for a wide range of children and adults suffering from various development disorders (autism, teaching disorders, etc.), mental disability, physical disability, sensual disability, multi-disability, behaviour disorders (hyperactivity), after-injury brain damage, psychological diseases, old man dementia/Alzheimer dementia, chronic pain, but also for common population, mainly when coping with stress (Ponechalová, 2009).

Today, the Snoezelen room is used by all people without difference. It is not only prevention or increasing the quality of lives of disabled people, but it also participates demonstrably in increasing the quality of health status of human beings. It helps considerably in coping with psychological deprivation, stress situations, not mastered communication ability. Snoezelen intensifies each activity that is performed in this environment (Filatova, 2014).

3 TYPES OF MULTISENSORY ROOMS

There are more types of multisensory rooms. In addition to a white, grey, dark room, there are also an acoustic room, interactive room, water environment, virtual environment, portable environment, inclusive environment, variable room, social environment, and the so-called “hybrid of multisensory room”.

The white room, also called light room, is most approaching with its character to the rooms of the Snoezelen concept. It is mainly used for clients with severer degrees of mental disability and with combined disability. The original purpose of this room is relaxation. Its basic equipment includes white walls, ceiling and floor, water bed, space for projecting pictures, light bubble cylinders, light optical fibres, acoustic system, pillows, blankets, bags. It is considered to be a neutral

room and it can be modified. *The grey room* has the role to reduce incentives by its equipment. It contains grey curtains and carpets; it is soundproof and built for minimizing disturbing impacts and incentives. It is mainly used for children with attention deficit disorders, lack in concentration. In these rooms, we can see the so-called waistcoats with “weight sets” so that children could realize their body. *The dark room* has dark to black walls, ceiling and floor. Its specific purpose is achieving the maximal visual stimulation. Equipment of the room mainly includes colour lamps, foils, optical fibres, ultraviolet light, various lamps.

The acoustic room is soundproof; its ceiling, walls and floor are faced with wood. It provides many possibilities of acoustic stimulation. Its purpose is to minimize disturbances, highlighting individual sounds and acoustic differentiation. The target group includes clients with hearing impairment. *The interactive room* uses various switches with voice, acoustic or movement outputs, enabling children to recognize their surroundings based on immediate effects. In the room, there are also touching boards of various sizes. *The water environment* includes a swimming pool with water that we can complete with showers, waterfalls or colour lights in water, sound, music, etc. It is mainly used for proprioceptive stimulation (both static and dynamic), realizing the own body and for the development of movement. *The virtual environment* is achieved by means of computer. A child puts on glasses and gloves and gets into the virtual world full of three-dimensional effects. This environment has not been proved much yet.

The portable environment represents small, folding and portable equipment with dimensions of maximally 2m². The equipment with various aids is put above a lying client. It is just used for clients who are confined to bed for a long time in a stereotyped environment. *The inclusive environment* is a common environment, such as garden, terrace or playground, that we complete and change using selected aids. The result is creating the space where intact children can spend time together with handicapped children. We complete this environment with various toys and items that must, however, meet safety principles (sharpness of edges, harmlessness of materials, etc.). The matter of course should be no barriers in the environment and colours of aids, as well as acoustic items, in dependence on the type of clients' impairment.

The variable room represents the environment that can be changed and adapted in various ways. As static snoezelen becomes boring for many clients, they know it perfectly, and therefore they stop working; just the variable room is suitable where we can stimulate the client all the time with new incentives and changes in the environment. This room can be adapted, for example, to current events, festivities or projects (holidays, seasons, exhibitions, etc.).

The social environment is mainly used for special opportunities, cooperation and establishing social relations as well as for ventilation of emotions. This room is not designed only for clients and parents of children, but also for personnel, therapists or nurses as the environment for easing, relaxing, the room for meetings, talking, etc. *The hybrid of multisensory room* contains several different environments in one room. The individual environments are mainly combined based on clients' individual needs. They are created in such way so that multisensory rooms are not stereotyped (Filatova, Janků, 2010).

The Snoezelen concept is used in many facilities, including kindergartens, basic schools, social care homes and facilities, protected workshops, rehabilitation facilities, facilities for seniors, hospices, etc. If we want to describe a wide range of professions that can actively participate in the Snoezelen method, they are as follows: special teacher, therapist and psychotherapist, educator, teacher, rehabilitation specialist, physiotherapist, ergo therapist, music therapist, carer, social worker, etc.

The therapist/guide should be mainly characterized by fondness and emotional warmth, empathy, patience and creativity, the ability to motivate, he/she should proceed from knowledge of the client's diagnosis and problems resulting from it, he/she should be in the personal relation with the client, he/she should be socially perceptive, competent and responsible (Filatova, Janků, 2010).

For each multisensory room, the following facts are decisive:

- Each Snoezelen room concentrates a large number of perceptions in a small area. Every time, quantity and quality of sensory incentives should differ.
- The substantial idea of the Snoezelen concept is experience. The room should be enchanting, magic, fascinating, amazing, mysterious for its users, always a little bit different.
- Snoezelen arouses practices based on experience to which a person fully devotes himself by paying the attention to them and perceiving them more than usually. Children and people with special needs learn experience in their development.
- Every stay in the Snoezelen room must always have an individual purpose reacting to the client's needs and requests.
- The main idea of the concept is "nothing is obligatory – everything is voluntary". Everybody has the possibility to choose and decide freely what and in what manner to do and what activity to choose, while maintaining the good feeling from the room. (Filatová, Janků, 2010)

The purpose of stay – therapy or stimulation is always the reverse effect of the positive character formed by positive emotions, comfort, rest, satisfaction of own needs, joy, and mental balance.

4 SNOEZELLEN – MULTISENSORY THERAPEUTIC ROOM IN THE CENTRE OF SOCIAL SERVICES “SLNEČNÝ DOM” (“SUN HOUSE”) IN PREŠOV

In the Centre of Social Services, it has been worked on the implementation of the Snoezelen project – multisensory therapeutic room for more than 12 months. The project has been implemented by the partner of the Centre, i.e. the Civil Association VÁNOK, by means of a number of sponsors and donors. The period of implementation includes collection of information, designing, training, searching for sponsors, ensuring material equipment, installation of components in the therapeutic room, promotion, and putting into operation. From these activities, Snoezelen – of the type of while room – has been created offering fine stimulation and relaxation. A dominant part of the room is a big vibration, heated, water bed that is interconnected with an amplifier and PC. White walls and ceiling absorb pastel colours that are projected on them by means of colour lamps, projectors with wheels and reflectors by means of mirror balls.

The ceiling is covered with starry sky made up of a number of small lights and folds of fine fabrics. The room is made up of a wide range of stimulating effects, including lava lamps. All these visual stimuli are intensified by two big mirrors fixed onto walls. The floor is covered with a carpet having a thick pile. In some components, the client can change sound, colour shade or the creation of bubbles by means of remote control. The water element is represented here by the bubble cylinder and the installed huge water wall. Sound can be replayed by means of the music equipment, PC and a water bed that has four big loudspeakers inbuilt in itself. For the support of fine motor activity and sense of touch, optical fibres are installed in the room and various aids are at disposal, including music instruments. The relaxation bed provides another possibility for relaxing. In the room, there are aids for smell stimulation in the form of aroma diffuser, candles, various essential oils, seasoning and herbs. Pillows, covers, blankets and special curtains are stimulating and comfortable accessories of the therapeutic room.

The room offers to the participant the alternative of choice, thereby giving him/her the possibility to control the environment and discover it in his/her own way. The client can be himself/herself and determines the course of activities. The room is adapted to the client's requirements, needs and health status, while a nice atmosphere is created where the client feels well.

Snoezelen is included in the offer of activities for the client and at the same time it is interconnected with other therapies, i.e. music therapy, ergo therapy, art therapy, drama therapy, bible therapy and canis therapy. We can state that recipients are much interested in this form of therapy. Indisputably, the Snoezelen therapy has a positive impact on the health status of our recipients.

Picture 1a, 1b, 1c, 1d: Snoezelen - multisensory therapeutic room CSS “Slnečný dom” (“Sun House”) Prešov



Source: CSS “Slnečný dom” (“Sun House”)

CONCLUSION

Our society is aimed at increasing the quality of life of disabled persons, therefore it is necessary to examine and offer new methods and techniques so that we support this idea. These changes also refer to preserving human rights, involving handicapped persons in the majority of life of the society, but also their possibilities of selecting activities and spending leisure time. We have arrived at the opinion that Snoezelen contributes to relaxing, supports self-fulfilment, helps decrease aggressive and auto-aggressive behaviour, develops sensory

perception, emotionality, recognition, communication, motor activity, as well as it contributes to better socialization, establishing relations, integration into social structures and free decision-making. Therefore it is not an activity for handicapped persons only, but also for many various groups of people, either with some problem or need, or without it. Objectively demonstrably, this method increased the quality of life of persons using it.

Just a change in the common, mostly stereotyped environment has resulted in a huge positive intervention in their life. And just this should be our objective in the modern society, helping people (not only handicapped persons) find the sense of life, helping discover the world, emphasizing their positive aspects and abilities, and also showing them some other possibilities of content and activities of every day. We try to mediate for our clients what they need in a professional manner that corresponds to the newest scientific knowledge and is intensified by a special environment and depth of experience with a person whom they believe.

Sensory perception influences all our life from birth to the old age. Human experience is based on perception and use of senses. The more our experience is multisensory, the more complex our understanding is. Thanks to multisensory understanding we can develop them further. And on the contrary, we are cut off from ourselves and the external world without multisensory stimulation.

Our world is multisensory, i.e. Snoezelen (Filatova, 2014).

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SOCIAL SERVICES FOR SENIORS WITH ALZHEIMER'S DISEASE AND SPECIALIZED COUSELING

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Abstract

The present paper deals with clients with Alzheimer's disease. Please note that clients of this disease continue to grow. We will focus on social services in the context of social care for this target group. We inform about the care and problems of these clients with Alzheimer's disease at home. We emphasize the importance of different brain exercises, for example memory exercises as music therapy. Describe a specialized institution of Senior House Vajnory and work with these clients. Also, we will describe the importance of special counseling for clients with Alzheimer's disease.

KEYWORDS: Alzheimer's disease, dementia, social work, specialized counselling, prevention.

INTRODUCTION

Human life is constantly rising. This brings a whole new set of facts. In society they are increasingly affected diseases typical of older mature age. They include Alzheimer's disease, the most widespread form of senile dementia in the European countries and the USA. Clients sixty years old affect 5%, but only 20% eighty (Orazio Zanetti et al., 1998). The disease affects three entities: the patient, his relatives and the nursing staff. In the family circle now live today 80-90% of people with dementia.

The patients may live 15 to 20 years with this disease, although the average is around 8 years. Entities taking care of the victim must take account of the difficulties which will increasingly be faced. Just practical social work will focus its attention on this group of citizens. It is natural that in this situation is referred to the competent institutions of health and social care with a plea for comprehensive assistance.

1 CLINICAL SIGNS

Clinical signs of the disease are highly variable. Mostly, however, begins subtly, acorns have chronic - progressive course. Elderly man begins to change

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the temperament ceases to be interested in their work or hobbies. It starts with the often repeated. Sometimes it appears as the first suspicion (Gabriele Tonini et al., 1998).

He begins to blame others of theft of things that cannot be found. The disease can also run accident, hospitalization, surgery. The truth is, that only stress genic event visibility and accelerate the manifestation of an existing disease. Most are affected as early as the second year of the disease symptoms worsen memory and they the need to locate an expert.

Memory impairment is essential and usually the first symptom of the disease, language and judgment being affected later. Memory disorders are generally very easy to lose the ability to remember recent events or facts. They are progressively highlighted and were later associate personality changes and cognitive decline. It is important that at an early stage of the disease was suppressed, but that in this period, especially promoting the development of such activities that allow people with the disease live their old age with dignity, as the age and the condition for them brings many changes. Many times it seems as if this disease, the progressive loss of mental abilities and physical strength, losing by other people and institutions, respect, esteem and becoming a kind of burden. This attitude is not too discriminating and not at all to these clients with fair Alzheimer's disease. One approach to solving this is to improve their lives and the status of the environment in which they live, which is known to them, being their own community.

However, as the increasing number of older people, including those with Alzheimer's disease who are placed in institutional, healthcare facilities and are dependent on the help of others, it is directly necessary to create the position of a clinical social worker who could hold an adequate approach to the issue of care for the client-patient.

2 DIAGNOSIS, PROGNOSIS AND RISKS OF ALZHEIMER'S DISEASE

2.1 Diagnosis

Early diagnosis helps maintain mental activity as long as possible, unfortunately in some cases progresses very quickly. Cause mental disorders doctor know from the summary information on the anamnesis affected. They must therefore be provided also to relatives or close. In addition to medical examination is needed to diagnosis and blood tests, urine, chest X-ray, ECG, CT and MRI of the brain. The diagnosis of Alzheimer's disease can be proposed to the exclusion of other diseases. Neither CT nor MRI of the brain at an early stage does differ from healthy images.

2.2 Prognosis

The prognosis depends on the type, causes, associated symptoms and age. The Alzheimer's disease faster progresses by the young people and where the communication difficulties occur by finding expression, words and understanding speech. Also, the severe forms of disorders, such as anxiety, delirium, wandering, insomnia, have a more rapid progress.

The multi-infarct dementia is the classic dementia worsens in steps. Suddenly, with loss of independence is alternated with phases of a certain stabilization of the total state (Orazio Zanetti, 1998).

Alzheimer's disease occurs in all ethnic groups and social layers. The appearance of this disease increases with age as the most important risk factor for the disease, especially between the ages of 75 and 85 years. The centennial is not a rare disease. It seems that after the age of ninety-threes is decreasing.

2.3 Stage of development of the disease

For every person who suffers from Alzheimer's disease manifests itself in a unique way. In the development of the disease are the following three stages for each other problems are typical. How quickly the disease will progress cannot be accurately determined.

- **Initial stage**

It is a characteristic feeling of mild, easily symptoms may be sick of them scared, depressed or minimize. They are:

- *Inability to remember new things (repeated requests for the same thing, forget where you put down, with loss of money, documents).*
- *Transient disorientation (not remember the current date, year).*
- *Loss of initiative, apathy, depression or anxiety.*
- *Difficulty in expressing smooth, word search.*

In this period it is ill still capable of independent life.

- **Mid-stage**

More often prevent patients from problems already carried out normal daily activities. Start date:

- *More significant memory lapses, forgetting the names of family members.*
- *Need help with washing, dressing, and hygiene problems.*
- *Temporal and spatial disorientation, confuses the present with the past, it does not recognize previously familiar places.*
- *Wandering, roam.*
- *Deterioration of speech.*

- *Changes in behavior, delusions and hallucinations.*

Sick is already largely in need of care environment.

- ***Late-stage stage***

There is a total dependence on help from others.

- *Advanced memory loss.*

- *Severe speech disorder.*

- *Did not recognized the next person, and well-known things and objects.*

- *Significant physical discomfort.*

- *Difficulty in eating, feeding needs.*

- *Leakage of both urine and faeces.*

- *Difficulty in walking, attract bed.*

At this stage, patients are most often taking into social devices because they exhibit other associated diseases that life-threatening and appropriate care is not always possible to arrange at home.

Dementia is a chronic progressive disease of the central nervous system, high potential debilitating, but also with social impact. In advanced stages, it is necessary continuous assistance of another person, as well as inpatient care. In recent years, currently she has dementia syndrome in industrialized countries, including Slovakia, significant health and social phenomenon that affects mainly the elderly and seriously, the more hits their families, professional caretakers and society as a whole (Fertaľová, 2012).

Depending on the start of developing this disease in the clinic, we encounter two forms.

- The form of early onset (under 65 years) - its incidence is less common, but typical for this relatively fast onset and disease progression. It is typical for her memory impairment, Alexia, agraphia, acalculia, apraxia, sensory or amnesic aphasia.
- The form of late onset (65 years) - the beginning and the progression is slow and gradual. Typically are disability memory functions (memory skills) and intellectual impairment (Pribišová, 2000).

3 TREATMENT

To date there is not clear etiopathogenesis of the disease is therefore not possible to cure the disease. The progress is only possible to slow making maintain patient self-sustaining as long as possible and postpone its hospitalization or placement in a social institution. Treatment divided into pharmacological, cognitive and non-cognitive and non-pharmacological treatment (Jiráček, 2008).

A. Pharmacotherapy cognitive functions

The most commonly used are cholinesterase inhibitors, which block the enzyme acetylcholine degraded and improved acetylcholinergic transmission. This treatment is very effective.

B. Pharmacotherapy non-cognitive functions

Because the disease affects behavioral disorders at all stages, it is necessary to use pharmacotherapy to dampen anxiety symptoms of sleep disorders depression and aggression. (Ondriášová 2005).

Complementary nootropic drugs we suggest the use of drugs which act on the metabolism of the brain, the use of Ginkgo biloba extracts, scavenging free radicals, lecithin, vitamins, hormone replacement, statins and non-steroidal antirheumatics. (Jiráček, 2008).

C. The non-pharmacological treatment

Non-pharmacological therapy focuses on specific approaches in elderly care

- *Support patient's family and the administration of the first information*

Includes education and public information, the family obtains links to the organizations where they will receive assistance

- *Improvement of cognitive functions*

It includes exercises to strengthen the mind, such as crosswords, puzzles, memory game, stacking different images, memory games

- *Maintaining the longest possible self-sufficiency*

Caregivers should have enough patience and keep older people in carrying out activities independently and in spite of illness sustain self-sufficiency senior.

- *Removal of problem behavior*

Minimize distracting stimuli to avoid unnecessary break up of seniors that could lead to their aggressive behavior.

- *Improving communication*

Essential part is non-verbal communication, individual attention, manifestation of feelings, tolerance, and kindness. It is appropriate to support those parts that senior retained and is not suitable to learn new things.

- *Improving the quality in terminal stages*

Ensure sufficient patient comfort and do not overload.

- *Support families caring*

Through counseling centers and home nursing agencies.

The non-pharmacological treatment also includes the re-education activities of daily life for seniors and special therapies. We should not forget the companies that are addressing this disease, which not only provide expert advice as well as advice and assistance. The most famous are the right Slovak Alzheimer's Society, day care memoriam.

Parts of non-pharmacological treatments are selected types of therapies that are recommended for Alzheimer's disease:

- *Cast back therapy*

This therapy is suitable for patients who have problems with short-term memory. Performed individually or in groups and aims to enable the client recalling the memories through the motions of telling old stories, describing the images, photos.

- *Pet therapy*

It is a therapy with domestic animals, dogs or cats. They contact little dogs and we are talking about canisotherapy. Physical contact with the animal reduces aggression of clients.

- *Basal stimulation and its methods*

For the client with the disease, where dominates disorientation and agitation with sleep disorders is very suitable hydrotherapy and soothing bath.

- *Validation*

The author of this method is Noemi Fail. Slows the progression of the disease and to every client must be approached individually. It is very important to the seniors with the disease are treated with empathy. The technique helps resolve issues from the past and improve communication. Not suitable for seniors who have mental illness - healthy.

- *Video training interactions*

It is also called Marthe Meo method. The care is recorded on video, along with the whole team has analyzed and targets appropriate care.

- *Music Therapy*

It is the use of music and musical elements (sound, rhythm, melody, harmony) for client Alzheimer's disease could also go on group therapy, which purpose is to develop and facilitate communication, relationships, mobility, expression, stress reduction, increase imagination and concentration and other relevant therapeutic objectives in order to fulfill physical, emotional, mental, social and cognitive needs. The aim is to develop the potential of music therapy to restore or group of individuals so that they can achieve better interpersonal integration

and consequently a better quality of life.

4 PREVENTION

Firstlings of Alzheimer's disease can be divided into primary secondary and tertiary.

4.1 Primary prevention

It should no longer take place throughout life. Particularly to include a healthy lifestyle, postural regimen, minimize smoking, alcohol consumption, low physical activity, lack of fats and omega-3 fatty acids lead to the development of the disease in old age. Head injuries can also trigger the disease later. Also suitable are the intellectual activities that should be carried out every day to slow the decline in cognitive function.

4.2 Secondary prevention

Keddy starts during the first exhibit of memory problems, it is actively detect and diagnose at-risk seniors through a variety of scales and tests with a neurologist. Problem arises if the surroundings - the closest relatives reluctance to admit that in the elderly there is a gradual deterioration of memory and attributed the problem of an aging body. Disease is not treated pharmacologically only but should be administered and non-pharmacological approaches.

4.3 Tertiary prevention

By this time a senior diagnosed with dementia, it is necessary to keep him in the stage of self-sufficiency - handling. Caregiver should not perform normal activities lead him to assist and guide him. Suitable exercises are ADL- to day activities which include dressing, eating, defecation and faeces continence. Senior activation involves maintaining, improving cognitive training motor skills and dexterity. Effective is use of free time to avoid disturbances of behavior such as aggression, depression, anxiety. Proper occupational therapy eliminates behavioral disorders. It is very important in this disease to a customer regularly determined daily regimen that caregivers should follow.

5 SOCIAL PROTECTION

Welfare also belongs to the care that seniors deal with emergency situations. One of the forms of assistance the care services for the elderly, public catering, transport service for the elderly and care facilities for the elderly, including institutions, homes for the elderly, pensions for the elderly, homes social services, which are divided for citizens with physical, sensory or mental disability.

The basic activity of nursing services in the home environment is to help hygiene, diet, purchase and administration of medicines. The service is paid for in whole or in part. Day care center for the elderly is also a form of social care. Senior morning comes, Graduate Program, which with the specialized unit, aimed at the diagnosis of stadium of this disease. And then they are returning home on the afternoon.

5.1 Types of care for seniors

In terms of intensity and client state divided care:

- *Supportive care*

It is provided by family members. This includes assistance, cooperation in running the household, finance, and transport senior. This treatment can essentially no longer require every senior, regardless of its self-sufficiency. In principle, take place as needed.

- *Impersonal care*

It is provided by a variety of care services through the family. It includes not only emotional but also a site materials such as cooking, cleaning, funding housing. This requires a regular routine.

- *Personal Care*

This is the most challenging type of care requiring the continuous presence of a family member. It is a form of continuous care is provided mainly in institutional care in homes for the elderly, where the main activities of nursing care are senior hygiene, meal and medicine, lifting, positioning and comprehensive assistance. There is a very important empathy worker.

5.2 The issue of home care

The family that chooses to provide nursing care in the home environment must be aware of the difficult situation arising from non-self-sufficient seniors. At the back is large adapting to the situation and often presents great emotional strain. The overall coherence of family is reflected in the results of family care.

Such nursing brings changes not only at work but also in their free time. To take care of the family know a non-self-sufficient senior must meet certain criteria:

- *Able to provide* - have the financial, economic, social, housing, physical and mental conditions.
- *Wanting to take care* - be interested in the disease, have the will and support from immediate family.
- *Being able to take care of* - control baseline standard to help, know how to help.

The biggest problems facing older persons in Alzheimer's disease for family members is the inability to get to know your loved ones as partners, children or grandchildren.

5.3 Critical moments of personal care (Jerabek, 2005)

- *Health problems caretakers*

The most commonly affect women caretaker who are exhausted physically from constant physical overloading of manipulation with seniors, after mentally as they are not able to leave and rest, and most often the old law alone can not be changed.

- *Loneliness caretakers*

This is a serious problem. Caregivers do not know where to look for help, who to contact in any deterioration the aggravation of how organizations and contributions there, if necessary.

- *Long-term care without the help of the State*

Families for aid may apply to the voluntary and humanitarian organizations, where they are given assistance and guidance. Help from the state comes in the form of contributions and catering options, as there is no comprehensive concept of home care.

- *Trauma families when leaving senior*

Manifested remorse and psychological problems if the family cannot take care and must move to the senior facility

6 HELP FROM THE STATE

There must be a help from the state in the form of contributions under Law 447/2008 on cash benefits to compensate. Since the majority of caregivers at home is forced to give up work or to change your full-time to half. In the Slovak Republic care allowance can be agree only if the person to be careful, be recognized as severely disabled handicapped. This condition evaluates medical officer.

CONCLUSION

Old age and aging is a natural stage of life and cannot be prevented. The population is aging and more and more seniors are in a situation where they are dependent on the help of others. In such cases they are brought to one of the social service which they provide assistance and care for individuals from a range of professionals.

The paper aimed to recapitulate the severity care the current problems of the post-modern times, however, care for elderly people and therefore it is essential to integrate health and social care. It is in this context is, as we pointed out in the paper, need for clinical social work and clinical social workers care for the elderly, including those with Alzheimer's disease.

Especially in health facilities has irreplaceable clinical social worker who helps the client-patient to adapt to the new environment and provides it as a social as well as health care in view of his health.

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THE IMPORTANCE OF SOCIAL COUSELING FOR CLIENTS WITH DIABETES MELLITUS

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Abstract

In our contribution we will deal with clients who have diabetes mellitus. This disease is among civilization diseases. We attach great importance to the prevention of this disease and the importance of social counseling for clients who have this disease. We analyze the specific needs of diabetics, diet and physical activity. This contribution will consist of several parts, for example characteristic of diabetes, the treatment options and the like. We will place great emphasis on social counseling in order to achieve better quality of life for clients.

KEYWORDS: diabetes mellitus, social work, social counseling, prevention.

INTRODUCTION

Diabetes is now a global problem. Not only health, but also economic, psychological and social. Significantly affects the daily life of diabetic patients, families, groups, communities and of society. It reduces the overall quality of life, and therefore requires an effective solution.

In the European Union (EU) consists of diabetic patients almost 10% of the population, which are around 32 million citizens. Increase in the number of cases of diabetes in the future, however, it is alarming, it is one of the most common, most serious and economically demanding diseases in the world. It is calculated that in 2030 the diabetes patients in the EU, 16% of the population. In Slovakia this figure the disease is around 7%, which is 400 000 inhabitants.

According to statistics, more 200,000 people that have diabetes do not even know. In 2030, it should be affected by the disease about 12%, which are about 660,000 people. Although we are below the EU average, but still treat diabetes considerable economic burden on our economy. It is felt that the treatment of diabetes is worth 16-18% of the total cost to the health service, and with poor compensation of complications, treatment is significantly more expensive, and also the life of a diabetic is reduced by 5-20 years.

This disease does not diabetic complications only itself, but also the burden on family and society. Often there is a social need, to many pathological events, which is an alarming statement.

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Often we see that the diabetic patient - itself does not comply with the treatment regimen, proper diet, the whole effort useless doctor. Within the education of the diabetic must learn how to eat properly without creating acute or chronic complications of diabetes. However, many patients need a social worker – educator, who must work closely with their doctor – diabetologist.

It is very positive cooperation with the Association of diabetics Slovakia Slovak Diabetes Society, which prepared the National Diabetes program with EU recommendations on the prevention, diagnosis, research, and not least education - education of. It involves not only the standardization of criteria and methods for data collection - the establishment of the register, but the process of media coverage of prevention, the information procedure on diseases in primary schools and of course the process of education diabetics.

SOCIAL COUNSELING FOR CLIENTS WITH DIABETES MELLITUS

Already since 2008 we educate educators university educated professionals - social workers, focusing on the education of patients with diabetes.

Expert advice was developed at the beginning of the 20th century and today is a sophisticated system of economic, ethical, legal, preventive, psychological, social and health counseling. It is systematic work with individuals at which actively pursuing their gradual development. At present, social counselling is among the most important expert advice and because its impact extends to the economy, education, prevention, law, psychology, education and health so that each individual solves complex as a person.

The word “guidance” is derived from the word class, which falsely creates the impression that the counselor is a person who gives advice Guides and solutions, has the means to help the client to handle the situation and solve the problem.

Therefore, the role of social counselors to minimize unreasonable client expectations, to offer his active participation in solving the problem, in what way it was social adviser support, inform, educate, create conditions for change, it should be a catalyst for the process of solving the problem, it should help the client to look at various options and alternatives for constructive change.

Social Services define social counselling as a professional activity aimed at helping individuals in unfavorable social situation. Unfavorable social situation is a “threat to the natural person social exclusion or limitation of its ability to be socially integrated and independently solve their problems:

- *Because it does not secure the necessary conditions (to meet basic living needs).*
- *For their life or habits for life.*

- *To severe disability or poor health.*
- *Because she has attained the age required for entitlement to a retirement pension.*
- *Babysitting for the performance of an individual with severe disabilities.*
- *The risk to the conduct of other individuals, and so on.*

Based on the Law no. 599/2003 Coll. on assistance in material need and on amendments to certain laws, social counseling is understood only as a tool to tackle social need, not material need. § 30 of the said Act on assistance in material need not exclude social counseling as a form of assistance in tackling material need. When social need as opposed to citizen's material need the means to address their situation may be, but for various reasons they do not know or cannot use.

The aim of social counseling should be to provide basic information that enables orientation in how to resolve the situation, the claims arising from the rules governing social protection or specific help in solving the social situation and the client, either mitigate its consequences or eliminate the causes and consequences. It is important to motivate the client to action and solve their own situation intervention. Provision social counseling we include the basic methods in solving social problems, because "it is also a key tool in the activities of the social worker, counseling is to work with clients virtually impossible". (Schavel, 2011, p.100).

Social Services training activities to assist individual in unfavorable social situation.

Social counseling is provided at three levels:

1. Basic social counseling
2. Professional social counseling
3. Specialized social counseling

Social counseling first contact - terms of interviews with clients for social diagnosis and the use of effective methods of coping with the crisis and problems. The social worker provides basic information on existing laws, regulations and existing forms of assistance.

Professional social counseling - should be carried out by university-educated professionals specialized in the profession of social counselors in ambulatory or social institutions. It is designed to the client, which has been shown to be insufficient basis for advice to remedy the problems. Expert advice has historically developed on four levels as:

- *Communication individual with individual, family, group, community*
- *Position in the Community.*

- *Feature a view of modern professions.*
- *Professional, special proceedings.*

A qualitatively higher level and is characterized by the following features:

- a) It is a set of activities is thus nature-activity
- b) This activity is designed to support client
- c) The level of support the client by the social worker is individualized according to specific client needs. This activity focuses on solving real existed difficulties and challenges that result from the social reality of the client, and the client also seen as burdensome and unsolvable.

And specialized social counseling – is provided in a situation where problems clients require special knowledge, skills and use of advisory practices within the organization developed a secure and professional advice from the Centers counseling and psychological services. Adviser at the first level by the majority of the role of information and distribution character adviser on the second level focuses on solving real problems for clients with a more short-term nature and counselor at the third level focuses on a particular area of social problems or a particular social circle of clients. It is provided in a situation where problems clients require special knowledge, skills and use of advisory practices within the organization developed a secure and professional advice. Practice shows that citizens are generally low legal awareness.

- *A citizen cannot assess the severity of the problem, does not know what action to take*
- *Reluctance to communicate with the appropriate agencies, authorities, institutions (persistent distrust)*
- *Lack of opportunities to talk with an expert (given the financial situation)*
- *Low faith in the courts and law enforcement*

Due to the large increase in non-communicable diseases of civilization with a long-term course is to the fore increasingly come to provide social counseling for groups of individuals with specific disabilities. It also includes diabetes mellitus. Our company provides professional consulting services, as active collaboration with experts in the field of social education, social work, social psychology and the information clients can properly direct. Our society has broadly defined target group of clients. Our clients can be any person who is interested in the services of social counseling. The activities of our work are developed with an emphasis on clients who have limited application in society, whether for its social, health or cultural situation.

Such citizens are an example. Disabled people, people in material or social need, members of national minorities, foreigners and so on. The aim of our work is not to solve problems instead of their clients, but to lead them to their problems not accept passively, but actively sought to resolve them, or help them cope.

Our efforts are directed to activities to help clients - diabetics:

- *Know your rights and responsibilities; understand the legal and social aspects of problems.*
- *Become familiar with frequently changing legislation and non-transparent*
- *To support clients in their efforts to solve the problem, remove the feeling of discrimination, ignorance, stress, uncertainty, misunderstanding, fear, but also ridicule*
- *Give him instructions on how to do it (eg. An explanation of the conditions of filing the court)*

One of the most important methods of counseling is escorting some diabetics, usually from marginalized groups who require a gradual learning elementary hygiene and self-service activities. It must be implemented in diabetic patients at home until you do not learn the necessary skills and habits. In providing specialized social counseling for diabetics we utilize in addition to basic counseling techniques such as counseling interview with the presentation of problems finding personalized forms of assistance and monitoring. Social diagnosis material analysis, collect and evaluate all the information about diabetes. Specific guidance methods as training assertive behavior, communication, elimination of inappropriate behaviors, conflict resolution, decision making, but also the confrontation of different opinions, practice relaxation techniques, which, at present mainly yoga exercises. Effective and appropriate use brainstorming, brain writing, role plays and practical modeling of specific life situations; community and group counseling, as well as systemic work with families because diabetes significantly interferes with the functioning of the family as a whole.

We often use the interpretation of secret wishes and missed prohibitions at which diabetics respond vice versa. When carried out by specialized social counseling for diabetics it is of great importance and internet and telephone advice and guidance through discussion forums on social networks. For diabetics social counseling is meant for active integration into society, while preventing discrimination and social exclusion due to illness, unfavorable social situation or social disorder. Specialized social counseling for diabetics specific, since diabetes mellitus as civilization communicable disease with long-term course, the risk of acute, chronic and organ-specific complications and at the same time severe disability with many social implications requires

the social worker complex information with close links of diabetology and social work. Therefore, it is oriented not only to adapt to cope with the disease and the overall health problems, but also to the field of emotional and social support and psychological support, guidance in legislation and entitlement to cash benefits for compensation, provision of social services and distribution to other specialists. It follows that if the social worker provides specialized social counseling for diabetes, it is necessary to have comprehensive knowledge of diabetology, education, management, health, law, social work and prevention.

Social work consultant content can be divided into two main areas, namely:

- 1) **Immediate service to customers** - constitutes an imminent consultancy, which is central to the work of the worker. This procedure can be broken down by different aspects such as the nature.: Social Business Advisor - we can distinguish social counseling in response to the field of medical care for a person related to a diabetic patient or adaptation of disabled individuals on the social environment and the physical environment of their own existence, social counseling for who are socially maladjusted. In accordance of objective items to be achieved counseling - social counseling can be divided into: prevention, mental and social stabilization of the social customer, helping to know and evaluate personal and social, assistance in the development of personal and social capital required to overcome bathroom , negative situation, motivation, activation, social counseling in other contexts that help provide social assistance.
- 2) **Creating conditions for own work** - these are the following activities:
 - a) Obtaining and working information necessary for the provision of advisory services such as: the field of legislation, the education and the labor market, network equipment and institutions.
 - b) Influence the professionalism own consultancy work and professional level of their own profession, namely - developing guidance material, creation of information and promotional materials, cooperation, educational and other activities, the necessary administrative activities.

Advice to enter different groups of clients:

- Spontaneous customers - seeking advice from self-interest.
- Clients are sent to counseling their partners, parents or other authorities.
- Clients distributed to programs from various establishments and institutions.

In the initial phase, it is useful if the consultant will present the name because the name makes the presentation more personal relationship, the client will

confirm that the counselor is that man, for he came, or for whom it was sent. An important indication for advisor is monitoring the way in which the client sets.

They are clients who will immediately feel like at home. Other clients during the first visit feel the uncertainty and anxiety. For these clients, the counselor may use the initial technique, which is called the melting of the ice. Advisor does not print right to the client, but the conversation begins with a neutral topic.

Advisory role in the consultation process depends on the counseling approach. Counselor can work directive, to take responsibility for dealing with the case in their hands, prepare each session, to apply the techniques of working with the client. The non-directive approach acts as a catalyst advisor in the process of solving the problem, it helps the client find the hidden potentials and accompanied him in a difficult situation. It's not in the position that he knows what is best for the client, helps the client to clarify the various alternative solutions to the problem, the responsibility for the selection and the chosen path left to the client. Furthermore, core labor advisor is for the most part he is therefore necessary to know well.

Speaking about the government, dominant in touch with clients in solving their problems are mainly social affairs and regional and district offices, where the inclusion of workers are performing the following work activities: social assistance, social - legal protection, state social benefits and financial contributions to compensate, social services.

Within each department provides counseling for workers following classes of persons:

A) Family and children - as part of social care in addressing the educational and economic problems in the family, diabetic patient - child diabetic patient - breadwinner.

B) Severely disabled persons and the elderly - usually because of insufficient income and disability is temporary or long-term dependent on the help of others, diabetic insulin therapy inability to find a job.

C) Citizens who need extra help - counseling is generally aimed at single people, young people who do not qualify dependent child and are not secure its own income, as a new group profile of the group of displaced people, refugees and homeless. Diabetic patient - homeless on insulin therapy, who finds himself on the street.

D) Socially maladjusted citizens - focus is oriented advice to clients who are mainly due to the lack of adequate social habits are not able to adapt to accepted societal norms of behavior.

A company to understand the nature of diabetes mellitus as a severe disability and the resulting economic, social, societal and health problems directly related to active integration into society, it is necessary to search for suitable methods for

the early minimize the consequences of ill health. In diabetic patients we benefit from social counseling right after the diagnosis of diabetes mellitus, in the setting of acute, chronic and organ-specific complications of diabetes, in addressing the acute problems of employment, to solve acute problems in the family, in solving acute problems in school. Social counseling that addresses the specific situation in a specific limited time is limited social counseling. Its reach and scope expires resolving problems and specific adverse social situations or social disorder. In diabetic patients is providing limited social counseling mainly used to solve the application security insulin, diabetic diet, compliance regime measures, first aid for acute hypoglycemia, treatment modification to integrate into schools to work.

CONCLUSION

The population is aging and more and more seniors are in a situation where they are dependent on the help of others. In such cases they are brought to one of the social service which they provide assistance and care for individuals from a range of professionals.

The paper aimed to recapitulate the severity care the current problems of the post-modern times, however, care for diabetics and therefore it is essential to integrate health and social care. It is in this context is, as we pointed out in the paper, need for clinical social work and clinical social workers care for diabetics. Especially in health facilities has irreplaceable clinical social worker who helps the client-patient to adapt to the new environment and provides it as a social as well as health care in view of his health.

For the success of providing social advice for diabetics is flexibility, professionalism, operability social worker. Mastering different techniques in the home, family, school, employment, educational and counseling centers, non-governmental organizations of the third sector, the reconditioning and rehabilitation stays, but also in the field and on the street requires a thorough knowledge of the Diabetes Care Team on legislative options to eliminate the social consequences of diabetes mellitus.

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ETHNIC CONFLICTS

Róbert Frimmel¹

Abstract

The paper is devoted to issues of cultural and ethnic conflicts in achieving the idea of multiculturalism, as individual holders of the diverse cultural ethnicities carry as part of its integration into another company, the negative aspects arising mainly from unbending persistence of its position or from enforcing its own approach without prejudice to the consequences. Mutual understanding and understanding of diverse ideological views requires anchoring positions and raising often compromise on substantive areas. The very feeling of existential threats to different cultural nationality may lead to failure of the cultural understanding of distrust and hostility, and the longer a given threat persists, it enhances and deepens the creation of positive social values more difficult to re-establish contacts, resulting in the emerging war, fanaticism, the existence of threat, that is, those aspects that negatively affect the positive development of multiculturalism. The very cultural and ethnic conflicts are generated regardless of the actuality, because we are witnessing the formation of mostly historical context.

KEY WORDS: conflict, conflict typology, ethnicity, multiculturalism

INTRODUCTION

Ethnic conflicts, respectively conflicts, striving for self-determination, are one of the main sources of violence in the modern world. Since 1980, conflicts between the government and ethnic minorities are aspiring for self-determination and understanding almost half of all armed conflicts in the world (Marshall – Gurr, 2003).

In most cases, moreover, the Government minimally willing to budge on any of the issues relating to their territory, which follow the direction of the long and difficult to deal with conflict. According to statistics, between years 1955 to 2002, it achieved success only 25% of all separatist groups a certain degree of autonomy or independence, and to these concessions was only after a long term of permanent wars. The question is why it is difficult to achieve the peaceful resolution of conflicts. National governments have a variety of options to bring about a peaceful solution within the framework of minority ethnic groups, as they have to give up their territory, for example. Economic or cultural autonomy. Globalization has been steadily decreasing nature of borders and governments are also under this aspect often unwilling to fight a long war for the preservation

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of territorial integrity. Just look to Russia, which resulted in very costly war, as they should propose a compromise Chechens. On the other hand, there are cases in which national states were willing to provide their ethnic minorities certain degree of autonomy. An example is especially Canada, which recognized Quebec as a specific company and Bolivia, and Peru have provided a degree of autonomy of indigenous peoples. It follows that the ethnic conflict can present a relatively flexible category and it is important to address the factors (Walter, 2009).

1 CURRENT THEORIES OF ETHNIC CONFLICT

Research on the theory of ethnic conflict is closely linked to the meaning of ethnicity. Different understanding of ethnicity is the main originator of diversity most current theories. Should be managed by experts to reach a consensus on the question of the origin and meaning of ethnicity, it would be far more effective procedures for the analysis of ethnic conflicts and then solving them.

The question of ethnicity deal with all scientific disciplines such as psychology, anthropology, and sociology, and especially since the second half of the 20th century. The most significant breakthrough work in the area is considered "Etnische Gemeinschaften" in 1911 by Max Weber, but was released after his death as part of the work "Economy and Society" (Weber, 1968). As part of this chapter presents an ethnic group as artificial, and a shared belief in the Community are shaped ethnic group, but this group does generated. The main motive for the formation of the group's lust for power and higher social status (Banton, 2007).

Weber's approach is misunderstood as one of the first signs of instrumentalism in the theory of ethnic conflicts. By this time it had dealt mainly with the concepts of ethnicity and race as the attributes that describe the concepts of equality. Race represented mainly biological properties of the individual (skin color, characteristic facial features, body structure) while ethnicity accounted for mainly social values, cultural practices. Both terms are therefore largely overlap. This perception of ethnicity and race can be described as primordialistic, qualities that we ascribe race and ethnicity are the individual from birth and are fixed (man is born with certain biological and cultural factors with which the die) (Banton, 2007).

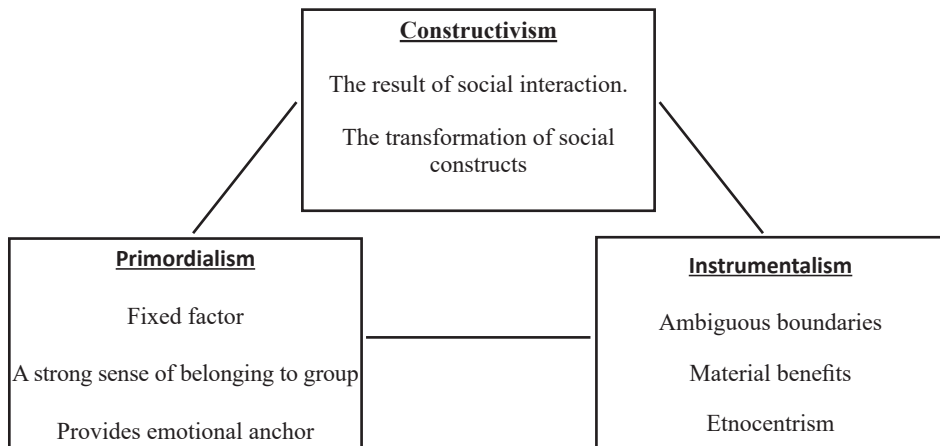
Due to the fact that the term race won in the second half of the 20th century, political and historical reasons unsatisfactory pragmatic feature, the concept of ethnicity has become synonymous with other aspects attributed to specific ethnic groups. Weber's contribution raised discussion on whether the ethnicity

of each individual in society strongly determined by its birth, and whether it is possible to change ethnicity, and thus establish the dichotomy primordialism and instrumentalism. Thus, there are reference values around which polarized the academic debate regarding ethnicity and ethnic conflicts.

If we want to resort to some simplification, it would be these poles characterized as: primordialist sees ethnic groups as firmly that entity, based on a strong feeling of belonging, which are fixed at the time of their members existential emotional anchor and raise mutual loyalty. On the contrary, individuals who are not members excluded from society and tend to a strong ethnocentrism which can lead to levels of violent conflict. On the other side are instrumentalists, under which the ethnic groups understand the entities with vague and variable stops, and their solidarity is based on material gain rather than the sense of cohesion and it would be possible to reduce the analysis. Behavior of these entities is the interests of other members and can be specifically directed to manipulation, while violent conflicts with other groups as a result of strategic considerations, and not from factors arising from general differences (Horowitz, 1999).

Due to the onset of constructivism in sociology and other sciences between primordialists and instrumentalists form a third direction, and the constructivists. According to constructivists they are an ethnic group as a result of interaction between people are inherently constructive only certain cells, which have only the meaning which the company attributed to them. Constructivists were so in opposition to both the theoretical direction.

Chart 1: Characteristics of ethnic groups according to the main directions



Source: Own processing

Determine the nature of ethnicity is essential for the study of ethnic conflicts. Ethnicity is not the only variable that must be taken into account. Unless we're talking about ethnic conflict, almost always it happens in conjunction with any state - the actor is either a direct or at least plays an important role in conflict. For example, ethnic groups fighting within a State power or control over resources, ethnic group wants to gain more autonomy or just wants to separate from a particular State and under. It is clear that a second very important stage in the transformation of ethnic conflicts is the relationship of ethnic group and the state, especially the importance of ethnicity in shaping the nation, respectively state and way of reacting different ethnic groups within the same country.

Thus, if we are able to determine the nature of ethnicity, monitor the role played in shaping the nation and ultimately how they operate within the state of one ethnic group to another, it will be possible to examine the ethnic conflicts of deeper meaning. From this perspective it can be seen on the ethnic conflict rather than a military confrontation, but as a complicated complex external and internal processes.

Ethnic conflicts should be seen in several phases. The first step would be the formation of ethnicity, it continues in that as a result of ethnic feeling and transformation of the company to establish itself in nationalism. The next phase is the creation of national and ethnic tensions. As a result, tension arises conflict transforms into a violent phase and ultimately its impact is mitigated. The last phase is to identify and apply appropriate solutions to the ethnic conflict.

1.1 Formation of ethnicity

Each individual company is perceived in a specific way, I feel their belonging to a different entities. Every man for comparison admits to himself, saying, family, group, nation, and so on. Another importance. These differences will vary not only depending on the spheres of civilization (Muslim is likely to have close links to family and tribe and very loosely related to the state apparatus and strong ties to religion, compared to the costs eg. European, which places importance mainly to itself self and personal freedom), but also depending on the specific position of the historical context. These aspects are time and local variables. The question remains as to what extent this perception is flexible, ie and may change during the life of the individual.

A) Enlightenment concept of ethnicity

Enlightenment view of ethnicity perceived by the human historical context and looks at his duel with nature. One has to understand ethnicity through

science and knowledge that later can then dispense and become liberal. From the perspective of ethnicity is seen as a historic structure, an impediment to the freedom that must be overcome. Ethnic ties (extension of family relationships, broader tribal bonds) subject knotted raise MU certain behaviors, habits and customs. These limitations a person pays that family and tribal mentality replaces the feeling of belonging to a nation state. There is a citizenship that is a symbol of the new arrangement, fitting modern lifestyles, that is a symbol of progress (Barša, 1999).

Nation and nation-state are not in the Enlightenment concept of the last stage of man on road a detachment from the laws of nature. The target factor is a kind of utopian vision of the future in which individual will be associated with humanity as a whole. The individual should demonstrate emerge from its jurisdiction to Tribes, the state, which would be replaced by a universal human coexistence (De Vos, 1995).

Enlightenment conception of ethnicity that looks just like one of flags on the road of progress. Because this vision has already been surpassed, it should be noted that in the historical context was the moral justification for colonial expansion of European powers. Given expansion was an important factor in many European countries, which today faced with ethnic conflicts. European “civilized” nations were considered superior to the “barbaric” Companies colonized territories and was therefore the moral duty to these historic communities learn the vision of modern nations. This view of ethnicity was typical, especially in the second half of the 19th century, but began to lose its relevance after the Second World War, especially with a significant decrease in power of former colonial powers, therefore, they began to create new directions in the understanding of issues of ethnicity (Barth, 1995).

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B) Ethnicity as a manifestation of the emerging modernization

While enlightenment looking to modernize that individual lift-off from his tribal ties developed from 60 years. 20th century social sciences in new directions that ethnic identity understand the different products as one of the emerging globalization. One of the leading experts of this period is a Norwegian political scientist Fredrik Barth. The first primordialistic undermine the concept of ethnic groups as a fixed and the fixed entities. In the book "Ethnic Groups and Boundaries" refers to specific cases, the boundaries of ethnic groups are not closed and ethnic groups are not isolated from one another, but react to each other. Below these borders understands comprehensive definition of ethnic groups, t. j. response to the question "how a particular group specifies to others?" This question diverted classic perception of ethnicity as a fixed given and fixed structures at the time and focused on the professional aspects of the research volatility and movement boundaries of ethnic groups and their relationship (Barth, 1995).

Explanation of the formation of ethnic groups succeeded Charles. W. Deutsch. This was originally a Czech political analyst in its action Yale University published a work entitled "Social Mobilization and Political Development", which seeks to best reflect the process of social mobilization and its impact on changes in the social and political development. This work continues in other publications, which explains how the individual through social mobilization aware of their ethnic identity. And modernization of its resulting social mobility is seen as a factor which regroups the perception of the individual identities of individuals. On social mobilization Deutsch seen as a process, which gives rise to significant changes in the life of an individual. Changing his job title, his residence, role in society, institutional environment, expectations, habits and thus basically and all his personal identity. Discontinuation of old bonds gives rise to the emergence of a new social reality. Progeny narrow and isolated communities agrarian society are confronted with industrialism the city, where they meet with other individuals of the same local environment. This conflict causes the awareness of mutual differences and to define their own identity. This identity is formed and met with different under the influence of an unknown dichotomy of "us and them". An individual is defined by what it is different from the others. A direct consequence of modernization is that the formation of ethnic groups under the influence of their differences (Deutsch, 1961).

Ethnic begins play in a modernized world a new role. In the struggle to limit the amount of economic goods Communalism it has become a means of obtaining a better position and comparative advantage in battle with each other. Membership of a particular ethnic group can mean a better chance to succeed in the fight against anonymous masses of society. This gives rise to the context

of social mobility of society to upgrade the status of ethnic groups in the world, therefore are more successful than those who were able to better and more quickly adapt to change. The fact that some of the upgrading was affected to a lesser extent than the other, resulting in a so-called. Friction surfaces. Ethnicity thus obtained together with economic potential and also the potential conflict. Due to the uneven action of modernization have conflicting economic and power in nature, which is seen in the ethnic context (Melson - Wolpe, 1970).

Deutsch exploring social mobility could be the basis of ethnicity instrumentalistic understood as a means to gain power, which for decades builds on Weber's publication "Etnische Gemeinschaften".

C) Ethnicity as a social element

Ethnic identity, however, cannot be reduced to instrumentalistic basis. The fact that the modernization the company is gaining in importance, it should be given also the efforts to obtain emotional and existential refuge in the era of general mobility, Continuity and anonymity. That individuals are cut off from their traditional concept of rural life and relocation into industrial zones of modern society are therefore suspended traditional ties. This creates a space that is needed to fill a certain way (Barša - Strmiska, 1999).

This is how the modern societies replaced the traditional values, is mixed. Individual longing for emotional existential anchoring can strengthen their belonging to different identities, such as the life. Faith in God, the ideology of the nation-state, or ethnic group. A similar significant redefinition of values occurs by Huntington and now, under pressure from declining position of national leadership states and ideologies of the 20th century (Huntington, 2001).

Despite the fact the individual under the influence of modernization can reshape their identities belonging to different ways and it is very unlikely that he did so at the expense of its collectivist people. The association is one of the basic characteristics of each person. The need pertain to a group is a manifestation of sociability that anything less is not an unlimited inclusive. It gives rise to groups that are defined in relation to other and define the boundaries between members and non-members. This process is not necessary and even family ties of common history. The need to belong to a certain community and different from others is sufficient. As constructivists explain that among the many types of groups that exist in society, the ethnic work so strong and decisive that their members are willing to participate on their behalf in violent conflicts. The main factor for the cohesion of the group are shared characteristics of their members for individual confidence of the other members of the group and sees in them their own features and this raises empathy and a sense of belonging (Horowitz, 1999).

When ethnic groups are shared characteristics of individual members of a very strong and deeply rooted, for example like appearance, the same behavior, gestures, language, dress, customs and so on. The source of that similarity is the basic unit of an ethnic group, and family. The family applied to an individual until his adulthood in crucially influenced his perception of reality and understanding of differences between “us” and “them.” Relationship based on genetic relatedness is so very powerful and has unchanging character. According to constructivists is this regularity explains the cohesion of ethnic groups, they are the same as family-based genetic proximity and shared history and evoke a stronger sense of belonging than other species groups (Horowitz, 1999).

Even though the time of the start of modernization ethnicity play a major role, this does not mean that it would exclude the existence of other active individual identities. Just as in the time before modern man defines also a member of the circle of believers, the local community, clan, family or servitude of a particular master, and in modern times is between several active identities. The individual can then be from the situation in which it is located between the individual identities, and the same principle can be applied to identity group: “Class of movement can become a nationalist, nationalist transformed in religious mobilization, and on the contrary, the religious community is redefined as a class movement “ (Barša - Strmiska, 1999).

In some cases, the fact that the specific identity of the combine and form an integral whole, or indeed the identity of the start mutually exclusive. Different ethnic groups that initially could overlap in a modernized State mutually exclusive and relevant identity ceases to be one of a number of alternatives, but the only possible. Such restrictions can be institutionalized and directly, for example. Rwanda, which was a Tutsi ethnicity Hutu set in the personal documents of what no doubt was one of the causes of ethnic tensions between the two strains. Options to switch between different identities so due to modernization rather than shrunk by their rate of increase.

As mentioned above, so the influence of modernization began ethnicity play a significant role in social life. The reasons can be sought in the rational behavior of the individual who wants to gain power, recognition, economic goods and tries to obtain benefit from their position that his membership of an ethnic group provides. An alternative to rational analysis is the emotional anchor of the individual who is trying to fill the void resulting from the man pulled out from the context of traditional society.

If we look at the longer seen instrumentalistic ethnicity, constructivist or a combination of these directions, it is clear that the formation of appreciably affecting upgrading. Both directions also agree that the conflict potential of

ethnic identities is aggravated due to uneven action of the modern era, and that it is stronger ethnic feeling distant areas from the center of power, which were less affected by modernization.

2 CAUSES AND SOLUTIONS TO ETHNIC CONFLICTS

Theoretical guidelines dealing with the origin and ethnicity have also provided different explanations of ethnic conflicts. According to primordialists ethnicity is a source of conflict in itself, while instrumentalists considered as a cause of conflicts rational behavior of elites who seek to promote their political and economic interests. Constructivist perception of conflict potential in the specific social system (Špičánová, 2011).

To study the causes of ethnic conflicts in the post-bipolar world was divided into two main approaches that emphasize either ethnocultural or socio-economic reasons. The first approach is associated mainly with the term “grievance” or grievances and understands ethnic grievances or ethnic hatred as the main source of conflict themselves. With the outbreak of the conflict mainly associated discrimination against ethnic groups the government or ethnicity, ethnic fragmentation and cultural differences such as language, religious or tribal (Špičánová, 2011).

The second approach builds on socio-economic factors and is characterized by “greed” (greed). It is a model of the uprising (insurgency model). In it they play an important role elites who seek to promote primarily economic interests through a rebellion against the government. Their real interests nevertheless mask for ethnic interests in order to get maximum support. It is obvious that this model can be connected with the instrumental understanding of ethnicity. The authors find that the beginning and the uprising was likely in economically fragile and failing states where the police and the army is not strong enough to prevent riots. Criminal activities in the conflict provides a higher return than a classic work and the rebels as the economies of the lame-have nothing to lose. Authors Fearon and Laitin addition to economic conditions point to the demographic and geographical factors. The risk of rebellion is higher in states with large populations that are difficult to control. Location rebels in hard to reach areas and the existence of the Diaspora (dispersion of members of a particular group) also plays an important role (Fearon - Laitin, 2003).

Authors Hoeffler and Paul Collier, experts of the World Bank, are known for their econometric model, which examines the causes of civil wars. The main cause of conflict regarded the rebel group, which is mainly about economic gains. The likelihood of the outbreak of conflict increases with increasing profits

and enforceability of the uprising and the rebels will stand central government only if it is economically feasible. Rebels aim is not only to win the conflict, but especially to obtain important resources and the illegally traded. The fight for political power is only a tool to gain economic power (Špičanová, 2011).

Some authors reject the dichotomy greed - grievance and explain the outbreak of ethnic conflict with the various influences. Michael Brown (2001) highlights how crucial structural factors, political, economic, social and cultural. Structural factors imply examples of these weak states, internal security problems caused by the emergence of criminal groups and ethnic geography given by mixing different ethnicities. Among the political factors may include the level of democratization, the political culture of the elites, which discriminates against certain ethnic groups or promoting one national ideology. To economic and social factors including the social inequality, war economy and changes in the social structure due to economic development. Cultural factors are, for example, war history of the country, cultural discrimination and demographic change.

It follows that ethnic conflicts are relatively complex phenomenon, in which a difficult to identify the cause. In addition it is seldom mere ethnic injustice, but mostly play a role here as well as political and economic aspects. If the conflict is transformed into full force or etnonational group remains only for peaceful means, it is strongly influenced by the reactions of the central government.

Heraclides (1989) divides the government strategy into two groups: policy "denial" (denial) policies and "adoption" (acceptance). The policy does not recognize the rejection of the separatist group as an exclusive ethnic group or nation, not as a party of the conflict. In contrast, the policies adopted by recognizing the rebels as a legitimate player in the dispute as a different ethnic group, which has the right to influence its position in the state. Politics refusal may involve extreme action such as expulsion from the country, the population transfers, institutional discrimination (segregation) and assimilation with the dominant ethnic group. Such tactics would have hardly made the opposition parties, and therefore it is a unilateral acts of government that must be enforced. To policies adopted by Heraclides classified under voluntary integration process versus assimilation, protection of minorities, democracy consocial unitary polity, federalism or extended autonomy, confederation or territorial secession with the approval of the central government.

Barsa (1999) uses a relatively similar classification methods to control ethnic conflict, that the strategy of the central government, but arrives at somewhat different conclusions. Generally it differentiates between three basic approaches to regulation of conflicts: realistically, distributive and accommodative. A realistic approach emphasizes the method of enforcement and the government

sees as the actor who must use force to intimidation of opponents and strength and hard work to achieve control of the conflict. This approach is not suitable, because not address the essence of the conflict and returning it back into a latent phase, which could again escalate over time. Distributive approach proposes a political compromise by the redistribution of goods and interests of which are leading the fight. The essence of ethnic conflicts are core values and identity that are difficult to split, so as mentioned author Barsa, so the best approach is accommodative. This direction does propose, fair redistribution of the benefits of mutual recognition mainly rival groups, which is to solve the ethnic conflict essential.

Following these general approach distinguishes Barsa also examples of negative and positive solution of the ethnic conflict. It is interesting that secession compared Heraclides among the negative solution. As reported by the Art Nouveau it is usually accompanied by population movements, violence and ignoring the possible arising of new minorities in the breakaway territories. It does not therefore until such democratic variant. The negative solutions further classified violent ethnic assimilation or so-called ethnic cleansing, where is put out or killing. As the last example shows the ethnic dominion, which is controlled by ethnic group, and cannot participate fully in public life. For ethnic dominion it is possible to indicate, for example, during the apartheid era in South Africa. Among the positive conflict resolution, which is defined as the accommodation, and ranks federalism consociation democracy and multicultural integration. Federalism can provide territorial and administrative autonomy, while consociation democracy is suitable for cultural groups in a pluralistic society, it ensures our shared power. Multicultural integration meets the needs of underprivileged ethnic minorities that they cannot move to the level of nationalities and upholds only individual civil rights (Dial, 1999).

In general, the plane solutions to ethnic conflicts authors agree on the need to overcome the so-called security dilemma between ethnic groups. Mutual distrust arises primarily because of the lack of information about the intentions of the actors dispute untrustworthiness adoption of agreements and their different interpretations, which often leads to their subsequent breach (Špičánová, 2011).

Authors Donald Rothchild and David L. Lake given for the restoration of confidence following: demonstration of respect, shared power, elections, regional autonomy and federalism. Mutual Respect party to the conflict can be connected with the above accommodative approach. For shared power is required other than the construction of representative government coalition also share an ethnic minority in the government and military. The electoral system should facilitate the involvement of minority ethnic groups in political decision-making. Regional

autonomy and federalism provides a measure of decentralization, which is needed to strengthen the confidence of minorities (Rothchild - Lake, 1998).

On the other hand there is the view Chiama Kaufmann, who claims that the security dilemma in the ethnic conflict can be eliminated by complete separation of rival ethnic groups. Due to the intense violence of ethnicity becomes a key feature distinguishing the different groups from the corporate community. In this situation, even moderate supporters considered undesirable and cannot be changed understanding between the actors needed to solve the dispute of living together. Therefore, to solve them is only possible separation of different ethnicities (Špičanová, 2011).

It can therefore be concluded that the most appropriate solution to ethnic conflicts considered by most authors federalism, autonomy and other political systems which take into account the interests of minorities and allow them to be relatively effective coexistence. On the issue of secession, the breakaway territories take such compliance has dominion and even the authors come to the opposite view.

CONCLUSION

Individual considers many different types of identities and each of which gives some importance, and the preferences of humans is defined in time. While in traditional societies ethnicity was not very significant identity in connection with the advent of modernization there is a change in its perception. Modernization and its associated social changes have meant that of ethnicity has become a key form, and its importance is heading from a purely cultural level to the political and economic levels. Due to the formation of ethnicity in the company establishing itself nationalism, which is one of the main factors in the development of modern nation states. Another aspect of the then high demands on centralizing the State system, making ongoing homogenization of culture and language within the company, even at the expense of local cultures creates a new national identity.

Crucial for the study of ethnic conflict is the fact that modernization does not occur at spread evenly. The place of his birth was through the expansion of Europe and developed European countries penetrated the rest of the world. Modern States colonized the less developed states and their relationship was many times characterized as exploitative relationship the city periphery. This view can be applied by analogy also at national level: a group that is subject to social and economic changes first, is considered the wearer and the position of this new identity spreading to other areas. Unless is an ethnic group, may we

talk about. Internal colonialism where the center is represented by the dominant ethnic group exploits ethnic minorities.

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SOCIAL SERVICES AND SOCIAL SUPPORT FOR FAMILIES WITH AUTISTIC CHILDREN

Renáta Kocúrová ¹

Abstract

The paper deals with families with an autistic child. We would like to present mainly social services provided to an autistic person and also social services helping the family with an autistic child. Social support is necessary for solving the issue of autism because parents continuously taking care of an autistic child are not able to provide sufficient financial income for the family, neither are they able to obtain material aids. Taking care of an autistic member of a family and household itself is very challenging but, we cannot forget, also commendable. Autism in a family need not cause family crisis, but it is definitely a stressing situation for the whole family. Autism is a developmental disorder and its symptoms become apparent in early childhood, usually before three years of age. It is a condition characterized by specific symptoms in different areas. Autistic children require special type of care. The social services provided help them to get closer to leading meaningful lives.

KEY WORDS: autism, child autism, family, social services, social support

INTRODUCTION

This paper addresses autistic people and their families, who daily face a disease that influences not only life of their autistic child but also running of their whole household. In the paper we will approach the diagnosis of autism more closely, first symptoms of which become apparent during childhood, while childhood autism is often difficult to diagnose because it occurs with other diagnoses, most often with mental retardation. Therefore, the first chapter is focused on explanation of the term childhood autism and influence of this disorder on family, especially parents of an autistic child. The second chapter focuses on social services provided to families of autistic children and necessity of providing these services to family, for which social services serve as an unconditional support to overcome barriers that come with this disorder, and are beneficial for making life of the family easier. For a family with an autistic child every day brings something new, with many different challenges that need to be overcome and if it is possible to help with meeting these challenges through a social service, it is appropriate to provide these services when family demands

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them. In the third chapter we aim at social support from the state, where the Ministry of Labour, Social Affairs and Family of Slovak Republic provides the system of social support and effectively supports family in an adverse social situation.

1 CHILDHOOD AUTISM AND INFLUENCE OF AUTISM ON FAMILY

Autism is a pervasive developmental disorder, a disorder of early brain development that belongs to the most common neurodevelopmental disorders (Ošlejšková, 2010).

Autism as a separate diagnosis emerged at the end of 19th century, when first studies about unusual expressions of behaviour of some people were written. Psychiatrist M. Barr published first information about the origins of autism. First work dealing with pervasive developmental disorders was created by a pedagogue T. Heller from Vienna, who described so-called infantile dementia, presently known as other disintegrative disorder (Thorová, 2006).

Pervasive developmental disorders – group of disorders characterized by a qualitative impairment of social interactions and communication patterns and restricted and stereotypically repeated repertoire of interests and activities. Qualitative abnormalities are a vivid feature of an individual's behaviour in all situations and their extent can vary. (International Classification of Diseases ICD10, 2000)

Parents of autistic children are often marked as withdrawn, intellectually oriented people (Hrdlička, Komárek, 2004).

Most attention is aimed at mothers who have been named “refrigerator mothers”. Authorship of this term is accredited to Bruno Bettelheim (Richman, 2006). Many other individuals concerned with autism issues had a similar opinion. Theory of emotionally flat and rigid parents was an efficient explanation of origins of pervasive developmental disorders but despite of this, in present, the original explanation proved to be ungrounded and has not influenced the opinion of public and professionals permanently.

In past, parents were described as those causing their offspring's condition, while they had to watch their child becoming someone else and they were the ones who carried the burden of this disease. Despite of this they were marked guilty and were considered outcasts and people who were able to inflict something like this on their child. (Thorová, 2006)

The blaming of parents for not managing the upbringing of their child, and therefore the child behaving “outside the conventional norm”, happens also

in the present. Community and even the closest family cannot understand that autism is a disorder that is diagnosed as a pervasive developmental disorder. It is necessary for the family not to surrender but to find consensus that can sustain the family in harmony, so the family would not give up natural traditions and isolate itself from the society, but instead create a balanced and loving home for their autistic child.

Early diagnosis of childhood autism contributes to an efficient adjustment of a parent (Matoušek, 2003). Reaction of family after discovering the diagnosis of childhood autism is similar to that after death of a family member.

Stages after detecting autism of a child:

- stage of shock – expectation disappointment, scepticism, confusion, alternating between despair and hope
- stage of depression – realizing the situation, hopeless perspective, pessimism, questioning present and future, helplessness, doubts, guilt and feelings of failure in parental roles
- stage of activity – ambivalent feelings, e.g. rejection of the impaired, overprotective behaviour, tireless search for help, looking for the guilty,
- realistic stage – functional adaptation to the change of situation, realistic expectations, real activities, (Hrdlička, Komárek, 2004, p. 177).

2.1 Childhood autism

Children with autism are aware of existence of social interactions, some autistic children are actually able to achieve an extraordinary level of these interactions, which means that they are able to express empathy that usually characterizes and accompanies social interactions of children. (Beyer, Gammeltoft, 2006, p. 32)

Childhood autism is a classic variant of autism, where everything that defines autism becomes apparent in this diagnostic category. Childhood autism is a most studied pervasive developmental disorder. Childhood autism is the core of the autistic spectrum disorders. (Thorová, 2006, p. 177)

Autism spectrum - International Classification of Diseases and Related Health Problems is a publication, providing a system for classifying diseases, disorders, health problems and other symptoms, factors or situations, maintained by the World Health Organization (WHO). Except for the existing classic form of autistic disorder there is a continuum of disorders consistent with the classic form but not meeting other criteria of this disorder. When we talk about autism, we talk about the whole range of disorders and symptoms called by a term autism spectrum disorders (ASD). (Thorová, 2006)

Children do not form a bond towards their mother and later they develop a typical pattern of qualitative impairments in social interactions with a weak or none reaction to emotions in their surroundings. They do not adjust to social situation and use the social signals poorly, they do not integrate, their social, emotional and communication behaviour stagnates. (Jelínková, 2000)

Childhood autism disorder is often accompanied by mild or severe mental retardation causing difficulties with correct assessment of diagnosis. (Krejčířová, 2003)

Childhood autism is described as:

- High-functioning
- Moderate-functioning
- Low-functioning

High-functioning autism (HFA) describes an individual without mental retardation (IQ of minimum 70) with an existence of verbal communication. Moderate-functioning autism describes an individual with a mild or moderate mental retardation with signs of impaired communication speech. Low-functioning autism mostly occurs in mentally retarded children, i.e. severe and profound mental retardation, where the individuals do not develop usable speech and they establish little or no contact. (Hrdlička, Komárek, 2004, p. 40)

Similarly to Down syndrome, no case of curing autism exists so far. An autistic child is able to attend school with healthy peers, find an appropriate employment, find a partner and establish a family, but it has not been proven that this is possible thanks to any treatment. Naturally, it is important how family approaches an autistic child, how the child is raised and how the family copes with this disorder, but currently there is no treatment, that would be able to cure autism. However, therapies helping autistic people to integrate into society and overcome obstacles of everyday life and their disease exist. There is possibility of an autistic child to develop very well even if their family approaches the problem inappropriately. A propitious development of a child depends on its cognitive, linguistic and social abilities. There is very little proof of a long-term dramatic improvement of child's state due to some intervention program. (Howlin, 1997)

2 SOCIAL SERVICES PROVIDED TO FAMILIES WITH AUTISTIC CHILDREN

Social services are one of the forms of social support provided for people in an unfavourable social situation. Social services are focused mainly on:

- Resolving, easing and preventing an occurrence of an adverse social

- situation of an individual, family or community,
- Integration and supporting the integration into society,
 - Restoration, maintenance and development of an individual's ability to lead an independent life,
 - Solving crisis social situation of an individual, family and community,
 - Prevention of social exclusion. (Act No. 448/2008 Coll. on social assistance)

Generally beneficial services

One of the generally beneficial services is an implementation of social prevention in a socially disadvantaged group, in our case families with autistic children that aims to prevent disorders of psychological and social development of all family members by various forms. These forms are: correctional, searching, rehabilitative and resocializing form, and also organizing educational and recreational camps. Another generally beneficial service is providing social counselling as a continual extension of social prevention directly in the families with an autistic child. Additional education is also included in generally beneficial services and is intended for schools with autistic children in classes, where these classes usually do not cover additional education. This additional education is performed by additional forms, methods and means, designed specifically to match the needs of each individual. Consulting and education of professionals in the area of autism is an equally important generally beneficial service. (Act No. 448/2008 Coll. on social assistance)

Home care service

Services aimed at supporting families with children in an unfavourable social situation are specially amended. Act No. 448/2008 Coll. on social services defines support of personal care for a child in accordance with the preceding legal regulations by the form of home care service. Home care service is provided by a terrain social service in situations when parent of a child or a foster parent is for various reasons personally or with family help not able to take care of their child.

Act on social services (Act No. 448/2008 Coll.), in an area of harmonization of family and work life, settles a supportive measure, where ambulant and terrain social service is provided for those parents with children who are interested in a professional growth or are conducting activities aimed at starting employment or returning back to work. If a parent attends e.g. a requalification course, family receives social support through social services providing care for a child or a

household (e.g. meals, clothing, personal hygiene, preparation for classes, accompanying the child to school or leisure activities).

Residential service

By a term residential service we understand an institution of a temporary care for a child, while parent or a natural person entrusted with the child care by a court decision cannot ensure proper care for a child for serious reasons. Reasons for not being able to take care of a child can be various, e.g. injury, disease, medical treatment, childbirth or prison sentence.

Early intervention service

From 1.1.2014 early intervention service is included in the above mentioned group of social services. Early intervention service is intended for children with disability to the seventh year of age and for a family of the child, because without necessary support, complex development of the child can be endangered and the family can be socially excluded. Within the frame of early social service, several different professional services are provided, e.g.:

- Specialized counselling,
- Social rehabilitation,
- Prevention activities,
- Sensory and motor stimulations by various methods and techniques.

The aim of the above mentioned professional services corresponds with a holistic approach ensuring an optimal development of a child. Early intervention service is provided by an ambulant or terrain form, often directly in the household of the disabled child.

Transport service

Transport service is provided to people with a severe disability, people who are reliant on an individual transport and people in an unfavourable health condition, which influences their mobility and orientation.

Aids lending

The above mentioned social service is being provided to a rather broad field of individuals. It concerns persons with disadvantageous health state who are

dependent on an aid for a certain temporary period. Other conditions are not given in detail, so the social services providers can choose methods that are mostly suitable for their clients and the providers themselves. (Act No. 448/2008 Coll. on social assistance)

3 SOCIAL SUPPORT FOR FAMILIES OF AUTISTIC CHILDREN

In Slovak republic, system of compensation of social consequences of severe disability is created within a frame of legislation for people with disability. A severely disabled citizen compared to a healthy citizen of the same age, sex and conditions is disadvantaged, i.e. has a social consequence of a severe disability. Compensation is aimed at overcoming and reducing social consequences of health handicap. The functional defect rate is expressed in percentage according to health handicap and serves for purposes of compensation. (Staněk et al., 1999)

Functional defect – is a deficiency of physical, sensory or mental abilities of a citizen that from a view of health state development lasts longer than one year. To classify a citizen as a severely disabled, the functional defect rate must be higher than 50%. (Staněk et al., 1999)

3.1 Family and social support

Ministry of Labour, Social Affairs and Family of Slovak republic provides system of social support as a fair and economically sustainable system. It is Ministry's objective to efficiently fight against poverty, minimize unemployment and limit dependence on social benefits. Section of social and family policy in the frame of its competence performs tasks in area of social exclusion, material need assistance, poverty, family policy, state social support, social and legal protection of children and social guardianship, financial contributions for the compensation of severe disability, social services and activity of medical experts' opinion. (Act No. 448/2008 Coll.)

Family with a child who has been diagnosed with an autism spectrum disorder is entitled to receive help from state, but it is necessary for the legal representative to apply for support. Parents of an autistic child are entitled to:

- Financial contribution for compensation,
- Nursing benefit (for a child after reaching 6 years of age),
- Financial benefit for personal assistance (for a child after reaching 6 years of age),
- Entitlement for prolonging parental leave from 3 to 6 years.

3.2 Financial support entitlement

If a parent wants to receive a financial contribution for compensation, they need to file several requests, e.g. request for a financial contribution (Office of Labour, Social Affairs and Family), property declaration (Office of Labour, Social Affairs and Family), confirmation of income of a citizen with severe disability and persons under consideration for a previous calendar year, medical findings on an official document (attachment to Act No. 447/2008 Coll.). Parent or a legal representative hands in all documents to Office of Labour, Social Affairs and Family and awaits medical, social and complex assessment. According to assessments that the Office issues, although it is possible that the assessments are not issued, the severely disabled, in our case autistic, person receives a card for an individual with severe disability. If an individual is dependant on assistance, they receive an assistance card and if they are dependant on car transport, they receive a parking card.

Financial benefit for personal assistance is provided to a severely disabled individual from the age of 6 to 65 years. The benefit cannot be supplied to a person obtaining nursing or home care services. A personal assistant can be either a family member (grand parent, sibling) or another full-aged person with contractual capacity. Parent cannot be personal assistant until the autistic child reaches majority of age. The same applies to foster carer or individual assigned as a guardian by court decision. The above mentioned rules apply to an individual with severe disability with an entitlement to personal assistance for more than 4 hours a day.

No specific qualification is required for conducting personal assistance. Families usually find their personal assistant by themselves or with help of other family members, parental groups or associations, eventually agencies. Contract between a child's parent (legal representative) and personal assistant is made.

According to Act No.448/2008 an individual with severe disability is entitled to receive also these allowances:

- Recurring financial contributions for compensation: for transport, special diet, hygiene, wear and tear of clothing, ensuring operation of a vehicle, care for a dog with special training,
- Nonrecurring financial contributions for compensation: for purchase, usage training, adjustment or reparation of an aid, purchase of hoist, purchase of personal vehicle, adjustment of personal vehicle, adjustment of flat, house and garage (Act No. 447/2008 Coll.).

CONCLUSION

The aim of this paper was to bring families with autistic child new information about strange behaviour of their children to help to understand this behaviour. We have partially outlined the history of autism, so the parents can realize that, in the past, life of parents of children with autistic diagnosis was not simple, possibly even harder, because they were left out and excluded from the society. Parents of autistic children were considered people unable to raise their children, cold people who do not give enough love and support and neglect their children. Presently, we still encounter such opinions about parents of autistic children, but the society is more constantly informed about autism issues, about appropriate approach to autistic children and their families and also about possibilities of education and improving common household activities for the parents. We have specified social services provided to families with an autistic child that also help with handling problems, because periods of hopelessness occur and the social service can help parents to realize that not everything is lost and that they are able to achieve successful upbringing of their autistic child. Parents' effort for better life and also financial security can be supported by contributions for compensation for social consequences of severe disability that they can apply for and are entitled to receive. They do not have to request social support only for financial reasons, but also reason of a right for private life, personal space and rest. In this case, a request for personal assistance for their autistic child can unburden parents for a few hours and they can spend time with self-reflection, mental hygiene and exploring their limitations. At the conclusion, I would like to wish parents of an autistic child that they would not have to sacrifice themselves completely for their child, worry about future of their child, that they would be able to focus on themselves, and their family and society would treat them without prejudice and understand them.

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SOCIAL SERVICES FOR THE ELDERLY IN THE CONTEXT OF DEINSTITUTIONALISATION AND TRANSFORMATION PROCESS

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Abstract

Based on the analysis of the current state of society, the issue of social services provision is becoming more and more urgent nowadays. Great strides towards rising human longevity in recent years, which results in greater demand for social services due to the increased number of aging population, pose new challenges for policy makers worldwide, especially in the field of social policy. Despite the fact that the demand for social services arises from different population groups, this study is aimed at the elderly who ask for social care services mostly from the age or health reasons. In the context of deinstitutionalisation social services are given a new direction from institutional care to more community and home-based care. The study focuses on a new concept of providing social services in accordance with the process of deinstitutionalisation and transformation respecting the individual requirements of the elderly and maintaining independence, self-respect and quality of life.

KEY WORDS: social service, the elderly, deinstitutionalisation, community care, home-based care

INTRODUCTION

Family, community and the conditions that support social contacts and relationships of elderly people have a major impact on quality of life in the older age. It is important to recognize and highlight the contribution of seniors to life in family, community and society itself, because esteem, respect, solidarity and inter-generational relationships are crucial for social development of the elderly. According to Pope Benedict XVI “civilized society is judged also by how it treats old people and what a place in social life is given to them.” (Benedikt XVI, 2012). In the words of the current Pope Francis “we must awake again the collective sense of gratitude, recognition, hospitality that enable seniors to feel like a living part of their community.” (František, 2015). These are the words of call to offer seniors an active place in society and the possibility of participation in community life. Therefore, it is our duty to provide them such social care and

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access to social services that support seniors to remain in their natural family environment. Thus, social care services for the elderly influence and have a great impact on the quality of life of the large part of population. They have implications not only for the seniors who need the care but also for those who provide informal care to older members of the family.

1 Status of the elderly in society

The issue of social services provision is becoming more and more urgent nowadays. Great strides towards rising human longevity in recent years, induces changes related to the society itself, its economic activity, consumption and services in the social field and within formal and informal care. The issue of an aging generation is associated with both positive and negative perceptions of reality. A positive view of aging is based on the fact that the quality of life is getting better and better as reflected in the increasing life expectancy. Pessimistic perception reflects the awareness of the economic and social problems that may appear in the future, for example aging workforce, increased demand for health care and especially the financial sustainability of the pension system. Other specific needs of the older population include requirements for medical assistance, housing facilities, food, cultural and sports activities and others. "It is estimated that 13% of seniors need assistance at home, 78% systematic home care and about 5% of them need institutional care" (Holmerová et al., 2007, p. 7). The population development will be mainly reflected in increased demand for social services provision with the main focus on availability, quality and sustainability.

Social services are regulated by Act No. 448/2008 Coll. on Social Services and amendments, supplementing Act No. 455/1991 Coll. on Licensed training and amendments, which emphasises satisfying the individual needs of social service recipients, social services based on an individual plan and the preference of natural home environment in the provision of social services. Thus, the legislation of the Slovak Republic follows the reforms introduced in the 70s in Western Europe that led to deinstitutionalisation and community care incorporated in the Act on social services. Principles of the United Nations in relation to older people, which emphasise the principle of independence, participation, care, self-fulfilment and dignity, are also reflected in the field of social services provision focusing on the humanization and person - centred approach.

2 Deinstitutionalisation and transformation within social services provision

According to the dictionary of social work, deinstitutionalization is an influential trend in contemporary social work field encouraging, in all cases where it is possible, non-institutional form of care, easily available to a client, which does not isolate the client from his/her natural environment, i.e. the care provided in the framework of his/her natural community. (Matoušek, 2003) The process of deinstitutionalisation and transformation of social services is closely linked to Act No. 448/2008 Coll. on social services that promotes the philosophy of quality and sets the standard requirements for quality of social services specified in the Annex 2 of the Act.

According to the above-mentioned Act, the social service is seen as professional or other activity that focuses on prevention of unfavourable social situation of man, family or community, its solution or mitigation to maintain, restore or develop the human abilities to lead an independent life and to promote his/her integration in society. Social services focus on ensuring the necessary conditions to meet basic living needs, solving crisis social situation and prevention of social exclusion. That means there is a man, human being, and his/her value on the first place. This human approach emphasises that a person has the right to social services provision, which in scale, form and manner of providing permits to realize fundamental human rights and freedoms, retains his/her dignity, activates him/her to strength, self-sufficiency. It prevents social exclusion and supports his/her integration into society. Social services are given a new direction from institutional care to more community and home-based care which is consistent with the priorities of the process of deinstitutionalisation and transformation.

As indicated in the document Strategy for deinstitutionalisation of the social services system and substitute care in Slovakia, community services represent set of interconnected and coordinated services provided in territorially delimited community, and responding to the needs of community members and do not show signs of institutional culture (Stratégia deinštitucionalizácie systému sociálnych služieb a náhradnej starostlivosti v Slovenskej republike, 2011). The strategy also shows that the transition to community-based care is associated with the process of long-term changes of the system in order to create and ensure conditions for independent and free life of seniors dependent on the help of the society, in the natural social environment of the community, thanks to accessible and coordinated network of public services, while respecting human rights and equal opportunity in regard to the individual needs. The concept of deinstitutionalisation and transformation is in some way connected with the quality standards of social services. In relation to their users it expresses the

principle of respecting the right and choice of service users, individualisation of support, principle focused on the whole as well as the principle of flexibility. (Hrozenská, Dvořáčková, 2013) Compared to community social services that concentrate on the client's integration into the natural community environment of local municipality and allow natural entry from the public environment into the privacy and vice versa (Cangár, Krupa, 2015), the institutional system is characterised mainly by depersonalisation, routine activities, separated from the local community, passivity and lack of social relationships. That's why the analysis of specific aspects concerning the quality of life of elderly individual in a social service facility is a challenge for less problematic aging and deinstitutionalisation is just appropriate way to fulfil it. (Slovák, 2016)

Within the deinstitutionalisation of social services, in addition to community social services, the individual approach and the human oriented planning (person-centred planning) is emphasised. Based on this approach seniors have the opportunity to actively plan their lives and participate in the daily activities of the community despite of age or health restriction. The development of community social services requires political and social support in providing housing, transportation, health services and other public services that are available to seniors living in the community. The policy of social services for seniors needs to be aimed at the support of those who care for the elderly, mainly on the family. Therefore, transformation must be carried out in order to reflect the needs and interests of all stakeholders, particularly service users and their families. The care of the elderly, itself, should be provided by home, field and outpatient social services and humanised social services of residential type (low-capacity residential facilities, support for independent living).

3 Social services provision for seniors

The aim of elderly care is the provision of such social services that helps the one to stay as long as possible at home while maintaining the relative self-sufficiency and self-servicing in the corresponding quality of life.

According to the current legislation social services provision for elderly citizens are provided by self-governing region or municipalities that are required to develop community plans of social services and by private providers (civic associations, non-profit organizations, legal entities and physical persons).

Social services provision for seniors is included in the Act No. 448/2008 Coll. on social services in the context of social services to address the unfavourable social situation due to severe disability, poor health or due to reaching the retirement age.

Within the deinstitutionalisation of social services for seniors it is important to modify existing facilities for the elderly and nursing care facilities to facilities for short-term stay and to rationalise their capacity to meet the needs of the residents of the community. It is therefore essential to strengthen the field and outpatient social services, including informal care.

The Slovak Republic has introduced an obligation for Self-governing region as well as municipalities to develop social service community plans and the concept of social services development. The emphasis is on the humanization of social services, which aims to eliminate the isolation of seniors, provide them with control over their lives and avoid passivity. As expenditures on institutional care are increasing, deinstitutionalisation and support for social services in the natural environment are recommended. These trends are reflected in a document National priorities of social service development for 2015-2020 (Národné priority rozvoja sociálnych služieb na roky 2015-2020, 2014). The priorities include support to remain in the natural environment, the development of field and outpatient social services, improve quality and staff training.

CONCLUSION

To ensure effective and coordinated social services provision for seniors, planning aimed at identifying the needs of the older population is very important. This process is carried out in the form of community plans, providing advice, the sufficient coverage of demand for the services required by the elderly as the reality shows that the right to social services is not ensured for all citizens who need social services. The transition from institutional care to community support should be primarily aimed at improving the quality of life of seniors so their overall life satisfaction including emotional, social and physical aspects of life. It is therefore important to focus on creating conditions for remaining in natural social environment, providing adequate regional network of social service facilities for the elderly, their physical accessibility and variability.

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PRESENT CONDITION OF SOCIAL SERVICES PROVIDED FOR HOMELESS PEOPLE IN THE CITY OF TRNAVA

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Abstract

Homelessness constitutes an extreme form of poverty and social exclusion. People coming from the street need a place to rest, food, warmth, essential medical care, possibility to carry out basic hygiene, and clothing. Quality provision of basic needs is becoming an inevitable condition for the ability of the homeless to work on reintegration into society. In regard of the above mentioned, the paper describes present state of social services provided in city of Trnava that serve to provide necessary conditions for satisfying vital needs of homeless people. We think that institutions and system of social services are extremely important and justified in the case of working with homeless people, because they ensure survival of the clients and through social work allow them to integrate into society, become independent and lead a meaningful life.

KEY WORDS: the homeless, homelessness, social services, social exclusion

INTRODUCTION

Homelessness constitutes an extreme form of poverty and social exclusion. In its narrowest meaning it is understood as a complete absence of residence, in a wider context as an absence of adequate and decent residence. We cannot forget that homelessness is not limited as a physical and static problem of residence, but it is a process. From this aspect, author Mareš defines homelessness as a social phenomenon that is preceded by behaviour leading to loss of background and life securities, and social exclusion. Homelessness is a part of wider process of marginalization which is based on disability of the homeless to participate in a way of life that is common for the vast majority of society. (Mareš, 1999) Homelessness brings social exclusion, from the social, material, cultural and employment point of view. (Mareš In Mátel a kol., 2011)

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1 DEFINITION OF BASIC TERMS

According to EU standards, an individual without a place to live is defined as a person without home, without residence, and as a person living in uncertain life conditions. (Draganová, 2006) In a simplified way, we can say that a term homeless is used to describe people who do not have a place to reside. (Mátel akol., 2011) Hereby, it is necessary to emphasise that a homeless person is someone who is lonely, without relationships, plans and future perspective. They are characterized by low self-esteem, lack of motivation, weakened work and social habits. (Draganová, 2006) In the dictionary of social security from Gajdošíková and Rusíňák a homeless person is defined as:

“a citizen or a group of citizens who, as a consequence of their life style, need individual support, do not have a place of permanent residence or if they do, they do not reside at this place, they are unemployed and sources of their income, living, are most often resources obtained through provision – social security (mainly social care), or other resources gained as a gift, by begging, or also by unlawful conduct.” (Schavel a kol., 2008, p. 116-117)

In case of a person finding themselves without home, system of social services and institutions for homeless is vitally important and justified, because it provides client's survival and allows them to establish contact with people in similar social situation. (Oláh a kol., 2011) Through social work and social services we allow the homeless to integrate themselves into society, become independent and lead a meaningful life. Before we start to address concrete facilities providing support to the mentioned target group, we find it relevant to clarify perception of terms unfavourable and crisis social situation, and social support. By detailed analysis, by the term “unfavourable social situation”, according to Act. No. 448/2008 Coll., we understand that it is a threat to an individual accompanied by social exclusion, or it can be a limitation of their abilities to integrate into society and independently solve their problems. Unfavourable social situation can be caused by the fact that an individual cannot provide essential conditions to fulfil their basic needs (place to live, food, clothing and shoes, and essential personal hygiene), has not adequately adopted life habits, is severely disabled or in an unfavourable health condition, is threatened by behaviour of another natural person or has become a victim of human trafficking. (Oláh, Roháč, 2010)

By a term crisis social situation we understand a threat to life or health of an individual that demands immediate solution by a social service. (Oláh, Roháč, 2010) By a term social support we understand public social activity that leads to care for the individuals, who in certain life phases or situations, cannot solve their problems independently or with assistance of closest community. For social

support, partner assistance, accompaniment and aiding are characteristic. It is its crucial objective not only to find causes of the arisen situation, but also to help client to realize their situation, help them with resolving it, identify the problem, accompany the client, support an lead them to independence, help them with becoming an active element in resolving their problem. On grounds of the above mentioned, we can remark that through social support we are trying to integrate the client into society, improve quality of their life, so the client themselves would not feel excluded from society. (Ondrušová In Oláh, 2011)

2 SOCIAL SERVICES AIMED AT FULFILMENT OF BASIC NEEDS

People coming from the street need a place to rest, food, warmth, essential health care, possibility to carry out personal hygiene, and clothing. Quality fulfilment of basic needs is a necessary condition for the homeless to be able to work on reintegration into society. (Matoušek In Vavrinčíková, 2010)

From the above mentioned we can see that social services aimed at provision of essential conditions to fulfil basic needs are provided to a client who is unable to fulfil their needs by themselves.

As social services aimed at fulfilment of basic needs for the mentioned target group we consider: night shelter, shelter, halfway house, low threshold daily centre, emergency housing centre and supporting services. (Oláh, 2013)

2.1 Night shelter

Night shelter provides place for an overnight stay and social counselling to a client finding themselves in an unfavourable social situation, because they do not have a place of residence or cannot use their former residence. (Act No. 485/2013 §25) In this institution, conditions for personal hygiene, preparation and dispensation of meals and food are created. Night shelters provide mostly one-time accommodation, and conditions of maintaining tidiness, arrival and leaving of clients, are determined by the founder of the institution. Low threshold night shelters are designed as a place without barriers. Hereby, we find it important to explain that low threshold approach means a high rate of tolerance working with the poorest. In low threshold facilities, rules and regulations are limited to minimum to ensure accessibility for everyone in need. Therefore, low threshold approach is not about risk examination, but active involvement of clients in various activities supporting them and minimizing possible damage they could cause themselves or others. (Anthony In Oláh, 2001) Because low threshold facilities are places without barriers, the client can be accepted without personal

documents, or under influence of alcohol or drugs. Terrain social workers have an approach of partnership based on anonymity and trust towards their clients. Threshold approach enables respect for every client as a human being, their dignity and right to a dignified life. (Oláh, 2011)

2.2 Low threshold daytime centre and supporting services

People who have ended up homeless can use also low threshold daytime centre, where they are provided with social services during the day, because they do not have conditions to fulfil their basic needs, or are addicted to substances, or are staying in spatially segregated locality with presence of concentrated and generationally reproduced poverty. (Act No. 448/2008)

Through social workers, low threshold daytime centre provides social counselling, support with exercising their rights and legally protected interests, necessary clothing and shoes to their clients. Conditions for preparation of meals, personal hygiene and leisure activities are created in this facility. (Vavrinčíková, 2010) Homeless people can concurrently use also supporting services, e.g.: integration centre, personal hygiene facility, canteen and laundry. In an integration centre a social worker provides social counselling and social rehabilitation of the clients and also creates conditions for work therapy and leisure activities. In a personal hygiene facility conditions for conducting personal hygiene are created for the clients, in canteen they are offered food and in laundry the homeless are able to wash and iron their clothes. (Vavrinčíková, 2010)

2.3 Shelter

Shelter provides clients with accommodation for a certain period of time and through social workers provides social counselling, support with exercising their rights and legally protected interests, work therapy and necessary clothing and footwear. Shelter creates conditions for meals preparation and distribution of groceries, conducting necessary personal hygiene, washing clothes, ironing and maintenance of clothes, and leisure activities. (Vavrinčíková, 2010) Social worker in this facility provides their clients with social counselling on a level of basic social counselling which is aimed at assessment of the nature of individual's problem and providing basic information about possibilities of solution of this problem. By means of specialized social counselling, social worker in a shelter focuses on causes of origins, character and extent of social problems and subsequently provides clients with specific professional assistance. (Act. No. 448/2008) Through detailed analysis of Act No.448/2008 Coll., §20 we

determine that the duty of a social worker in given facility is also assistance with settling official matters, helping with obtaining personal documents, filling out official forms, with written official communication etc. (Act No.448/2008, §20)

Social worker uses the work therapy in a shelter for client's acquirement of work habits and skills through performing work activities aimed at restoration, maintenance or development of physical, mental and work abilities and their integration into society. (Act No. 448/2008, §23) The actual social support, provided by social worker to clients of a shelter, could be divided into following areas:

- Sufficient and convincing motivation of clients to independent and responsible solving of their problems,
- Better inclusion of clients in society – employment possibilities,
- Appropriate use of financial resources (by this we mean social benefits, disability pensions, wages),
- Prevention of social-pathologic phenomena,
- Adopting adequate social habits, including hygiene,
- Friendly interpersonal relationships, mutual respect and support,
- Deepening of the interest to integrate into society, being able to orientate themselves independently on labour market and to find adequate employment possibilities and ways of solving housing issues,
- Adequate manner of communication in different situations (settling official manners). (Tvrdoň, 2004)

2.4 Halfway house

Through detailed analysis of Act No.448/2008 Coll., we find out that in halfway house, social services to a client are provided for a certain time, because it does not ensure provision of essential conditions to fulfil basic needs and does not provide accommodation after termination of social care in another facility, after termination of care in a facility of social-legal protection of children and social guardianship, or after being released from prison. Similarly to a shelter, clients of halfway house are provided with social counselling, support with exercising their rights and legally protected interests and work therapy. Facility creates conditions for meal preparation, distribution of food and groceries, personal hygiene, washing clothes, ironing and maintenance of clothes, and leisure activities. (Act No. 448/2008, §27)

Social worker's objective in a halfway house is to influence clients mostly in following areas:

- "Helping client with creating system of values in fulfilling their basic

- needs, identifying priorities and importance of order in their fulfilment,
- Cultivating will power that is necessary for performing employment and personal duties responsibly,
 - Adjusting client's life-style to their financial resources,
 - Handling the fact that looking for employment as a priority does not improve the standard of life of a client as much as their active approach and willingness to solve their existential problems,
 - Acquaintance of the client with institutions, natural and legal persons who can provide assistance,
 - Remarking social necessity and value of work in all professions,
 - Pointing out the importance of an adequate mutual communication, healthy social relationships among community members and at place of work." (Kasanová In Brajerová, 2011)

2.5 Emergency housing centre

Main goal of an emergency housing centre is to help families who have found themselves in a crisis life situation. In an emergency housing centre, social support to a single parent, or young single parents with children who have been abused, neglected and without accommodation or possibility to use their former place of residence for serious reasons, is provided. This facility provides their clients with temporary accommodation, social counselling, and support with exercising their rights and legally protected interests. Conditions for meal preparation, distribution of food and groceries, personal hygiene, washing clothes, ironing and maintenance of clothes, and leisure activities are created in the facility. (Act No. 448/2008)

Social counselling and support with exercising their rights and legally protected interests is provided by social workers mainly by a form of basic and specialized social counselling, or a group form aiming to assist with development of social and work abilities and skills focusing on labour market, preparation of documents of the young client needed for job interviews, communication skills, networking etc. Social workers in this facility assist their clients also with crisis situations management and other related problems extending to areas of social, partnership, or family relationships. Social worker's effort also consists in assessing areas where the family functions well, finding its strengths, and areas requiring support. To solve a crisis life situation, the social worker uses these methods of social work: conversation, observation, social counselling – ventilation, encouragement, reflection, training of social skills, relaxation techniques, role-playing. All these methods contribute to the ability of social

worker to become familiar with client's past that helps understanding their situation which led to being placed in the mentioned facility. (Skarupová, 2013)

3 SOCIAL SERVICES FOR HOMELESS PEOPLE IN THE CITY OF TRNAVA

Habánik (2015) states that majority of organizations currently helping homeless people is connected to activities of some church or religious community. He also mentions existence of other non-governmental organizations within the third sector that focus on support of homeless people in long-term horizon and provide the homeless with social counseling, accommodation, food and necessary clothing. In the city of Trnava, services of crisis intervention for the homeless are available – night shelter, low threshold daytime centre, services with supporting character (canteen meals) and also most recent social service for people without home – streetwork.

Night shelter in Trnava provides social services in a night shelter on Coburgova street 26 for citizens in an unfavourable social situation according to §25 of Act on social services. The night shelter is open from 19:00 to 7:00 in a summer regime and from 17:00 to 9:00 in winter regime. It is divided into sections for men and women; entry is possible with an evidence card obtained at City Office – social department. Client must be a citizen of the city of Trnava to be eligible for night shelter services.

In a low threshold daytime centre services to people in several different types of crisis are provided. Addicted people, people released from a prison, people who have lost their families, background, relationships, homes, jobs, without personal documents, financial resources, in debt and without perspective of finding a job because of absence of the mentioned needs, all come to this facility. Anonymity is respected in the centre, while space to fulfil basic needs and gain strength is being offered. Day in the centre starts with breakfast and ends with lunch, there is a possibility of personal hygiene, laundry and closet usage. Clients of the centre take care of cleaning and tidying of the centre, join in renovation of the charity premises and small handy works. Except everyday activities of the centre, clients participate in a supporting net of church charities by transporting different necessities to households of individuals or families in need. They assist with charity presentation activities aimed at discussion and involvement of the public in a support net. (www.charitatt.sk)

SSS provides meals in canteens as a supportive social service for citizens of Trnava in a pension age, severely disabled, citizens with an unfavourable health condition, or people unable to secure essential conditions to fulfil their

basic needs. The meals are provided in accordance with §58 of the Act on social services. The food provision is carried out in seven canteens in the city of Trnava: V.Clementisa 51, Mozartova 10, Limbová 11, Novosadská 4, Hospodárska 35, Ludová 14, Seredská 66 – Modranka as a supportive social service through two canteens. If a citizen of the city of Trnava fulfils the conditions and is interested in using one of the canteens, they ask a member of staff during the sale time of lunch vouchers to be registered in a database of clients, while they present documents (pension assessment) necessary to prove that they meet the conditions of meals provisions. In case of filling the capacity of the canteens, to ensure fair admission of clients, an employee of SSS keeps a waiting list of prospective clients. (www.trnava.sk)

People in the city have a possibility to sell street magazine Nota Bene. Currently, this magazine monthly gives a chance to gain a decent income, self-respect and social contacts to circa 350 people in 17 cities and towns in Slovakia. Nota Bene project supports people in an unfavourable situation on several levels:

- The homeless acquire decent income allowing them to fulfil their basic needs,
- They gain self-respect, because they are becoming an active element of helping themselves,
- It helps with establishing social contacts with majority society and relationships gained by daily sale of the magazine in the streets,
- With the assistance of social workers the vendors have a unique opportunity to improve their work habits and social and communication skills necessary for the integration into society.

The NotaBene project has been created for the street life conditions and gives an opportunity of participation to everyone. It is open towards people without an identity card, health insurance card, permanent address, or finance, with possible addictions, or unfavourable health condition. Because of the above mentioned we can state that selling a street magazine is a unique training tool. The sales system, where the vendor receives first five pieces of magazine free of charge and the following ones for half price and subsequently sells them, naturally teaches them to plan and think ahead. The homeless become active partners instead of a passive recipient of help. Ultimately it helps developing their natural capacity and key competences so by activating their own inner sources they are able to help themselves. (www.notabene.sk)

In the city of Trnava, during summer of 2016, a Memorandum of cooperation on a project Streetwork Trnava was signed. Initiated by Trnava Archdiocesan Charity, it was joined by City of Trnava, Trnava University and University of

SS. Cyril and Methodius. The main objective of this project aims at homeless people and implementation of a scarce terrain social service in Trnava. Key task is to mobilize the motivation of people living in the streets to use activities and services focused on change changing their way of life (from addiction treatment, contacting their family members, arranging social benefits, providing social counselling, participation in counselling and educational activities to job searching).

The core of this project comprises of a team of so-called streetworkers who as volunteers twice a week from 17:00 to 20:00 in couples search for homeless people and offer terrain social services.

Services provided by streetwork in Trnava:

- Basic counselling,
- Treatment – disinfection of open wounds and smaller injuries,
- Motivating discussion aimed at possibilities of changing their situation (possibility to use services offered by City of Trnava),
- Offering informational (educational) leaflets,
- Recommending a relevant organization to the client,
- Human contact – on one hand, streetworkers provide professional support, on the other hand they offer contact, social connection with community that the homeless often lack,

Besides material help like food, beverages, clothing and blankets, the volunteers also investigate actual condition of the homeless people (health, social) (www.charitatt.sk)

CONCLUSION

People without home are a part of our public space. Considering this, it is important to view them in context of the whole society as a specific group of citizens that interacts with majority society. Through social services designed for them we are trying to mitigate consequences of poverty, prevent worsening of their social situation, eliminate and eventually avoid poverty and exclusion, and assist them with integration into majority society. Quality provision of basic needs becomes an essential condition for the homeless to be able to work on reintegration into society. It seems to us that social services present an inseparable element of supporting homeless people.

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MATERIALISTIC WAY OF LIFE AS A CAUSE OF NEGATIVE EFFECTS ON YOUNG PEOPLE

Martin Halaksa ¹

Abstract

Current era is characterized by material, respectively consumerist lifestyle. Typical signs of today's world are hurry, stress, nervousness, wrong lifestyle, chase for money, computers, drugs... In this life-cycle, solidarity, fellowship, love, thoughtfulness and of course family nurturing are pushed to the background. Hard-working parents do not devote enough time and effort to bring up their children, who are left to self-education. This comes with many negative influences. The most essential and greatest problem of today according to my opinion is the loss of social feeling in youngest generation, loss of self-reflection, and negative behavior not only towards strangers, but inside the families as well. Such combination of negative agents causes psychic problems mainly in young generation. These problems occur in a much larger extent in comparison to the past. The aim of my contribution is not only to point out this problem, reveal the causes and consequences, but also to propose a solution for these issues.

KEY WORDS: family, education, problems, computers, future

INTRODUCTION

Over the past few decades, the means which, thanks to new technologies and cultural changes, ruin the true childhood experience, and thus threaten the whole idea of childhood itself, are being more discussed.

Since the very problems can be defined in various ways, the discussion on this issue undoubtedly concerns the level of education and the full development of an individual. In no country, city, or any community are mentioned problems exactly the same. Their nature depends essentially on local traditions, economic factors, recent past and last but not least also on politicians on both national and local level, as well as on religion, educational trends and the ideas and abilities of teachers. However, it would be naive to pretend that everyday experience of children, let's say, from Kosovo or Northern Ireland, whose countries still show the consequences of decade-long violence between local communities may be equal as, for example, the experience of children from Russia or other relatively peaceful areas of Europe. Although the basic features of a child and its childhood can be identical in all these places, their nature and character must differ in many ways.

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We all very well know, that television, internet or McDonald's restaurants are now available everywhere. In Lapland, as well as Innsbruck, and the children from these areas will live in one Europe as citizens of the same European Union. Education and upbringing as well as personality development are becoming more and more standardized all over the world. But we also know, that their environment, cultural, political, and climatic in particular will still vary considerably and therefore we need to always give great significance to this fact. We may remind this is also one of the reasons why, for example, the Treaty of Rome never addressed the matter of education of children and youth. It is true that, thanks to its differences, this continent is really interesting and diverse place to live, but on the other hand, these differences result in some difficulties. Therefore describing the current state of childhood of little European as well as the problems that surround him and ways to access these problems, is not simple. (source: Lenderová, M. – Rýdl, K.: *Radostné dětství?* Praha Litomyšl, Paseka 2007).

1 PRESENT TRENDS AND RISKS

What are the most grave dangers that surround our children and youth? While putting this question, we realize that the greatest problem in case of most children and young people is the computer, respectively the fear of video game addiction. The same applies for television, which together with the computer occupies almost all the child's leisure time. Time spend in this manner can be regarded as unadequate and wasteful. Of course, these instruments are also subject to economic possibilities, whether in a specific country or family.

The effect of leisure time spent in this manner is the lack of leisure time spent outside, on fresh air. In this way, children loose physical development, fitness and the ability to establish contacts with their peers. Many observers dealing with the issues concerned, consider aforementioned inabilities the only negative aspect of computers. Computers, whether at home or at school, extend the children's knowledge horizon and unburden the children of ordinary, purely routine tasks. This saves time for higher-value activities. Especially since the introduction of the Internet, many optimists believe that this will provide much more opportunities for children to expand their knowledge compared to a library. Moreover, it enables them to directly interact with children from other environments.

However, according to pessimists, the Internet is a constant threat for young person's development, through pornography, drugs and other ailments of society, which are expanding rapidly. Surfing on the Internet could for example, become

something similar to drug addiction. This addiction would divert children more and more from reality and natural, according to conditions, standard development. The aforementioned group of people - observers pessimists, also increasingly often cite psychologist's warnings, that the use of computers could not only accelerate traditional children's activities and offer a wider source of knowledge, but also they could change the functioning of a child's brain.

In this regard, we can quote the experience or rather knowledge of Professor Rýdl from Philosophical Faculty of University of Pardubice from his last visit in Finland, which is the home country of Nokia corporation. Thus, a country which, according to statistics has the highest rate of mobile phone use and one of the most affordable internet connections in the world, and where the use of modern technology affects the way young Finns use their native language. According to Professor Rýdl young Finns use more and more condensed form of words from messages that appear on their pagers and cell phones. The teachers already noticed how such usage of language reflects in their written assignments at schools or universities. This issue is not necessarily dangerous, but some psychologists are of the opinion that the use of increasingly sophisticated machines with artificial intelligence could affect users in unpredictable and dangerous manner, that they are not being dictated just verbal formulas, but also some simpler functions of their own brain which is therefore incompletely exercised. (Rýdl, K.: Kapitoly z obecné pedagogiky I. Liberec, TU Liberec, 2004).

The brain is therefore not forced to work and is imperfectly practiced. Concerning this issue, there are some claims from circles of other experts, that for the sake of our health, it is necessary to pursue persistent and thorough mental activity and that is why those who regularly impose challenging and firm tasks on their brains, such as crossword puzzles and similar mental exercises are less likely to get for example Alzheimer's disease or other forms of dementia.

And so it is outright to ask ourselves whether we are doing well, supporting our children in the use of computers. We unconsciously lead them to feared and unknown mental consequences in the distant future. The impoverishment of their emotional life and the denial of the many joys of childhood? For example sitting at the computer for too long means spending most of leisure time at home and neglecting one's physique and body health. Of course, many would argue, that there are far more important threats to children and young people than those represented by the computer. Drugs, for example. Surveys show, that drug addiction in some parts of Europe threatens increasingly younger age groups, similarly with alcohol and tobacco.

2 HISTORY VERSUS PRESENT DAY

In fact there are some who see this as another example of the values of our European civilization being demolished. Revolutions of adults and students in the 1960s influenced future generations and led younger and younger children to accept the unvalued lifestyle of adults. The same moral downfall, according to many claims, has led to the juvenile crime growth and to a sudden and extremely rapid spread of “American contagion” called graffiti covering not only our cities, but also villages with their mindless scrawlings. However, these lack the colourful artistic imaginativeness as graffiti from the 1970s or 80s, they are mostly just ugly serial inscriptions, which are seen everywhere and which often disfigure our most beautiful historical buildings. It remains to be considered whether such symptoms are not a result of parental mistakes in bringing up their offspring. But we also have to point out that a much more serious problem for most children is the collapse of their own family as the institution where they are brought up. This collapse has many causes such as the low popularity of marriage these days, as well as simplicity and frequency of divorces. Fact is that there are quite a few people who see this collapse as a blessing, from their point of view it frees the children from the dominance of their parents. These can often be totally indifferent to the needs and views of children, and according to published statistics there is a possibility they can mentally and physically abuse their children. That’s why they don’t see the divorce as a threat, but as a way to relieve the child from the painful agony of eternal family quarrels. (Pertusek, M.: Společnosti pozdní doby. Praha, SLON, 2006)

Whether we realize it or not, today’s materialistic way of life affects each and every individual. It is startling, that these effects show especially on the psyche of the young generation. Nowadays, there is a large increase of mental illness afflicting young people aged 15-30 years. The main reason is frustration, initial failures and negative effects of the external environment. The number of young people affected this way is increasing at alarming rate. We were able to observe the civilisational ailments for the first time through the broadcast media in the United States. There is some sort of commonplace to have a private psychologist or psychiatrist. In our area, this trend is not so dramatic, but everything suggests, that we are also approaching the level of developed countries.

Table 1: Psychiatric ambulatory service in 2000

Age group	Number of visits		
	patient in outpatient unit	physican at the patient (visiting service)	Nurse at the patient (visiting service)
0-18 aged	88007	5	1
aged 19 and more	1666801	928	367

Source: National health information centre: medical almanac for years 2000

Table 2: Psychiatric ambulatory service in 2010

Indicator	Total	o.w.		
		females	persons aged up to 18	
			boys	girls
Number of examinations	1295940	683110	44197	26769
o.w. first examinations in a year	21668	117532	14239	7896
o.w. first examinations in the patient's life	65167	33986	5594	3421

Source: National health information centre: medical almanac for years 2010

From my experience from my environment, I know that in most cases, mental illnesses are not a one-time thing, but it comes to relapse. Patients have to take medications for life. The way out of this situation is not only with the help of the family and its support, but also a change of thinking and acting throughout the whole society. It seems unrealistic, but each one must start by himself.

3 PRESENT TRENDS AND RISKS

Anyhow, the current family is the second most important factor in this matter, after the personality of an individual. The family is most often a small group that has a role to cope not only with the needs of children, but also with external influences that harm them or disrupt their development. For example, today we have to face problems, such as the commercialization of the world of children. Aimed manipulation is felt by people in many countries at the thought of the way in which are children and young people together with their parents exploited for example through manipulative advertising campaigns, accompanying for example the Pokemon game or Star Wars. The constant expansion of television

advertisement on television channels which already broadcast 24 hours a day, offer children programs which, judging by their content are suitable for viewers with experience and judgment of an adult person.

Likewise, programs that can fill the free time of a child without meaning and without developing their opinion on the world or at least it particularly amusing them. In some countries there are literally hundreds of digital alternatives that might attract children to not only watch their favorite programs, but to spend all their free time in front of the screen, which is a process, due to which they can prematurely and inadequately grow up. It is true that television has been a good companion, but now there is somehow too much of it and not only parents but also their teachers can play a significant role in convincing children to be much more picky in choosing how to spend their leisure time. Things like that, of course, change the nature of childhood and can not be ignored, but rather, our aim should be to support the abilities and aspirations of our children.

4 INNOVATIVE METHODS AS A THREAT

If we just briefly outline the recent debates on genetic engineering and the possibility of production of a certain-type and intelligence level children per order, we speak about really great danger. A new their robotic child who can not to have a child and a parent who are not granted a child natural way, and which can be switched off and treated like a thing. In this matter, it is surely possible to appreciate the technical success, but the ethical impact is too controversial. Especially if we realize how many real children live in disastrous conditions, who have no chance to get into normal functioning childless families mainly due to extensive and tedious legislative. The threat, such attitudes represent for the whole idea of childhood is obvious. However, some proponents of this position, feeling the need to be focused on the child, could argue that it is much better to direct the child where it is most likely to find work than let him follow his inclinations and end up with little labor market prospect. There is a suspicion concerning this attitude that its aim is not to focus on the child, rather than concern for the political and economic success at the expense of humanity and maximum happiness and needs of the child.

According to Dr. Dalin, instead of assuring ourselves that our children know how to deal with the problems from the past and concern ourselves with how to make a living, we should pay attention to our children, so that they can experience the real childhood and develop fully as sensible and flexible human beings who will be able to respond to various new challenges and demands without losing their sense for true humanity and empathy. One of the positive ways to slow down

the negative trends, or even reverse them in favor of the natural childhood could also be rigorous protection of the pre-school children from efforts to accelerate mastering of activities which oppose the manifestations of a natural evolution.

The truth remains that the changes occurring in present world, transforming the whole human civilization, they are a sign of the gradual vanishing of more than 300 years-long industrial society and a creation of a new qualitatively higher society, the information society. This process has already started to show in the 60s of the 20th century, with accelerated pace since the 90s of the 20th century and also the beginning of the 21st century. We are currently witnessing a further acceleration of this process. This transformation is unprecedented in the manner of both quality and quantity of changes in the history of mankind and is considered a part of the process of human evolution. (Sedláček, T.: *Ekonomie dobra a zla*. Praha, 65. pole, 2009)

CONCLUSION

Our task, to protect children and youth from the risks the process itself brings, should be as important as protection from racism and all other possible forms of rough handling to prevent them from losing their childhood.

Protection against negative influences will be effective and decisive only if not just functioning and healthy family is able to fulfill its written or unwritten functions, but also the relevant institutions and state are aware of the risk that a material way of life brings.

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STATE SOCIAL ASSISTANCE TO ROMA FAMILIES

Helena Schusterová¹

Abstract

Social assistance is directed to the citizen who finds himself in a difficult life situation. It is intended for example for the severely disabled, for old and the sick, for citizens with income insufficiency, for children who are deprived of basic rights, for social nonconformists citizens and for families with the impact of a factor distorting the functioning of the family. In this article we will perform my attention particularly to the socially disadvantaged Roma families in terms of state aid.

KEY WORDS: social help, social state, families, Roma families

INTRODUCTION

The word help has special place in human society and it is seen as a moral principle. It is natural and inevitable category of humanity. Human survival needs the help of his family, group. Already in the earliest history was the aid part of life and was occurred for example in acute danger: in diseases, aggression or orphaned, poverty or physical disabilities. In the Middle Ages was occurred also various forms of assistance through organized giving alms to people who could not take care of their families. Among the first organizations include hospitals, where they provided clothing, medical care or food, and all was under the umbrella of the church.

Historically, it is possible to observe various forms of assistance. There was one individual voluntary aid, social policy of the state through the law and service oriented to person through social work, health care and public education. Social protection is a natural part of the assistance. Today human is also entitled to professional assistance from social assistance in the sectors of unemployment, poverty, sickness, old age, death of a breadwinner, death of a relative or loved one, but also the birth or total loss of family, home or various forms of social failure (Hanobik, 2012).

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STATE SOCIAL ASSISTANCE TO ROMA FAMILIES

Every person throughout his life comes to the situation during the life cycle that is dependent on support from someone else, or with development of their personality and the like, so he can get into serious social situation that without sufficient help others, which of course fits society, no one can resolve their social situation and to break free from its consequences. It is therefore one of the key tasks of the state through legislative, financial and other measures to create a framework that would prevent citizens fall into social exclusion and help him in so much independence and a decent quality of life where the right good, accessible and addressable network of social services is the warranty of this (Masárová, Sika, Španková, 2015).

For adequate development of social assistance sets out basic principles. And these are monopolisation, decentralization, purposefulness, adequacy, plurality of resource and professionalization. The first mentioned monopolisation is directed from centralized management for multiple entities that are authorized to provide social assistance. Decentralisation aims to bring social assistance to citizens and to do more activity at the local level. That any form of social assistance was provided for a specific purpose, in order to achieve the expected effect is in basic principles involved docility. That the social assistance granted on a such level that has not held a discouraging, so from here it is in principle the adequacy of social assistance. The penultimate plurality of resources trying to relieve the state from a single provider of social assistance, so the role of municipalities and non-state actors are reinforcing, but of course where state assumes the function of guarantees. That in the system was provide level of all workers in this system of social assistance, mentioned professionalization supervise o it in fundamental principles.

Social assistance is designed to socially most deprived citizens to meet their needs and it has lead them to activation of the overcoming of subjective social situations. It is financially secured from the state budget, municipal budgets and non-state entities providing such assistance, it is paid by taxes and they do not depend on the payment of contributions or premiums (Hanobik, 2012).

Law no. 417/2013 Coll. about assistance in material need and on amendment of certain laws significantly changed the system of benefits. Changes are increased in targeting and equitable support to those who by self-inflicted can not or can not provide income by own working. In previous systems were social benefits provided by other means, ad it was by passive, so in the social safety net, where people do not have to take action. Of course it was also linked by this, social benefit was higher than the minimum wage or other income. The role

of the social assistance from state is thus effectively combat against poverty, reduce unemployment and reduce dependency on social benefits(Masárová, Sika, Španková, 2015:173)

Social assistance is active cooperation of the social worker and the client in problematic situations in human life. Where we come to the division of social assistance to three forms. The first is preventive which should assist, monitor and direct its attention to the development of human personality. Second form of social assistance is secondary form that is the current advice, which serve in addressing existing problems. This one includes and utilizes counseling, therapy, rehabilitation and economic-financial assistance. But if there are caused uncontrollable situation, so there are additional uses, so tertiary social assistance, which is characterized by intense assistance of other actors.

The basic features of the social assistance system is a nation-wide solidarity, individualization, subsidiarity and finality. From this we can deduce that social assistance is broken down according to the situation in which the person concerned, who needs help, is located. I mean, this is about their individual needs and circumstances, or help to person who is not entitled to benefits from social insurance and can not help herself. Finality will focus on the final outcome, which is crucial for social assistance (Ondrušová, 2009).

Social assistance is mainly focused on finding answers for questions: who should be given, when we provide assistance, why, under what conditions, how. Social assistance is also divided on the horizontal and vertical. In horizontal it is primarily about medical assistance, material assistance, psychological assistance and social counseling. Vertical is broken down by recipients, if it is individual, group, community or society. Thus, if the client is looking for help, so he comes to social worker who can run him in this matter professionally, he may be in these situations accompany for him, advice or help him through therapy.

Priority is given to social services to assist in the prevention of social exclusion of citizens. And so state through determined social events, which evoke status of material and social deprivation, fix the rate of self-help in securing standard of living of the individual, or family (Stanek, 2011).

The family is a set of commonly-employed and co-resident marrieds and partners with children or with a child, or one partner (parent) with children or with a child. The basis of family policy has always been the care of children, especially in single-parent families, but also for children who are outside the family. At present, social policy in sphere of family policy is focused on the field linked with motherhood, parenting and the family, with education and nutrition of children, protection of children and women in the family and beyond, and help in case of loss of the breadwinner.

Family policy is understood and implemented to support families with children in the system of social policy. Its main objective is to mitigate the rising costs of families to the education of young generations. The family is the basic cell of society, is an area of life, the formation of human character, the acquisition values. Between family policy instruments include direct cash transactions, tax benefits and provision of public goods.

Concept of state Family Policy has a fundamental strategic objectives of family policy, achieving relative economic independence of families, percentage of families in realizing their functions, in social stability and quality of marital and parental relationships like in creating optimal conditions for self-reproduction of company. These long-term strategic objectives should be realized in particular in the areas of competence of state such as legal protection of the family and its members, socio-economic security of the family, education of children, youth, preparation for marriage and parenthood, security of health of the family members and the demographic development (Hanobik, 2012).

State helps to family by direct financial assistance through government benefits, health insurance, pension insurance benefits, allowances and welfare services, and of course through other benefit – for example by scholarships. To ensure families with children are family allowances designed to help the family to pay the increased costs associated with raising a child and limit the reduction in the standard of living of families with children. State helps families with children also with tax relief.

The state helps to family during various social events. It's also linked to pregnancy, childbirth, where the state helps and offer to women adequate medical care for a successful course of pregnancy and childbirth. Of course in social events is counted also secondary needs, namely those for pregnancy, where it contributes to health care, or salary compensation of salary induced by time off and so on. Financial assistance is also provided in maternity in childbirth allowance or parental allowance under the age of 3 years of the child. Another financial assistance is also child allowance, which is repetitive and designed for the education and maintenance of a dependent child. The social events is not just a childhood itself, there are associated costs for nutrition, preventive treatment, education and socializing of child. In different countries it means otherwise - is taken into account also entitlement of family as a whole, but also claim the child itself.

Of course, it may experience the situation that the family child care short or long term will fail. Short-term failure is for example illness of a parent or quarantine in the hospital where the child resides daily. Under the long-term failure, we mean the disappearance of a family death, mental defect or failure of

parents (alcoholism or drug abuse) and in immaterial least, there is the failure of families such as child neglect or abuse him. Therefore, in such example creates an alternative family through adoption or custody of the child in foster care, there is also the possibility of custody and simulated, so foster care (Stanek, 2008).

Social assistance of state is directed to the severely disabled, for the elderly and the sick, for citizens with income insufficiency, for children who are deprived of basic rights, for social nonconformists citizens and for families with the impact of complex of a factor distorting the functioning of the family. One of the most significant communities in Slovakia is just the Roma community and the families in it, which is almost completely dependent on social assistance of state. Many of them work and survive only on the basis of contributions from the state. Roma family has strong elements of patriarchal type of family in terms of authority. To ensure the means of subsistence they participate and contribute according to their means all household members, regardless of age. The identity of the family is maintained by maintaining existing practices. Roma family as a socializing agent held a dominant position, while education and training in the context of a series of so-called have chain character, that older children take care of younger and parents are often excluded from it. According to various studies, it was confirmed, especially among families living in settlements that families merit disadvantaged Roma students is dominated by a lack of educational care and lack of interest in school work, then it is the parents alcoholism, excessive meticulous care, inconsistent, or appeased education.

From research to which was devoted Horňák (2001), he concluded, and proposed solutions such as the inclusion of Roma children from socially deprived and educationally less stimulating environment in early childhood education, or for example in schools with majority of Roma communities to support and teach them what they do not know and what they may need in life and does not task them with unnecessary information. One of his suggestions was the fact that they are from an early age approach to parenting education, culture, housing and clothing, which is in my opinion very important. Also in majority population is very easy to distinguish the nature of the behavior, and also easy to assume the types of behavior in different life situations, depending on how he was brought up in childhood and in which form held, as most of us have as a primary example their parents. It is therefore necessary to improve the lives of children from Roma families together with experts from relevant fields, such as social workers, teachers, lawyers, police and psychologists. For these reasons, it is highly desirable, both in terms of practice, policy, education and prevention to educational research focusing on those groups of children and youth whose development is at risk, which is in the border zone of mental abilities that need individual training help them to become risk free citizens

of our state. Family in a global perspective, has an irreplaceable role in raising children. We can not replace by any other social institutions which it would have at least an acceptable extent replaced.

Hubschmannová (1977) a few years ago divided the Roma families into three groups, and the division is still up to date. The first group consists of families who are most socially integrated and live orderly and compared to the majority of population, they keep step with them. Parents has full-time job – some of them with qualification, children attend school regularly and essentially by this way of life they achieve inner satisfaction, which is underlined by-exclusion from society, on the contrary adoption. The second group are families who have not adopted the commonly recognized standards. They have basic hygiene and work habits, but they work (if they do) without qualification, they are sending children to school irregularly, do not provide proper education and basic conditions for the healthy development of their children. These families want to imitate the way of life of the first group of families and the majority society, but only superficially, in material form as consumers of culture, without the need to learn and actively participate in the creation of positive values of society. The third group includes most disadvantaged families whose members are not interested in changing their life and position in society. They live in ancestral communities, changing their place of residence, moving and living mainly in settlements, which are characterized by poor social and hygienic conditions. Members of these families operate only in exceptional cases, they are not interested to send their children to school and in every way unsuitable environment seriously undermine the healthy development and education of their children.

From this perspective should be the goal of our interest just the second and third group, because they do not provide adequate educational environment for children and requirements for the education asked by the majority are by these families misunderstood and not accepted.

CONCLUSION

Masárová (2015) stated that the global aim of the modern welfare state is the development of the individual and society, encourage a high level of employment and social consensus. Important role in the modern welfare state plays the third sector with its public benefit activities and efforts to deal with the failure of the private political market. Ultimately it is about overall qualitative change of the existing welfare state models when they step through the offer of public services demand. This change is the shift from paternalism of personal responsibility and the actions of individuals, while guaranteeing social safety net to states.

The state should see to it that every citizen ensure a minimum income, nutrition, health, housing and education, and this should be achieved through income redistribution. It follows that the main objective of the state is through social assistance through redistribution of income to create a social network that prevents overflow of population in absolute poverty. In our country is one of the major groups, which meet with the word poverty – it is exactly Roma community. I know from experience that if some individual comes to an exotic Roma settlement, he remains horrified and often they comes with the proposed with modifications, or the use of the talents of the this population. Many times it is difficult to explain also concerned that there is not a group of homeless people living on the outskirts of the city, but it is a minority group of population - Roma. With visiting of centers inhabited by the Roma population, such as Lunik IX in Kosice, the man find himself as in a very good and sophisticated sci-fi film with very good effects. It is necessary that state should help to such communities and the Roma community. But we must be the spark, which will help to improve living standards. Of course, everyone gets tired of helping with the effect of: throwing peas on the wall, so it is necessary to assist effectively.

State with their contributions in the context of social assistance and support significantly contributes to the survival of the Roma population, which it often misused and in any other way seek their standard of living, their customs and way of life alter. Therefore, I think there is appropriate to classify benefits according to who deserve it. Someone who lives only from the fact that the allowance is the amount of children who have their own, or get them into custody, and that one who seeks, but his conditions on labor market are very low and often completely thwarted from the approach of the majority population. There are many examples by Bočáková (2014) that when they are asked, why they are unemployed, there is a response that the labor supply responds by telephone and the response was positive, but at a physical meeting, the possibility of job was rejected. Such approaches are also one of many factors that Roma family therefore remains dependent on social assistance law, through which it can survive and provide for the most urgent necessities of life.

So by the conclusion we could say that in Slovakia is at present the majority of the Roma population is concentrated in rural environment, in their traditional communities, Roma settlements, that is concentrated, more or less segregated and socially isolated from the majority population. It seems that the Roma population will be differentiated into two groups and so, on group with a higher living standard that will rapidly approach the majority population and the other with a high degree of long-term dependency on government social security associated with high long-term unemployment and poverty. With solving the Roma issue in

Slovakia resonates unambiguous conclusion, that the key to solving the problems of the Roma and the problems with the Roma is education and education of the population of Slovakia as part of lifelong education.

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SPIRITUAL VIEW OF THE CLIENT'S SOCIAL SERVICES

Peter Mikula¹

Abstract

Social welfare for people means providing care for the basic needs of man. Fulfilment of these basic needs leads not only to the physical satisfaction, but also the restoration of interpersonal relationships and a sense of inner peace. Social services take their full meaning only in a complex perception of man as a physical, psychological and spiritual being. The examples of saints who saw in man the image of God the Creator is even a challenge for us, the people of modern times. A person using social services, is much the same person as one who helps him, and is thus worthy of dignity and respect. Only the knowledge of full acceptance, kindness and love gives clients of social services reason for new hope and joy in life. Showing upon the importance of the client, their uniqueness and indispensability makes them not only a recipient of social aid, as wells a exceptional being who becomes a gift for the social service provider.

KEY WORDS: social services, spiritual dimensions, clients, dignity, acceptance

INTRODUCTION

Social services are part of social care of the welfare for individuals especially in more difficult times. Bringing a person to satisfaction encompasses several areas of life. It is not only about providing the basic necessities for life. Comprehensive customer care in social services includes care for his inside, for his peace of mind, his serenity and also care for his relationship with the Creator. Many successful institutions operating through out the world, but also in Slovakia convince us by there long-term schemes that the effectiveness of the success of social services is directly influenced by belief in God. Understanding the clients of social services not only as human beings, but as a person in whom God dwells deeply affects the relationships of the social services worker to the client. Both in this regard become givers and receivers. Everyone has something to offer and at the same time both sides must necessarily accept the other.

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1 CARE FOR THE BODY, MIND AND SPIRIT

Man is a being that is building different from other living beings. It has several capabilities that set it apart from plants and animals. Which are common sense, free will, the ability to love and the ability to build interpersonal relationships and to create a relationship with our Creator, who bestowed upon us these talents. These abilities are what make humans human. That's why we say that humans have an immortal soul, which is a given of the human species. Every human being without distinction becomes equally worthy and honorable. God continuously produces new people who in his eyes have the same value as those whom he created some time ago. There is no reason to believe that some people deserve more or that others less care and human respect. Human beings with a body and an immortal soul, with capabilities to him given at creation, which is likened in the Bible to a defenseless child. Every human becomes a child of God, as he is their father. The Bible uses the image of a parent, father or mother, to express the basic attitude of God to man and at the same time emphasized the requirement God as a loving Father who is happy only when his children responsibly and respectfully treat each other. Human parenthood, better said fatherhood and motherhood is a reflection of parental and maternal respect and affection that God as the Creator has, towards his human sons and daughters. Humans as Gods children are in harmony only then, when they treat each other according to the ever loving God. In this substantial Christian assumption, upon which the Christian foundations of our European culture, is where the right to respect, dignity and the resulting care of society in such situations.

The human body is due to this the location where our humanity and our uniqueness is implemented. The body is where the human spirit and soul is being expressed and developed. The body forms the outer box of our inner selves and our being. The human body is formed in the womb of the mother at conception together with the immortal soul, which is our self. Even though the body is temporal part of man, yet is deserving of respect and dignity. The primary reason is our similarity with the Creator, who gave us the skills which are embedded in us. The Biblical view of the origin of the human body is simple. In the second description of the creation of man is that the body is created from the dust of the earth, or rather from soil. In the first biblical book of Genesis we find this description: *"Then the Lord God formed man from the clay of the earth and breathed into his nostrils the breath of life. So man became a living soul"* (Bible, 2016). The body is therefore sculpted by the hands of the Creator. However, a new dimension regarding the image of God, especially in a spiritual sense, as described in the first biblical description of creation (Kašparů, 2005).

In the Bible, as well as in literature we find the distribution of principles about the intangibility of the soul and spirit. The soul is seen as the more intellectual element, through its ability to explore, and the ability to be aware of oneself. Soul can be identified as the mental component of man. The spirit of man is seen as a relationship of love and trust in his Creator. Through our spirit it is strengthened by our relationship with the Creator, through it we build relationships of love and selfless dedication. Each of these abilities has needs, it is necessary to develop these skills. Comprehensive care for the soul, mind and body helps one reach human satisfaction. All three components are in mutual interaction. And are linked very closely together. Therefore, many psychological difficulties are affected by physical and spiritual fundamentals both negative and positive. These findings form the basic premise of comprehensive care for a dependent human being in difficulty. They are also an essential element in the care of all those who work in professions providing assistance to people in social and health areas. Value assumptions consist mainly of knowledge and attitudes underlying the human perception of reality around him. View of man as a human being like God as father of all of us gives us the urge to satisfy our brothers and sisters. Values and the formation of them is one of the foundations of human motivation regarding approach and visualization of man as a being with the same dignity. Education to strengthen human values providing social and medical assistance, not conceding to corruption, bribery, indignity with clients of social and health services, or to view the clients of social services as a thing that is used for financial gain. Formation to the adoption of such values makes social service providers not only the subject of giving, but also receiving. Missing values and the process of their formation is the foundation of a crisis in general, the basis of incorrect access to the needy, but also interpersonal behavior in general.

2 IMPORTANCE OF ACCESS TOWARDS CLIENTS

Daily experience of contact with persons active in the social sphere of clients of social services not only highlights the importance of professional care for external security, but also in the care of his inner world. The role of the social worker is helping clients not just once, but to motivate, inform and shape. The optimal results of welfare is the fact that clients of social services will no longer require from social assistance of others, or will be required to a lesser extent. Working with clients of social services is correctly implemented if the provider and recipient of social services are able to find common ground where humanity is present on both sides. It is clear that the right to access by providers of social services is the most important factor that affects the ability of the client to begin to

think and live differently than before. The association between spiritual, mental and physical is essential for the perception of the importance of interest in a man of his complex needs. The most important human needs in the field of mental consider.

1. The need to feel accepted,
2. The need to feel loved,
3. The need to have a home,
4. A feeling of being useful,
5. Feeling safe

The people that meet here are in two different situations. On now hand you have those who are dependent on social welfare with all of their problems, whilst on the other hand you have someone who offers their professionalism and services. Here we are being shown two roles, the role of the socially dependent and the role of the social worker. The social worker is to be acquainted and take into account all the conditions which come with each socially dependent person. It is absolutely unacceptable for the social worker to be labelled as someone superior or for any client of social services to be labelled as inferior. One of the most important conditions of contact with clients of social services is spending enough time with each client. It is very important to never give the client a feeling that their time is limited and that they are going to be rushed. Specific groups are clients of social services, who do not seek or expect social services, but social workers come to the clients home, the street, or the place where the client spends their time. This group of clients requires a special approach with special patience and kindness. Inherent in professional approach to clients is communication. To communicate means to have contact with another people, communicating with the use of language or other coherent character sets (Ivanová - Šalingová, 1993). The most common form of communication is verbal communication. Verbal communication thus becomes a means of expressing ones self, especially in personal matters. When speaking the social worker should sound clear and understandable. His expression is to be closer to that of the client. As always, it is better to talk simpler with adequate means of expression. Normal spoken communication is accompanied and even sometimes replaced with nonverbal forms communication. And it is from non-verbal forms of communication one can classify the emotional condition of a person. The most common non-verbal modes of communication are facial expressions, touching and hand movements. Nonverbal speech seems particularly important in todays world which is full of symbols and gestures. A great danger in communication is the means of communication with the use of mobile phones and other electronic devices.

The client does not receive the same level of implicitness and acceptance as he should, if the social worker devotes a large part of the interview monitoring the communication on the electronic device with the client, or even playing on that device at their leisure. We can communicate with various actions. How we behave, what we do at the meeting, belong to the most important manifestations on our personal meetings. Looking into the face of a person gives the client a feeling of acceptance. This form of communicating could be called the communication by heart. But for communication to be performed corruptly we must understand that complete silence is a must. Complete silence means to allow the other one say what he or she wants, what he feels and he is undergoing. Adequate silence is sometimes a better form of communication than many words (Ďáčok, 1999). For fruitful communication it is necessary to create favorable conditions such as the meeting place. We prefer clean and warm places instead of places which are cold and messy. Sometimes it happens that we need to use unwelcoming locations where the social worker may feel uncomfortable, but is a common environment in which the client dwells. For communication outdoors it is always preferable to choose a park bench rather than standing in the middle of the crowd. It is appropriate to find a place that evokes the space for private conversation in which we can communicate with the client. External conditions help internal disposition, we can call it an internal meeting place. It is important to get the client and the social worker on the same wavelength, to achieve closeness in heart. Some of the first meetings with the client may have a touch opposition, perceiving the social worker as someone negative who will not allow the client peace and consistently requires something of him.

3 VALUE OF A PERSON IN NEED

Postmodern society is largely based on consumerism and the principle of utilitarianism. Weaker individuals are often perceived as a burden for society, as undesirable. The attitude of indifference of the strong and prosperous causes people who live on the fringes of society to feel inferior, resignation and hopelessness. The daily experience of suffering often convinces them of their redundancy in society. Socially declared values in practice become idle word that often hardly anyone believes. European values in a considerably positive rate marked the influence of Christianity and its legacy. Pope John Paul II. wrote several documents that indicate the uniqueness and worth of every person who is in need and suffering. The document itself written after his experience of the assassination in 1981, which deeply affected his life and helped him get closer to the suffering people through his own suffering. Great attention given to the

suffering and transformation into positive attitudes happened after his visit of the assassin in prison. Suffering is generally considered to be evil, but which may also positively alter a person's life. Suffering according to the Christian point of view gains value for a person if he is able to take it with love and sacrifice. Suffering lived in union with God can be beneficial for people who are suffering around the person. Suffering is seen as a means of our redemption by Christ, to whom our own suffering can be connected. This opens up not only for help and strength needed for enduring their own pain. It becomes a bridge to God and to other people (Ján Pavol II., 1998).

4 ACCESSING CLIENTS ACCORDING TO MOTHER THERESA OF CALCUTTA

The story of Mother Teresa of Calcutta began in 1946 during a meeting that changed her life. At that time she was 36 years and was happy living with the Sisters of Loreto in Ireland. She felt the great misery behind the walls of their convent school, attended by children from wealthier families could afford to pay a modest tuition. In her spare time she liked to take the schoolgirls to the shacks in the slums on the outskirts of Calcutta. Her calling to work with these forgotten wretches was getting stronger. Monastic order, in particular, the focus of this religious order forbade her from performing this form of assistance. On the 10 September 1946 her Mother Superior decided to send her for some rest to the mountains near Darjeeling in northern India. During the journey from Calcutta took place a meeting that shaped the course for all her previous life. She saw countless numbers of people living in misery whom no one helped. During the long hours of the journey by train in her heart she could very clearly hear the words of Jesus several times say: "I thirst." At this point she felt that God loved her immensely. Word thirst is one of the words of Jesus, which said on the cross, just before his death. Mother Teresa later explained what that word meant to her. It was the moment when understanding that Jesus waits with eager longing for her love and attention. He craves the reciprocation of love on her part. At this time, he got to know the nature of her profession. The impact of this mysterious meeting caused her to focus her mission to relieve Jesus's thirst for love through service to the poorest of the poor. Her journey from the monastery to the poor, was not so straightforward, because she did not want to break her vows given which she gave to God with full respect for church authority. Finally, after almost two years, the pope allowed to live outside the monastery. She lived from what was given, as she was on the street in the same situation in which the poor live, to whom God sent her. She left the convent to undergo a humanly

uncertain journey. She lived in the attic of a house where she didn't even have a bed and band instead of a table she used a crate. This tradition continues in the Community of sisters around the world to this day. Everywhere they have the same living conditions. Owns two pieces of clothing and sleep on a mattress on the ground, which was more a floor mat. Among the first followers were schoolgirls who went to the covenant from the school, as Mother Teresa was a popular teacher. She used natural enthusiasm to inspire the young girls to live for the ideals of service to inspire love. Her profession was not focused on the poor in general, but the poorest of the poor, those who have no one to care for them. Among the works that she commenced in Calcutta belonged the house for the dying, where the sisters carried in people from the street. They cared greatly so that the dying would feel love and acceptance in the last moments of their lives. Further there were homes for children who have found thrown on the streets by their parents due to extreme poverty or children who's parents died. Daily activities was helping the poorest inhabitants of the slums with health care and food. They taught children to read and write in make shift classrooms anywhere in the street. Her entire work was not only in regards to social and health activities. She called the Missionaries of Charity Sisters community, a community which is contemplative, and focused on God, whom they decided to worship and serve the poor. So her colleagues have not forgotten the essence of their mission, she would hold up five fingers of one hand and count the words from the Bible. She recalled that you can count the whole Gospel on five fingers: "You did it to me". For her, the presence of Jesus in the poor was such an important factor, such as prayer in the chapel, or any other fact of her relationship with God.

In 1979 she was awarded the Nobel Peace Prize. When she received it she presented an impressive speech. She wanted to be the voice of those who can not speak or their voice is weak and inconspicuous (Muggeridge, 2010). Her first overseas building in South America was in Venezuela, later in the Bronx, in a dangerous district of New York in the US, then in London, and at the Vatican, and in 1990 in Slovakia and other countries. Currently members of the Missionaries of Charity community operate in over 130 countries. In the Slovak Republic they operate amongst the poorest of the poor in Petržalka which is a part of Bratislava and Žilina. Their work focuses on the care of the homeless, visiting underprivileged families in their homes and work with the Roma population especially in the Roma settlement near the village of Plavecký Štvrtok in Malacky. Clients of the sisters are accepted with love and kindness. The condition for admission to the facility in Bratislava's Petržalka is zero tolerance for alcohol. This rule is especially is of a educational significance. Mother Teresa has on several occasions commented on the treatment of people whom the sisters serve.

The first and fundamental principle is perceiving the poor man as Jesus Christ Himself, who identified with all of the poor and suffering, since he too lived this way. Recognizing Jesus in the poor and suffering was the most important rule for her, which shown her the right way even in situations where human motivation failed due to the needy persons appearance, expression or behavior. From this main principle stem all the other rules. It is important to give a person dignity, to show him that he is a man like me, who is trying to help him. Not less important it is to show people that people in need are brothers and sisters, that they are someone who does not belong to people, someone who does not deserve my attention and love. Considering needy people for our brothers and sisters means to offer them peace of mind that we are all children and that we are all each others siblings. Giving them a feeling of equality in relationships, that they are free to express themselves and are not being dominated, in attitudes, and in deeds. The needy are not perceived by skin color, gender, social status, or religion. A positive thing is that the communities in different countries are always have sisters from all corners of the globe, from different nations, races and skin colors. The language of communication is English, which sets a standard for successful communication worldwide. After the founding of the house in the developed Western world, Mother Teresa discovered that the most horrible misery lies in loneliness, in the sense that one is not loved. Leprosy or tuberculosis are not the most difficult diseases of today, but rather the feeling of being unwanted. She claimed that the world is more hungry for love and respect, than edible bread. Several times the very founder of the Missionaries of Charity pointed to three types of poverty that need to be categorized: Poverty of the body when a person suffers physically in various forms such as famine, war and homelessness. Furthermore, poverty of the soul, loneliness, unemployment, and rejection by society. These forms of poverty are much more worse than hunger. Finally, the poverty of people without God, who do not have faith, or do not even have the opportunity to hear about faith, or to practice is freely. These facts give us the opportunity to understand the basis for communication between the sisters of the Missionaries of Charity and the needy people. The mindfully selected priorities stipulate the conditions for communication, which are focused on comprehensive care for clients who are perceived more as brothers and sisters in the human family (Maasburg, 2012). Nurses perceive their service as a service to God who is present in poor people. Great strength for them is in prayer and an intensive spiritual life. They pray daily both together and individually in the chapel in each centre several times. A definitive power boost is participation in daily worship. These facts give the sisters boost to prevent a burn out, and remain persistent in service even under adverse conditions. The motivation for

them is an example set by the sisters who worked and died on duty in dangerous parts of the world, especially in Asia and Africa. The inspiration for them are the examples set by saints, as was St Francis of Assisi, St. John of God, St. Vincent de Paul, Saint Damian de Veuster and others who had previously cared for the poor, the suffering and the needy.

CONCLUSION

In today's society there is a growing demand for high end social services. A satisfied client is a goal for all social service providers and is the purpose of their labors. Our society is undergoing a continuous evolutionary process and therefore it is important to pay attention to the formation of workers of social services. Access to their professional work and the clients themselves have a decisive impact on the internal fulfillment of workers and the spiritual perspective and approach of workers in the social service sector has many positive effects not only for the clients of social services, as well as the providers themselves. The spiritual view of the client offers access to people as if they were your relative, like brothers and sisters. A gaze filled with love and kindness opens inside social workers to allow them to receive the wealth of experience and life wisdoms of the clients.

Seeing the image of God in every person strengthens the providers of social service in the moment when the client is powerless, unable to communicate, remains passive or even when they are behaving inappropriately. The examples of great personalities like St. Mother Teresa of Calcutta, Jean Vanier, priest Marian Kuffa and others, teaches us that social assistance is not only to help the client, but also help towards the provider. This approach is a challenge for responsible preparation for workers in social services not only professional, but also as human and spiritual fields. It is a challenge to the provision of spiritual services in the centers.

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IMPORTANCE OF EDUCATING THE CONDEMNED

Luboš Hašan¹

Abstract

The study highlights the importance of educational activities in the Institute for execution of punishments in Hrnčiarovce nad Parnou. Educating the condemned is one of the best ways of resocialization of the individual who, thus, manages his time effectively and prepares to meet the labor market conditions and integrate into real life. Thereby, the education becomes a way of prevention of negative social phenomena. It also affects overall individual's personality, value orientation, positive habits and patterns, practical and work competencies and cooperation in team. The condemned are aware that the education offers a great opportunity to change the way of thinking and acting and gives their life a new direction. Penitentiary care is therefore essential for the prisoners to be prepared for social life after their release from prison.

KEY WORDS: integration, the condemned, penitentiary care, school, education.

INTRODUCTION

Sense of education of juvenile people belongs to basic activities of Force of Prisoners and Judicial Guard. It helps the condemned after execution of punishment to successfully join working, as well as social life thanks to connection of educational process and teaching habits, knowledge and skills, too. Thus, we can talk about complex social reintegration process which can help the condemned to integrate into society better.

1 IMPORTANCE OF EDUCATION IN THE AREA OF PENITENTIARY CARE

Education of the condemned is the summary of the activities based on the active participation of the condemned which are aimed at their integration into the society in accordance with their personal and social needs. Education of the condemned is usually organised in such way that the completion of studies is officially recognized by the issuance of the document by the accredited institution (in accordance with relevant regulations); while it cannot be obvious that the condemned received this document during the execution of punishment. Education is the summary of the educational, training and awareness-raising

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activities aimed at the acquisition of knowledge, skills and habits, development of cognitive, practical and creative skills in order to improve the social status of the condemned. During the execution of the punishment, such attitudes and skills are supported that can help the condemned with the reintegration into society and respect for the law. During treatment with the condemned, forms and methods of educational and psychological action, methods of social work, institutional rules, disciplinary authority, integration into work, education and cultural and awareness-raising activities are used to meet the objectives of the treatment program. The condemned person with the right assumptions is allowed to receive primary education, secondary vocational education and full secondary education or to attend other forms of education to enable them to acquire or enhance their work qualification. The condemned, who are illiterate, are allowed to attend the course for illiterate ones. When the condemned is included in such a course, they are obliged to participate in it regularly. A large proportion of the condemned does not have sufficient qualification or necessary education which is necessary for the successful integration into normal life, not even for the support and development of their own positive qualities. An important part of the condemned education planning is to assess criteria such as time needed for the education, applying of the education in the institute for execution of punishments, financial costs, as well as the educational capabilities of the condemned and their employability after release from the execution of the punishment (Morvai, 2002).

2 LEGISLATIVE EDUCATION OF THE CONDEMNED JUVENILES

Special attention is paid to the education of the condemned juveniles. In the area of penitentiary care, there is not only a classic learning process, but it is a specific form of the control in which the pupils acquire knowledge, skills, habits, they develop their thinking, memory and imagination and teachers create conditions for them for these activities (László, 1985).

The condemned is allowed the access to education which consists of generally education teaching, cultural and sport activities, social education and free use of the library funds. Education is generally carried out in the form of modular teaching, social learning or allowing the participation in external forms of studies and in courses. The condemned is, according to individual abilities and capabilities, allowed:

- a) the completion of primary school
- b) attending of the retraining course, course to qualification increase or qualification enhancement

- c) apprenticeship or completion of selected training branch
- d) studies at secondary schools.

According to relevant legislation, after agreement with the relevant government bodies in education, municipality or self-governing region (county), the institute provides compulsory basic education to juveniles in the form of full-time study or completion of basic education in the institute to the juveniles to whom the compulsory basic education does not apply anymore, but they ask for it.

Primarily, the main aim of education of the condemned juveniles is to ensure the fulfilment of compulsory basic education to those who will be transferred to the local institute for execution of protective treatment during the school year and the organization of education to gain lower secondary education for the condemned who are interested in obtaining this level of education.

Elementary school will ensure the fulfilment of compulsory basic education either by establishment of the detached classes or by special way of fulfilment of compulsory basic education in the form of individual training, at least for 2 hours a week. For the compliance of fulfilment of compulsory basic education, the admission of the condemned to the primary school and the authorization of individual training by the primary school is necessary. The part of fulfilment of compulsory basic education is also classification and issue of certificates giving evidence that they were not issued to condemned during execution of punishment. Elementary school ensures the fulfilment of the compulsory basic education for the condemned juveniles during their stay in order to execute their punishment in the institute and ensures the organization of lower secondary education in the form of full time or part-time study. The length of the course is determined by the school director, up to a maximum length of one school year.

If the juvenile fulfils the conditions to study at the school which offers secondary vocational education or full secondary education, they are allowed to study and individually prepare to school or to practical training after the agreement with the school authorities. This training is usually organized in the detached class of the primary school, secondary school in the institute or the individual training is ensured.

The education can be carried out by the institute also under the contract concluded with the relevant educational organization or on the basis of the education project approved by the director. Civil associations, churches, religious communities and other organizations may also participate in organizational, financial and material support of the education of the condemned.

3 SCHOOL FACILITIES IN INSTITUTE FOR EXECUTION OF PUNISHMENTS HRNČIAROVCE NAD PARNOU

The condemned execute their punishment in the differentiation group “A“, “B“, “C“ or in the specialized units. Within specialized units, except for life sentences, the differentiation group is not defined. This group is determined on the basis of the conclusions of psychological test recommendations based on the knowledge of behaviour of the condemned during execution of their punishment and detention, based on the knowledge of emotional and social disturbances and also knowledge of attitudes to fulfilment of the obligations and treatment program.

In Institute for execution of punishments Hrnčiarovce nad Parnou, there study the condemned included in the differential group A. With these condemned, it is worked mainly on reducing of the negative impact of the execution of punishment on their personality and the offer of educational and leisure time activities within the conditions for the performance of the treatment program is created.

The department of the execution of punishment provides education of the condemned men in the following areas:

- fulfilment of the compulsory basic education by the condemned juveniles during execution of punishment in accordance with Education Act
- training of the condemned at secondary school in institute in accordance with Education Act

In Institute for execution of punishments in Hrnčiarovce nad Parnou, the condemned are currently allowed to increase their educational level by completing various forms of education in general education area, in the area of social studies, law, civil education and in the area of professional/vocational education.

The condemned were informed about educational opportunities upon their arrival to the institute through offer list of the cultural and awareness-raising activities, which contained the actual offer of training courses and activities, as well as through actual announcements distributed to each unit. For the successful continuance of the education, the timetable of the educational activities has been elaborated. This timetable has been adapted to the work placement of the condemned, to their ability to participate in the lessons in full and to spatial possibilities as well. Lessons are carried out in the premises of the education centre. In teaching process, textbooks and methodical aids are used. These are provided by Archbishop Paul Jantusch’s secondary grammar school in Trnava, Secondary automobile school, Secondary vocational school of trade and services

in Trnava, as well as library for the condemned. The lessons are provided by the teachers of the department of the execution of punishment, the prison chaplain, lecturers of civil association “Asociácia právnych kliník” (“Association of legal clinics”), respectively law students of the Law Faculty of Trnava University, teachers of Secondary automobile school, teachers of Secondary vocational school of trade and services in Trnava and teachers of Archbishop Paul Jantausch’s secondary grammar school in Trnava.

3.1 Archbishop Paul Jantausch’s secondary grammar school in Trnava

On 22 September 2009, there was the grand opening of the first year of full-time studies in the academic year 2009/2010, in the field of study 7902 5 secondary grammar school in the detached class of the Archbishop Paul Jantausch’s secondary grammar school in Trnava, established in Institute for execution of punishments in Hrnčiarovce nad Parnou, in order to help the condemned to return into normal life after their release. Education is conducted in the form of full-time study, by establishment of the detached class. It is a four-year general secondary education study, field of study: grammar school. The reward for the successful completion of high school studies was the participation of the graduates at a ceremony where the condemned got their certificates (high school diplomas) in front of their family members in Institute for execution of punishments in Hrnčiarovce nad Parnou.

3.2 Secondary automobile school

In cooperation with Secondary automobile school, a training course for completion of basic education was carried out during the school year 2015/2016. The prerequisite is that the graduates will be involved in further education in the local institute. The condemned have the opportunity to study a three-year study completed with the final examination and gaining of a vocational certificate. After reviewing of the requirements for the organization of teaching in terms of personnel, material, technical and spatial requirements, institute recommends to carry out secondary professional/vocational education of the condemned in three-year study 2464 H machine engineer in the external evening form of study during school year 2016/2017.

Secondary professional/vocational school is preparing a course for adult condemned for the completion of basic education for the school year 2016/2017.

3.3 Secondary vocational school of trade and services in Trnava

Secondary vocational school of trade and services at Lomonosová Street in Trnava, provides education in the following fields: Cook, Painter and Combined branch – plumber – carpenter:

3.4 Other forms of education

During the school year 2015/2016, department of the execution of punishment carried out training courses and educational programs in general education area, social studies, legislation and civil education. In premises of institutional chapel of M.M. Kolbe, Religion and Bible school course was conducted.

Offer of educational courses and activities includes “general-education area” with the Course for illiterate and Interest-instructive-educational courses like Conversational Slovak language course for condemned foreigners, Conversational English language course for beginners, Training program in the area of doctrine of the church „Religion“, Training program in the area of doctrine of the church – education in the Old Testament and the New Testament: „Bible School“(determined also for the condemned who are atheists) and the “area of social studies, legislation and civil education, Education program in the area of legal education “*Právo na každý deň*” (“*Right for every day*”)” where the condemned had the opportunity to attend a training program in the field of legal education. This training program was conducted in the institute from 2002 to 2007 in cooperation with the civil association „Občan a demokracia“ (“Citizen and democracy”) and since the school year 2007/2008, the education activity entitled “*Právo na každý deň*” (“Right for every day“) has been organized in cooperation with civil association „Asociácia právnych kliník“ (“Association of legal clinics”). The course has been conducted in two cycles from October to December 2015 and from March to April 2016. The aim of this project is to increase legal awareness of the condemned in the execution of their punishment and thus, to help them with the integration into society after release, as well as to eliminate the mutual prejudices between the condemned and the other part of society. A characteristic feature of the education program of the condemned is the way in which the condemned gained the information about the law. The law is taught by the interactive methods such as role playing, discussion about a specific topics, as well as painting and pantomime. Education of the condemned was led by four students of Law Faculty of Trnava University, who had passed through relevant training under the guidance of a lawyer. After completion of a training program, the condemned will get certificate of the course attendance.

Institute is interested in continuing in the implementation of the training program in two cycles: from October to December 2016 and from March to May 2017.

3.5 The objectives of education of the condemned in the institute in the school year 2016/2017

Department of the execution of the punishment will ensure the education of the condemned men in the school year 2016/2017 in accordance with the Act on the execution of punishment, other relevant legislation including School Act, as well as internal regulation on education.

At weekly meetings, teachers of various branches periodically inform the condemned about the current offer of educational courses and activities that are planned to take place in the school year 2016/2017 in Institute for execution of punishments in Hrnčiarovce nad Parnou. On the basis of their interest, the teachers prepare lists of the condemned with whom teachers of the school centre subsequently conduct interviews. Education of the condemned is ensured by the department of the execution of the punishment. Institute for execution of punishments in Hrnčiarovce nad Parnou is going to cooperate with Archbishop Paul Jantausch's secondary grammar school in Trnava, Secondary automobile school, Secondary vocational school of trade and services in Trnava, with civil association „Asociácia právnych kliník“ („Association of legal clinics“), Primary school with preschool in Hrnčiarovce nad Parnou, Dormitory vocational school in Trnava and Regional School Office in Trnava.

The main objective is to ensure the fulfilment of the compulsory basic education for the condemned juveniles who will be transferred to the local institute for the execution of protective treatment during the school year 2016/2017 and the organization of the education aimed at obtaining of lower secondary education according to School Act, for the condemned who will show their interest in obtaining this level of education. Education is provided on the basis of the concluded contracts with Primary school and preschool in Hrnčiarovce nad Parnou and with Dormitory vocational school in Trnava. If it is necessary to ensure the fulfilment of the compulsory basic education of the condemned juveniles who embark the execution of their punishment in the institute in order to undergo protective treatment and will fulfil the conditions for inclusion in school for children and pupils with special educational needs, their education will be implemented on the basis of the agreement with the special elementary school in Trnava. Elementary school will ensure the fulfilment of the compulsory basic education by the establishment of the detached classes in the institutions if this is effective, and by the specific way of fulfilment of

the compulsory basic education in the form of individual training according to School Act, at least for 2 hours a week on the basis of the acceptance of the condemned – a pupil, by the primary school and on the basis of the acceptance of the individual training by the primary school. Elementary school will ensure the fulfilment of the compulsory basic education and ensures the organization of lower secondary. Complete secondary education of the condemned at secondary school – namely at Archbishop Paul Jantausch's secondary grammar school in Trnava in the school year 2016/2017, will be ensured in the form of full-time study in the established detached classes for the first, the second, the third and the fourth year.

4 RECOMMENDATIONS FOR PRACTICE

In the governmental program declaration, it is stated that the education has undeniably positive effects on the economy of the state, its economic growth, the development of the social dimension, quality of life, as well as increase of professional level. It also significantly helps in the solution of local unemployment, in boosting of the development activities of municipalities, small regions with a low level of territorial and qualification labour mobility.

In practice, we recommend:

- To inform the condemned about the current information and about the situation on the labour market and the current social events
- To pay special attention to education of the condemned, and thus to prepare them for the labour market, to improve their written and verbal skills
- To provide the condemned with the practical skills, such as training of CV writing, cover letter and the job application or training of the job interview with subsequent analysis of it
- To provide the condemned with the career counselling – to explain them how and where to look for work, to help them find their reserves and to work to improve them and vice versa, to pick up their skills and abilities, to advise them what job is suitable for them in connection with their education
- To increase legal awareness of the condemned, to teach them how to solve simple legal problems that they can encounter with in everyday life, to appreciate and respect for their rights and obligations (The importance of education during the execution of the punishment).
- To cooperate with the third sector - non-profit sector because postpenitentiary work is integral part of the resocialization of the condemned after their release and it should start already during the execution of punishment

because such a cooperation may be appropriate after release as initial help to orient themselves when they got released. (Grenčíková, Španková, 2012)

- To develop postpenitentiary care centres which would help the release condemned with solution of the problems which are connected to the return into society and which should ensure, in particular, help in finding housing and employment.

CONCLUSION

Education is becoming a major challenge for the condemned to take the chance and move forward in the field of intellect and education and thus to get ready to meet requirements for today's post-modern era. The school facility in Institute for execution of punishments in Hrnčiarovce nad Parnou offers study options for those interested in general education and vocational studies. Study and personal influence of educators make a form of resocialization, which is essential for further personal growth. The aim of the study is not just to obtain a high school or vocational certificate, but new possibilities and opportunities to start a new, valuable life. The work of secondary schools involved in the educational process in the institute is of significant benefit for the whole society, which has an irreplaceable role in the education system of the condemned in Slovakia.

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SEVERE DISABILITY IN THE CONTEXT OF SOCIAL CARE AND SOCIAL SERVICES

Jaroslav Spodniak ¹

Abstract

Self-realization of severely disabled is limited by their abilities. There are two groups of people dealing with this issue. The first group are the people, who lost their health throughout life and find it difficult to cope with the new living situation. The second group are the people, who are faced with the situation since their birth.

KEY WORDS: Communally social services, individual effort

INTRODUCTION

In an optimal situation, a person in need of social services remain in their own environment and support comes after him in his home. Uses his ideas and plans about his life, he works with relatives, neighbors, all the places in the community that affected the least limiting active life of a person with a disability and their families. Such services are called community-based services and allow people with disabilities to be responsible for your life. At the same time creating opportunities for families and communities to learn to accept otherness as part of its development in order to learn to take responsibility for the welfare of all its citizens and to learn how to create opportunities for active participation of all its members. Such an opportunity only occurs when people with disabilities and unfavorable social situation remain in the community. This is the best way to acquire new skills and new attitudes to these citizens. Communities should create as many opportunities to be able to people with disabilities to engage in normal activities and do not have the services for download. However, they need optimal support field social workers.

1 Determinations terms of the topic

It will need to take responsibility in villages and towns, create a network of field workers to municipalities and non-profit organizations in order to address the adverse social situation where there is a search for places and collaborators that the proposed solutions were realized. It will not be an easy process, as in the villages of the apparent lack of human resources and community gave up, and relinquishing

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powers to the State. User services It is a citizen, under the law on social services are entitled to social services and who has the right to choose the appropriate form and operators of social services. So it is a man who recognizes the right to support by his ideas and not be in a position gratitude or dependency.“

1, Inclusion Citizens using social services live, learn, work at the site, which is normal given the age and activity of the citizens at home. Community Care support him in compensating for disability or unfavorable social situation so that the activities in your community can participate as an active member, that is, in the family, at school, in vocational training, at work, in housing, during leisure time, to develop interests and taking rest.

2, Earmarking (segregation) Citizen that nourish social services is the removal from the place where he lived, in the device specifically for a certain group of the population (according to the type of disability or social situation), where he provided services and activities. He lives so people who also have a disability, all the services and activities provided paid staff facilities. Contacts with relatives and local residents are limited.

3, Community Care Community Care act in common places where citizens - users of social services operate. They are encouraging them on the basis of individual processed objectives and plans so as to live their lives according to their wishes.

4, Individual approach Everyone has their strengths interested in any other area of life, he wants to implement in other spheres. In cooperation with relatives, friends and close people can be to map the needs, interests and abilities, and on this basis, the objectives to be implemented with the support of social services. Shall draw up a plan of action by which the service is provided over a specified time, the state will evaluate and determine the new target. The process is documented and regularly evaluated. It is obvious that despite the fact that people resemble their needs or are assigning a single category, solve their life situation may take place very different. Individual approach describes a method of implementation of social services for single man. Institutionalization services People with disabilities have the opportunity to use social services institution - social care home. They live there, he spent there, carrying out a certain (limited use of home) activity. The whole life of man takes place under one roof, the subculture of the institution with its rules, rituals, myths, stereotypes, regimes with an emphasis on keeping the institution running. Everyday social contacts are narrowed to roommates and workers. (EUROPE 2020). The device only limited use of community resources, supported exodus back to normal life. The facilities are handicapped people isolated from the rest of the population, do not have enough opportunities for a decent life. They have a very low level of

ambition to achieve their interests and desires, their life is artificially limiting. (EUROPE 2020). They do not know what you may wish, what it means to be useful to others. They shall be protected against the usual situations of life and opportunities have to be respected as full citizens. “

5, Deinstitutionalization of social services It is a political and social process of gradual change from institutional segregation and other equipment to independent living with support services in the community. Residents of social services homes for targeted training leave and supports the development and delivery of high-quality, targeted, effective, individualized social services in the community. Services are used for those citizens who previously lived in a facility, and also for those who have not yet social services in the place of residence and not due to their disability they are entitled to them. In addition to housing in the community social services, users have access to all public services, subject to certain conditions and for personal assistance. The process of de-institutionalization also means preventing institutionalization in the future, providing children and adults the opportunity to grow up in a family and later to live near them.

6, Quality of life The transition from institutional care to community-based support should be aimed at improving the quality of life for service users, therefore their overall life satisfaction, including emotional, social and physical aspects of life. The Institute is currently quality often seen as a fulfillment of the parameters set formula, such as the ratio of employees to the number of users living in or by the number of m² per person. Community support by contrast, focuses on the individual needs and wishes of users at their place of residence. Thanks to services based on community support are more likely to perceive an individual with all the needs and interests and are better placed to improve the quality of life of users of social services.

7, Social inclusion - Being in care institution means being away from home, often in a completely different city or region and have limited contact with the outside world, including family and friends. This excludes people, isolated and gives them the label of incompetent people and without interest. Community support seeks to ensure that people stayed at home to them creates the best opportunities for full inclusion in society. To support services in the community have been successful and are able to meet the basic and complex needs of the users, they are interlinked and must be linked to community life of the village (Act No. 448/2008 Coll. on social assistance) Legal conditions of life of people with disabilities Slovak Republic the assigned number of international conventions that define new approaches and measures in the treatment of people with disabilities.

2 The UN Convention on the Rights of Persons with Disabilities

The purpose of the Convention on the Rights of Persons with Disabilities are to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities and to promote respect for their inherent dignity. The Convention is based on the following principles:

- »Respect for inherent dignity, individual autonomy including the freedom of choice and independence of persons;
- »Non-discrimination;
- »Full and effective participation and inclusion in society;
- »Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity;
- »Equal Opportunities;
- »Availability;
- »Respect for the evolving capacities of children with disabilities and respect for the rights of children with disabilities to preserve their identities, which means in practice family life and education in mainstream schools ‘Undertakings in relation to people with disabilities arise also from Slovakia’s EU membership.’ (EUROPE 2020).

3 The process of transformation in DSS Slatinka pri Lučenci

“The process of transformation in DSS Slatinka pri Lučenci Building (now former) social care home was a neo-Gothic mansion built in 1856 and later building a training house. Both buildings are located on the premises with an area of about four hectares. At home on the social Slatinky starting services in 1951. It is one of the oldest institutions in Slovakia. In its early days it lived in the device up to 97 clients. In 2006, when he began to consider the transformation of the equipment in it there were 68 clients. Home during the 80s and 90s gradually formed and now provides social services for 51 disabled people aged from birth to the age of majority. Today, social services are provided in four buildings. In the process of transformation of former institutions - the castle, which is located five kilometers from the town of Liberty have so far 34 former clients of home move into smaller homes that are directly in Liberty. In 2008, the mansion into assisted living moved first six clients. This property is located in the city center, it is a house that is reconstructed in 2011, is built in the attic three single-room flats. Today, it is home to 10 former clients of the institution. Clients who live in assisted living, has quickly become accustomed to the new way of life and no major problems have begun to live much more independent way of life. Today,

this facility provides services only during the day. It's a big step up from the 24 hourly supervisor, who had in the DSS. 2010 a new building was moved in the other nine clients. This device yet provides DSS, but because customers who live here, have begun despite their disabilities in the natural social environment make great progress it is expected that in the course of 2013 it will be possible to pass even in this unit to less intensive service assisted living and gradually disposed of to greater accountability to clients. In 2012 we managed to move out of the mansion and 15 clients, which is to provide 24-hour care. They live in larger family villa with a capacity of 15 seats, which is in the midtown area of Liberty. In November 2012, finally we managed to close the original device - Manor House. On the lower Slatinky in Lučenec it remains live even 17 clients - in a family house, which is built in the area of the mansion. These are the clients who need a high level of support and who are dependent on a wheelchair. Founder and lead DSS plans to shift even those customers who remain live on the outskirts of the city, home to small-scale social services that will be part of the community. To date, only one DSS Slatinka manages assisted living and three devices that can be characterized as small-capacity DSS with 24-hour care. One of these devices is in transition to assisted living with limited care. Undergoing transformation device based on responsibly prepared plan and previous analyzes. Not prepared a financial model or secure funding for transformation, especially temporary dual operation of small capacity home, which gradually migrated clients and castle. Lacked the resources to finance the increased number of temporary employees, supervision and so on. At the beginning of the transformation were precisely quantified the cost of individual services or the cost of individual clients. "Information about recalculation of costs KS and IS client should thus be considered in 2008-2010 as illustrative. Up data for the years 2011 and 2012 represent the relevant costs comparison KS and IS. The cost of the UPB continue to be part of the budget Slatinka DSS equipment. To the charges further intensively screened founder budget cuts due to the crisis and systematic underreporting of funding provided services. The following table describes the development costs for each year of transformation: Overview DSS total expenditure does not include capital expenditures to provide 4 home as they were the property of the founder, Banská Bystrica.

Reconstruction costs and the necessary adjustments to four devices reached 176 625.65 euros. Changes that are happening in the device, however, is not just about moving clients from large institutions to smaller homes. Throughout the process, In particular, in order to alter social service itself. Of services that a person with a disability insulates the walls of the device and which makes it dependent on the services, the service that helps man find his potential and helps

him to support the most common way to live life. "In the equipment group work with clients replace individual work - every client has processed an individual development plan personality and has a designated contact person, where the relationship between customers and employees is based on partnership, t. j. create conditions for people with disabilities to live your life looking for and supported those who understand them, they trust them and let them take their personal limits determined by themselves. (Holúbková, S. Ďurana, R. et al., 2013)

We them on the road only accompany and support, " (Holúbková, S. Ďurana, R. et al., 2013 p. 30) said Denisa Nincová, director of the transformed facility. Key issues include the population own room cleaning, laundry of personal clothing, cooking, baking, shopping, but also professional activities. The staff assisted living, encourages them to be independent as much as possible. Interestingly, people who previously went to town with only a caregiver in the group will be walking separately for shopping and some of them even work. An important part of creating a new way of life is the integration into the community through jobs. Mina Angelika cleaned, Lacko and Rast'o help with horseback riding at a nearby farm. A very important part of the transformed facility is also to help clients exploit the opportunities in the city are, help them establish contacts with people outside the facility. The biggest stumbling block in the transformation by D. Nincovej just meant workers who have both not imagine another life for clients but also feared for their jobs. Therefore deinstitutionalization project included a number of courses for workers with foreign internships, during which they had the opportunity to convince yourself that there is another option, but people close to DSS. Clients living conditions have improved substantially compared to living in an institution. Nevertheless, the device is still only at the beginning of the road from institutions to community-based social services, where they are waiting for the next challenge. It will need to improve communication with city officials about housing options for those who do not need intensive social services, representatives of employers on career opportunities in the work process, get a lot of volunteers and collaborators to engage in cultural and social life in the city. As the de-institutionalization of people watching themselves Slatinky: »" My life has changed, I live more freely. The Constitution I was closed, we were locked every day and workers are afraid of us so that we ourselves never leave "says Angelika 41 year old young woman who survived closed in the institutional system of social services for more than 30 years. Angelika admits that when she moved to assisted living was worried. She did not know what lies ahead, the Institute was safe and did not know another world. In the new environment, the Angelika quickly orient and no major problems have learned to

handle all the responsibilities that belong to independent living. Today Angelika says it would be in a social care home never to return. Life as we live today with the constitutional no comparison. "The new life is indeed more responsibilities, must take care of itself, it does not advice. Angelika has had some experience of going to work. It is employed for it meant a lot. Although currently not working, but her dream is to find a job and also dreams of an independent life with her boyfriend. »At the time Laci lived in the Constitution, his job was sweeping the corridor in the castle. Monday to Friday, sweeping a long corridor. In assisted living lives Laci other, richer life. He learned to take care of himself and cares about his girlfriend and minutes, with whom he lived. His dream is to marry her. Like shopping, he is going to the city. It is very friendly and has so many friends. When Laci asking about his memories of life in the Constitution responds that he does not remember. On this subject he does not want to talk at all. »" The Constitution was boring, we never walked. I would like that even my friends who remained to live in an institution, they live differently. Workers in the Constitution forbade them to go with me to visit, I can not walk in them. Sometimes even angry when call them, "says Monika its fresh experience with the workers home, where she lived before. Monika came to the assisted living home, which to her behaving very defends. In assisted living has quickly grown accustomed, he has no problem taking care of themselves, learning how to control your temper. Monika has parents who really support it. She found a friend with whom to plan their future. The housing repeats the skills and knowledge they acquired at school, where he apprenticed for helping cook. Once he would like to work as a cook, but while working on managing their moodiness that you know work well and should maintain good relations with colleagues. »" I do not have a CV, I have lived all my life in institutions. My life begins only now, "said Bohus, new client assisted living when we upon his arrival wanted to find out something about his previous life. "(Holúbková et al. 2013) The process of de-institutionalization in Slatinky continues. A building Historical mansion waiting for buyers and new purpose of its use. "The Slovak Republic has committed itself to respect fundamental human rights and the EU accession to the forefront they began to make demands on the development of individual human needs. During socialism it ensures care for basic human needs. He provided, however, in the spirit of socialist ideology based on collectivization. System created especially preferred collective care for socially deprived children, disabled and elderly (HOLÚBKOVÁ, S. ĎURANA, R. et al., 2013 p. 20)

Collective training in this system suppressed individual needs, that it would have been. At the department preferred the needy people from the majority of the population, this group of citizens will be partially restricted their rights to

personal freedom, the possibility of self-determination and independence. If a child was born with disabilities, was the mother already in the health facilities offered to place such a child into the bathroom, it means that the child would grow up outside the family, with others equally affected persons, and in this period no emphasis on the individual needs of such child. People with disabilities were concentrated in social institutions outside the public at large, and so many people devoid of the knowledge nor the experience of living with a disabled citizens. The problem of non-acceptance of this population group are shown in the 90s of the 20th century, when the company began to be seen in the population and this group of citizens. Institutional care in collective institutions from the system shifts to survive this group of clients to live, that is not provided only basic necessities of life, living to a higher level. Live is to not only provide the basic needs to survive, but to create a social system of social relationships and contacts to the clients to ensure a full life, as far as possible, in a natural social environment, which is provided either in the family or in conditions that the family as close as possible. This approach was due to the fact that by the provision of material conditions in the institutional system was not secure a full and comprehensive development of the personality. It led to the trauma itself individual will be allocated to social protection, social was excluded, unable to adapt to the natural environment as well as unable to solve common life situations, has little adaptive to change and unable to adequately respond and motivated to solve their own problems. (OLAH, M. IGLIAROVA, B. 2015)

CONCLUSION

Deinstitutionalization process is very lengthy and laborious process. Severely disabled will have to redouble their efforts so that they were able to integrate into society as equal citizens. Its viability are forced to prove every day.

People who are dependent on help from other staff at DSS do not live an independent life. Deinstitutionalisation them to help slow steps to improve their skills so that they can in life to realize their potential in their favor and thus will try to secede. In the short term, it seems this goal unattainable, but just in SLATINKA at Lučenec this goal been achieved, although it took another five years, until managed to prepare clients for independent functioning in the home.

It should also be provided more training for social workers in social services so that they can continuously improve in his uneasy job, maximizing performance albeit at minimum wage. I firmly believe that the government in social services adequately compensated for their work.

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SOCIAL BUSINESS AS AN INSTRUMENT TO ELIMINATE SOCIAL INEQUALITIES AND SOURCE OF JOBS

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Abstract

Social businesses are relatively young phenomenon of modern society. Similar ideas have appeared in economic theories as the concept of social entrepreneurship, but as we know it today, it was developed in the second half of the 20th century. Social businesses are an instrument of employment policy. The article deals with social businesses as potential effects on the development of employment, social services, strengthening social inclusion and so on.

KEY WORDS: social business, employment, integration, employment

INTRODUCTION

Currently, social business as a way of labor integration of disadvantaged job seekers gains more popularity and interest as in professional and academic public so among the general public, either in the world or in our country.

The concept of social business is not a new idea as it might seem at the first moment, as elements of social business we can find in the historical development. With a changing society circumstances and needs have also changed and of this aspect the core of social businesses and views on the perception of social businesses have been shaped and changed. In other words, it is not a revolutionary new idea, but rather a newly created concept and implementation in the context of the 21st century.

Social business has today an increasing tendency throughout the world and each country accommodates it to its historical roots, its traditions, mentality and culture. Social business is also anchored in several European instruments, whereby rules of social business in some countries is different.

In Slovakia, social enterprise is seen as an instrument to promote employment and its strategic objective is to integrate people into employment. The most common form of social enterprise is social enterprise of a labor integration, ie business of the kind of WISE - Work Integration Social Enterprises.

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1 HISTORICAL CONTEXT OF THE DEVELOPMENT OF SOCIAL ENTERPRISES

Development and shaping of social business to some extent is determined by the political environment, which is signed by the fact that the development of social business is different on the American and European continent.

The concept of social business in the early 90s of the 20th century was enshrined in the USA. Its idea was a response to the unfavourable situation in the financing of non-profit associations and increasingly it was more difficult to raise funds from private and governmental donations, grants. Social enterprises are highly professional and have a business plan and business approach. North American context of social enterprise defines social enterprise as a working-profit revenue or strategy implemented through non-profit associations with the aim of ensuring income to support the charitable mission of the company. Compared to European perceptions of social enterprise, mutuality, selfhelp or factor of sustainability and environmental aspects are little typical for such enterprises (Dohnalová, 2006).

The European concept of social business tends to the exclusion of social responsibility of commercial entities. In Western Europe the social business in modern form has been known since the 90s of the last century. Its roots associated with the economic principle of solidarity can be traced back to the Middle Ages, such as guilds. Social business is linked in historical context especially with the co-operative movement of the 19th century. The first authentic cooperative farm named Rochdale Society of Equitable Pioneers was founded in 1844. As in England so in Europe similar co-operatives continued new ideas and old domestic traditions were spread. In Western Europe, co-operative responded particularly on unemployment and high prices, in Central Europe, the lack of capital and expensive loans. In the 80s of the 20th century a new concept of modern economics started to rise and in 1980 the Charter of the social economy in France was published. The charter refers to the European tradition of mutually supporting activities and solidarity. Its aim is to integrate social problems in the economy (Šťastná, 2016).

In 1991, the Italian Parliament passed a law that granted special status of social co-operatives, which were created in the first phase in response to weak or currently absent public services. In the European continental context, a social enterprise is linked on the basis of the socio-economic approach of co-operative, association and foundation. The primary attributes of social enterprise are to production of goods and services, a high degree of autonomy, entrepreneurial risk, a combination of paid staff and volunteers, community belonging, the right

of distribution is not based on ownership capital, setting objectives for the benefit of the community and nondistribution (Dohnalová et al., 2015).

1.1 The perception of social business and enterprises of work integration

Social business is business activity that is beneficial to society and the environment. It plays an important role in the local development and often creates job opportunities for individuals with disabilities, socially or culturally disadvantaged. The primary subject is a social enterprise which meets public interest objectives formulated in the basic documents (Matousek et al., 2013).

Social business and social enterprise belong to the third sector, known as the non-profit sector, voluntary and so on. They are borderline organizations situated on the border between the nonprofit sector and the market. They are created and developed on the basis of the concept of triple success namely economic, social and environmental. Social enterprise is a part of the social policy of the state seeking the inclusion and support of individuals who are disadvantaged in some way in the labor market.

Social enterprise integrating disadvantaged individuals in the labor market originates and develops on three primary concepts (Bednáriková, Francová, 2011):

- Social benefit - this includes employment and social inclusion of disadvantaged people in the labor market, participation of employees and members in the company's strategic direction, emphasis on the development of working competencies of disadvantaged employees and innovative approach and solution,
- economic benefit - potential profit is used for social enterprise development or the achievement of public welfare objectives, employees are supported in increasing the productivity of labor according to possibilities at their disposal and so on,
- environmental benefit - giving preference to meeting the needs of the local community, primarily the use of local resources, cooperation venture with local actors and so on.

Legislative regulation of social enterprise and its support of the employment of disadvantaged jobseekers, including conditions for the granting the social enterprise work integration, we find in Act. 5/2004 Coll. on employment services and on amending and supplementing certain acts, as amended (hereinafter „Employment Services Act“).

The concept of social enterprise is defined by Act no. 5/2004 Coll. Employment Services, which in § 50b sec. 1 point. a) it is described as „*a legal entity or natural person who employs employees who were before taking up employment disadvantaged job seekers in number; representing at least 30% of the total number of its employees.*“

According to OECD (2013) a social enterprise represents any private activity implemented in the public interest, organized in the context of business strategy, whose primary objective is not to make the maximum profit, but the economic and social objectives, and which is able to bring innovative solutions to problems of social exclusion and unemployment.

Social enterprises can be seen as autonomous economic entities whose primary objective is professional integration (either within the company itself or in ordinary enterprises) of people who have problems in the labor market. This integration is achieved by productive activity and personal support or through education, which aims to improvement of qualifications of employees. It is possible to draw from the above definition four starting ways of integration: temporary employment, creation of a permanent self-financed jobs, professional with funds and socialization through productive activity (Polák, Schinglerová, 2014). In the context of our current legislation (Act on Social Services) a social enterprise is focused solely on the creation of new jobs for disadvantaged job seekers and their sustainment. As we mentioned at the beginning, we speak mainly about integration social enterprises - they possess all the characteristics of a social enterprise. Integration in the title captures also other public benefit goals and they are employment and integration of socially excluded individuals.

Social enterprises provide public services and promote social cohesion. We believe that for social enterprises making profit it is equally important and at the same time increasing the public good, while various definitions of social enterprise emphasize different aspects.

1.2 The benefits of integration social enterprises

Work in one's life plays an important role, because it is important for the mental and social health. It can be described as a tool of self-fulfillment, and meaningful activity providing self-esteem and self-development.

It is much more advantageous for the state when it creates jobs for socially disadvantaged groups (long-term unemployed, the elderly, people with disabilities, those with low skills, etc.) and on that account that the state thus eliminates the expenses of the state budget (ie saving state resources) on these persons (health insurance, social insurance, social assistance benefits) and contributes

fully to help them integrate into society, get some social status. We can also talk about the positive effects on physical and mental state of the individual. Social networking relationships, learning about cultures, acceptance and respect for the values, the acquisition of certain social roles as part of staff and a sense of belonging can be seen as contribution. Furthermore, social business brings into business the ethical dimension, supports the community dimension of human life, helps to promote solidarity in society and brings together private, public and nonprofit sector.

Social business has the potential to act especially in the economic area – it includes the dimension of equality and inclusion. Linking of social inclusion and equality of opportunities are a condition of integration of excluded respectively vulnerable individuals into major society and help them to participate in solidarity.

CONCLUSION

Social business plays an important role in the local development and creates opportunities for people with disabilities, social or cultural disadvantage. Integration social enterprise fulfills public interest objectives - employment and social integration of people disadvantaged in the labor market. Social enterprises may be an option for socially disadvantaged citizens and intermediate stage of transition into the open labor market. They are specific in that way that they create the conditions that these individuals gain the knowledge and habits from the working area and then fully integrate into major society. In the employment of this target group, it is necessary to provide specific support according to their disadvantage.

There are 96 granted social businesses in Slovakia up to 26th October 2016 (ÚPSVAR SR, 2016). Social businesses draw legitimacy for example, from the priorities of the Strategy Europe 2020. Social enterprises are social as well as fundraising projects. We believe that in the coming years this type of enterprise will be, hence integrating social enterprises, a common form of business. The growth of enterprises of labor integration must be preceded by awareness as by non-state non-profit entities, so by public bodies and the general public. Problem respectively obstacle in the development of social enterprises in Slovakia we see in the limitations of financial resources and financial capital required for the establishment and development of these enterprises, as well as funding a narrow portfolio of financial tools make situation more difficult.

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THE SOCIAL WORKER AND HIS PLACE IN AN ELDERLY CARE FACILITY

Tomáš Bečár ¹

Abstract

The social worker and his knowledge are often derived from an interdisciplinary understanding of social work as well as psychological, philosophical, ethical, sociological, legal, economic, political and various other approaches. In order for the social worker to conduct his work on a high level, there has to be a knowledge about the specific society, a thorough conception of its development, as well as a personal opinion about its development trends. He has to be well-versed in international documents and conventions, which were accepted by the Slovak Republic and are the basis of society and the whole web of care for a person. Social work and social policy has an important place in society and therefore the social worker has to know his roles and perspective, as well as to showcase a professional level of communication, whether it is with a group or with an individual.

KEY WORDS: social worker, client, senior, ethics, elderly care facility

In the life of a person who has found himself in an unfavourable situation, social services are a kind of a phenomena, which fulfil two main functions: the 1st function is taking the burden of the family and the system of care for a client in an unfavourable social situation; the 2nd function is the providing of care and services in the area of alimentation, housing, cultural and hobby life, counselling and personal equipment of the recipient of social services. As Rehuš states, *“the main principle and goal of social care and healthcare for elderly people is to maintain them, for as long as possible, in their natural, family environment. This environment is, according to him, optimal and also a priority.”* (Rehuš, 2015) These days social services centres are attempting to modify and adjust life conditions in such a way, so that the client has a feeling of being close to how his life situation has been so far. Schavel says that *“social work is one of the most dynamically developing disciplines during the last century. We understand it as an applied scientific discipline and a professional activity of social workers, who through their systematic work help, accompany, support and empower individuals and social systems (families, groups, communities, institutions) to gain a sufficient level of social functioning and create positive social conditions to reach this goal.”* (Schavel-Mátel, 2013) According to Bočáková *“nowadays*

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the fact that the population is becoming older and that the number of elderly people is increasing resonates in society. The increasing amount of elderly people deepens the financial difficulty of the present system. The increase of costs will mostly be noticed by the healthcare connected to the care for the elderly. “ (Bočáková-Bečár, 2015) An important and somewhat decisive factor, are the people who by their work create the necessary values of requests from the recipients of social services. To simplify this we could say that the social worker is someone who does social work as an employment, profession. (Ferenčíková, 2014) The international federation of social workers states the conditions necessary to practice the profession of a social worker or social work.

The social worker has to have completed a 3-year education in the area of social work (gaining the title Bachelor of Social Work or a Masters education in the area of social work.)

- He has reached the minimum of 21 years of age
- Has an interest in lifelong learning
- Fulfills personality requirements: credibility, secrecy, moral integrity etc.
- Has general and professional knowledge and abilities (Levická, 2004)

Through his actions the social worker helps to improve the standard of living of the group, community or individual by contributing the necessary sources of information for the specific arisen solutions.

The action of the social worker contributes:

- to the improvement of social environment and social relationships
- leads the individual to a better stance towards life and social behaviour
- leads the individual to an improvement of his abilities to solve problems
- leads the individual towards an education of being responsible for his own social situation (Ružička, 2010)

1 THE SOCIAL WORKER

A social worker presents himself as a type of individual with the necessary knowledge and attributes where the following, such as the ability to work in a team, humanity, moral integrity and social feeling can't be forgotten. How this should present itself, is also stated in the Ethical codex, which includes the following requirements:

- respecting privacy
- respect and decency
- politeness
- moral integrity

- credibility
- responsibility
- justness

The most important and fundamental attribute of a social worker is humanity which manifests itself with the following signs:

- respect towards life
- eagerness to help
- interest in people and their problems and lives (Levická – Mrázová, 2004)

The initiative and dynamic should also be in the personality equipment of every social worker. In the last years social work has been focusing on the preventive actions and among these belong the search for clients, persons in need of help. A social worker without an initiative couldn't work in the sphere of prevention and he wouldn't search for new methodological approaches in his activities. Dynamicity and initiative are attributes that thus help to find possible solutions for the client's problems. The social worker is expected to adhere to requirements, such as the requirement of moral credit. Social conscience, social actions and social orientation are three different aspects of the orientation of the social worker on the problems of. However, we can't consider the term social conscience as equal to empathy. The situation in which the client finds himself permits the social worker to use an optimal form of communication and the appropriate level of help. The social worker has to bear in mind that help is only useful if:

- it is early and targets the issue
- reflects the individual needs of the client
- reflects the optimal measure of help

In the personality equipment of a social worker, moral integrity and consistency should be present. It is assumed that the social worker will accept all the principles of this profession, as for example the principle of social solidarity, the requirement of remaining discreet, the principle of equality and etc. For the praxis as such there's a special place for humour and optimism about life, which means that the social worker has a belief in the potential of the client and the possibility of a positive change, despite the perceiving of the situation. Humour should be of help to the social worker, so that he is able to get through the daily routine. This characteristic should also be used by the social worker towards himself. Through the sense of humour he should get through personal and professional problems more easily and maintain the belief and good attitude

even when he faces difficult problems. (Levická, 2004)

1.1 The language of a social worker

As a principal means of communication between a social worker and the client, the language should be as comprehensive as possible. When choosing linguistic means, the social worker has to take into account the language culture of the client. He can't express professionalism with foreign words, in order not to build a barrier in the relationship between himself and the client. The way of expressing of the social worker has to be clear, to the point and appropriated to the state of the client. There's also a great importance placed on articulation.

1.2 The ability to work in a team

This attribute is likewise part of the equipment of a social worker. He'll be continuously working with people who have a common goal, a common making, i.e. that the cooperation with other members contributes to the realisation of the goal.

2 PROFESSIONAL COMPETENCES OF A SOCIAL WORKER

Amongst the professional competences we can include the following:

2.1 The ability of instrumentalisation – the ability to use oneself as an instrument for work. The social worker will apply his skills in such a way, so as to benefit the client. He's expected to be engaged in the problems of his client, to be flexible, have personal experiences, to be open when expressing opinions and emotions and have an ability of hindsight over the problems. He has to, however, have the personal engagement under control, be cognitively self-distanced, which means that the social worker reflects upon his thoughts, actions and doesn't let himself be emotionally manipulated. Other requirements concerning the self-instrumentalisation of the social worker are:

- the ability to motivate, express understanding, praise and support not only strangers, but also those that he doesn't like
- the ability to tolerate actions he would have never accepted

The most important competence is the support of the client and leading him to become independent. The social worker helps the client and teaches him to be responsible for his life, to have control over his own actions, he eliminates behaviour that leads to conflict and realises his own rights. Communication and cooperation belong to the other required skills of a social worker. Communication

is in this work area a requirement of unceasing interaction with colleagues, clients or professionals. Verbal and non-verbal communication is one of the basic requirements for the profession. During communication the client expects that the social worker will:

- have an ability of being unbiased
- objectively evaluate information etc.
- present assertive behaviour
- have an ability to communicate on the linguistic level of the client
- have an empathic approach

2.2 Social competency – we can characterise this as an ability to comprehend certain social situations in an integrated connection with the historical development of society and find actualities which initiate problems for clients. Social competency cannot be gained without reflection, which is caused by the fact that actions depend on the conditions of society. The basis of maintaining and reaching competences is an active orientation on personal growth. The social worker has to be aware of the development of social work, its changes, the changes of clients and is able to control his own personal and professional growth. In order to handle situations early and professionally, he uses consultations with colleagues. It's important for him to continuously improve his competences by self-studying, where there has to be a part of a control mechanism.

3 THE ACTION OF A SOCIAL WORKER IN AN ELDERLY CARE FACILITY

In order to determine his action we will draw from the praxis performed in the care facility of a social worker. Every day the social worker is in contact with the inhabitants, he gives them advice, information and helps the client overcome difficult situations. Before receiving a client into a centre he processes and collects necessary information about the condition of his health, family relations, the social situation and alongside with the client he searches for the best solution. If the placement in the facility is the best alternative, the social worker continues to search for necessary information and with his fellow employees creates an individual plan of developing his personality, program and activities. In the period of adaptation, social work has an exceptional role, since when the client gets used to the new environment, it helps him conquer the feeling of not being included from an active life and gets him used to new people. The social worker at the same time maintains contact with the family and external environment. Pavlovičová says that communication in the realm of working with a client is

an important dimension. Apart from communication, we include also interaction and perception. Under the term **interaction** we understand the organisation of communal activities, communal engagements, cooperation, working together, and help from both sides. **Perception** means a communal, mutual perceiving, getting to know and understand the participants of the relationship. The richer the understanding of others, the richer is the knowledge of oneself.

3.1 The social worker:

- participates in the organisation of cultural-social events for clients
- processes the agenda (records, social case histories, directives, reports)
- conducts the social inquiry of the client applying for a placement in the facility
- actively participates in the decision-making process of accepting inhabitants in the facility

The main role of the social worker is to provide quality care in all aspects and the development of personality for a person who lives in the facility.

The work of a social worker comprises of:

- the distraction of the client from melancholic states (sports games, general knowledge contests, dances)
- recommending and monitoring for the individual analysis of inhabitants
- making active the various interests that clients had in their natural environment
- having discussions about current topics
- practicing breathing techniques
- practicing relaxation techniques
- going on walks with clients
- creating socio-therapeutic groups with the intention to bring about positive attitude, group communication and to practice communal reading sessions. The social worker is interested about the environment of clients through the right decoration of public rooms, he escorts the clients to specialised doctor's appointments and continuously increases his professional capability. He conducts group or individual work with clients.

3.2 Individual work is based on an individual approach to each inhabitant. By using re-diagnosis and diagnosis, the social worker discovers abilities, needs and possibilities and based on this information he comes up with an individual plan of development for every client. He takes into account their state of health, intellectual and social options. The goal is to support the mental and physical condition of the client, include him into a variety of activities and to maintain his

contact with the social environment.

3.3 Group work maintains collective cohesion, cooperation, communication and mutual tolerance of clients. It develops their thinking and fulfils their free time. Clients have the opportunity to attend group meetings, where they collectively discuss themes according to their interests and choice and together they search for possible solutions. From the perspective of praxis, social work focuses on inequalities and barriers that are present in society. It reacts to incidents and crises, as well as personal and social problems. Social work utilises techniques and activities in accordance with the focus on an individual persons and their environment. The theory of social work is not only connected with praxis, but is also determined by it. A bigger success would be the inspiring of critical, reflective praxis of social workers. However, the biggest success would be if social workers attempted to theorise their own praxis. (Levická,2004)

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IMPORTANCE OF THE FAMILY AND HOME ENVIRONMENT IN THE LIFE OF AN ELDERLY PERSON

Jaroslav Vendžúr ¹

Abstract

The ability and opportunity to take care of the parents, grandparents will be reflected just in the period of an old age, which is often linked with the loss of senior's self-sufficiency. We point out to the strength of an intergenerational bond, intergenerational relations. The paper highlight the need for emotional background in the context of intergenerational relations. We mention the need of social services. Also we think about the flexibility and if social services respond flexibly enough to the specific needs of elderly people. Attention will be paid to such features as family cohesiveness and quality of interpersonal and intergenerational relationships. Further, we underline the principle of subsidiarity, and also we will be interested in the perception of elderly people by young generation.

KEY WORDS: Family. Home care. Intergenerational relations. Interpersonal relationships. Senior. Self-sufficiency.

INTRODUCTION

Možný (2002) writes about the transition of a modern family to a postmodern, which means that the family is transformed into a new form. Children are more dependent on the media than on their parents.

Positive values of life are gradually disappearing from family life. Traditional values are on the decline and being replaced by egoism and individualism.

1 HOMELESSNESS

Within the framework of family policy, says Gabura (2012), are selected risk types of families that require a specific approach:

- Families with disabled member – to create conditions for the full family life for families with a disabled family member.
- Families with several children – support parenting, improve the conditions of parents who choose to care for children and family.
- Families of the seniors– sensitivity of the problems of the senior family and

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the problem of the family politics.

- Single parent families – economic and social support
- Young families – to create conditions for living, parenting, strengthening services for young families

The state should to a greater extent promote the development of services for families. Our company was inspired by the Blue Book on the activities of the UN family in 1995, it requires the Member States to develop policies favourable to families. It also inspired the content of the Charter of Rights of the Family, which was declared by the Holy See in 1983.

It declares the right of the family to help in crisis situations and the family has the right to political, economic, legal, cultural, social and financial protection. With regard to families, family policy has significant support in the Universal Declaration of Human Rights, the International Convention on Human Rights and in other international instruments. Regarding family policy in Slovakia, the basic document of the State Family Policy, adopted by the Government in 1997, applies and was updated in 2004. In one of the key principles in this policy is the view that the family has began to consider the principle of subsidiarity. Thus, the role of the state is not to directly interfere with different measures in family life, but rather to create the legal, economic and institutional conditions for the effective functioning of Slovak families.

The state should to a greater extent promote the development of services for families to make them simpler, and facilitate the execution of its functions.

An important part to play in this is a communal family as it is more effective than the state and can take into account the specifics of regions and municipalities, in terms of housing, family services and also to create conditions for active use of free time.

Duková et al. (2013) point out that the main aim of social and family policy is to create decent living conditions and ensuring equal opportunities for all family members. The focus must be on the overall conditions of social development to predict potential future development and prepare to face various economic and social risks.

The demographic development shows us that the number of the elderly people is constantly increasing. In addition to age, many seniors suffer from diseases, loneliness, empty nest syndrome and the need to care for them. Intergenerational bond strength and capabilities, the possibility to take care of their parents or grandparents will be reflected precisely in the period of old age. Old age is often associated with a decrease in self-sufficiency and the independence of seniors. The current family, writes Hrozenková (2008) is

characterized by the following features:

- *Decrease of the number of children in the family*
- *Reduced stability of marriages/unions*
- *The disintegration of multi-generation cohabitation*
- *Reduction in mortality*
- *Increased longevity*

All of the above reflect the increase of lonely seniors who lost their partner, or live alone. There is a tendency of the isolated existence of children and parents in order to maintain mutual contacts. The preference is independent living seniors with their own households, but close to the children and other relatives. It prefers less distance and more frequent contacts with senior family.

Regarding intergenerational relationships, one of the most important features is the emotional background. Serious situations occur when the health condition of the senior deteriorates and requires intensive care. Hegyi (2001) writes that the main question is the issue of health and social services, especially after 70 years of age and in the age group 80 years and older. We cannot generalize that the ageing process is not necessarily linked with the onset of immobility. Government policy is now delaying retirement causing people to work longer, and therefore it becomes difficult to care for their parents or grandparents.

Nowadays, not everyone is able to let his/her parents live with their adult children until they become totally dependent or helpless. Mostly seniors want to stay at home, so that the children can take care of them. Not every family can afford to pay for a minder due to lack of funds. Not everyone knows how to provide some medical care or look after your loved ones.

Hrozenská (2008) writes that it is necessary to combine alternative senior care depending on the help of another family member. Its means, not every one in family can provide medical care and treatment.

Hegyi (2001) refers to the objectives of home care seniors.

They are:

- *In home care to implement a precautionary measure to prevent diseases*
- *Seniors could remain at home, where they know their surroundings and are accustomed to being there*
- *To ensure continued adequate home care*
- *To provide adequate professional help and care for the dying*
- *To ensure that the home environment facilitates a healthy way of life*
- *To contribute to a better quality of life*

Furthermore, the author Hrozenská, Dvořáčková (2013) writes that the home environment and daily contact with the nearest person, has an irreplaceable role in the emotional, social and psychological support of the older person. This is particularly the case when his or her health is weakening, narrowing the social contacts and increasing dependence for help on others.

In the care of a senior, his/her family has an irreplaceable importance and also performs the following important functions:

- *Family is a source of information as general news, society and family news.*
- *Active participation of the extended family members to care for their elderly parents.*

A family with a care for an elderly person will not only learn nursing intervention, but also creates socially supportive environment, and emotional well-being of a senior's home safety. Also it leads the elderly person to a healthy lifestyle (Mlýnková, 2011). During ageing, there is a reassessment of independent life of the senior related to his or her physical health, vitality and mental health.

The senior degree of self-sufficiency is divided into categories:

- *A totally dependent senior*
- *A senior in old age partially self-sufficient*
- *A senior completely self-sufficient / a younger senior*

Of great importance in old age is familiar surroundings, social relationships and spirituality. Potašová (2004, p. 435) states that the intrinsic quality of human life, regardless of age is also influenced by how other people see it, perceive it, and are treated. Quality of life, writes Hrozenská (2008) can be described based on objectively measurable criteria and subjective measurable criteria.

Objectively measurable criteria include:

- *Material security*
- *Health condition*
- *Health care*
- *Social conditions*
- *Economic conditions*
- *Environmental conditions*

Subjective measurable criteria are:

- *Personal well being*
- *Satisfaction with life*
- *Meaningfulness of life*

Quality of life is very subjective. An individual perception of the quality of life represents different things to different people at different times.

The public often considers ageing as a physical matter. Physical appearance, says Hrozenková (2008), has never been honoured. The main source of respect is likely wealth and power and that the meaning of life is an important factor of quality of life. Hrozenková (2008) states that in terms of providing assistance to elderly/senior family members most carers are burdened women in the family, especially in middle age. Perhaps it stems from the fact that women have built stronger ties with their parents, they feel an obligation to take care of elderly, sick family members.

Bočáková (2015) highlights that the social status of seniors often depends on if a senior is reliant on himself/herself, has torn social ties, has a low income and/or deteriorating health. Many seniors are often isolated from society, whether for economic, social or health reasons.

A senior/member of a multigenerational family with the deterioration of his/her health is in a better position than an isolated older person. The elderly person living in single household is in increased risk. It is therefore necessary to target this group, assist seniors the mainly through field work, monitor and where necessary provide social services that can improve their life situation.

An important role here is to have social services, whether in the field of healthcare, medical staff from agency, home nursing care, social workers, or a professional nurse from the agency home care services. The need for social assistance is based on the client's level of self-sufficiency, of his/her economic situation, the availability of social and health services.

Balogová (2009) writes that when working with an older person who lives in the home a social worker draws up plans of care and treatment. This is regularly evaluated and adjusted to the current needs of the client.

Public perception of old age is often viewed as a period of human life which can no longer bring anything new.

Bočáková (2015) refers to social policy in the programs of political parties, aimed at seniors. She describes social packages of Prime Minister Robert Fico, which draws attention to the increasing standard of living for the elderly, payment of the Christmas allowance, free travel for seniors and other benefits. Many young people think in the sense that older people and seniors no longer have something to contribute the society.

Kalvach (2006) writes that elderly people are often beneficial to their families, society and to the economy. Also, some young people see the economic burden of old age. There are other forms of ageism, i.e. discrimination based on age.

Seniors in modern societies are often accused of being the cause of the rise in the medical-social systems.

Hrozenká (2008) states that the total psychological stress associated with caring for an elderly family member is the main reason for the placing of a senior in institutional care. Older people, who for various reasons cannot or do not want to stay at home in their own households are more mobile, largely self-sufficient, they can be placed in homes or in day care homes. Seniors predominantly or fully dependent to help, but not requiring continuous medical and nursing care, may be placed in a facility for the elderly. Currently an irreplaceable role in society includes social services.

Kubičková (2013) writes that the new philosophy of social services is seeking more versatility – providing other activities, respectively, combining different social services and enabling clients through individual development plans.

Users are interested in what they can expect from social services. An important part to senior care is to have representatives of the civil sector, social associations and self-help and volunteer groups. These vary between those who lay down rules for the provision of social services, and also between users.

As stated Tokárová (2007) the media are the great importance that observe and evaluate social services. The media inform the general public about social services, how to set them up, use, and the quality of them. Educational organizations are also important in dealing with issues of social services, they educate professionals and experts on activity in social services.

According to Law 448/2008 on social services, social services can be provided as either outpatient, field work and other forms (by phone or by using telecommunications technology).

Key stakeholders in social services are:

- The Ministry of Labour, Social Affairs and Family of SR: draw up National development priorities of social services
- Regional government – higher territorial units: draw up the Concept of development of social services in the region
- Local government (municipalities) draws up a community plan of social services

Olah and col. (2013) state that the beneficiaries of social services can be natural persons – from the perspective of a citizen of the Slovak Republic, foreign citizen, Slovak citizen living abroad, foreign citizen family member,

Providers of social services is:

- Community
- Legal entity established by the municipality

- Or community based VUC legal entity established by VUC, or founded regional units, namely public social service providers, that is non-public social service providers

In the area of social services to the forefront is the principle of subsidiarity, which means that the financing of social services should be involved in the family (Haškovcová, 2010).

Today, we talk about decentralization, de-institutionalization of social services. The aim is that an elderly person is to remain at home as long as possible. In the area of social services how to fund social services and also the quality of social services, constantly resonates

CONCLUSION

In our society the family is still considered to be the most important article of the natural of human relations, the basis for the optimal functioning of the state. Family is a means of continuity from the past through the present to the future, providing a link between generations, creating irreplaceable environments for all members, but especially for children. The strategies of society and professionals working with families should focus primarily on human development and the formulation of family-sensitive policies. The policies should also oriented to monitor the impact of other decisions on the social structures for all family members. Currently, the focus on the issue of social services is improving its quality and availability. Where possible, it is necessary to keep an elderly person at home.

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CURRENT NEEDS AND ACTUAL FULFILMENT IN SOCIAL SERVICES – SIGN LANGUAGE INTERPRETATION

Marian Marák¹

Abstract

This paper describes sign language interpreting services in the context of the Social Services Act and other legislation designed to improve the quality of life of people with disabilities. It explains the possibilities for a targeted group to receive sign language interpretation and to use it. The methodology is based on applicability of the law in practice and data on service use from data in higher territorial units and research on the use of these services in Slovakia's different regions. The article also offers suggestions for improving the social service's current state, something quite necessary for people with hearing loss or disabilities.

KEY WORDS: Sign language interpretation, hearing disabilities, social services,

1 HEARING DISABILITIES AND COMMUNICATIONS BARRIERS

It is estimated that about 400,000 people in Slovakia have various hearing disabilities. Tarciová (2014) explains this figure on the basis of data provided by WHO, which mentions that in the world about roughly one in 1,000 newborns is deaf and 3-6 are hard of hearing. The author also writes that WHO has calculated about 7-8% of the entire population with hearing disabilities. In Slovakia, of 50,000 born each year there are 50 children born deaf and 150-300 who have impaired hearing. Although this impairment is not visible, it still remains very serious.

It means not just they do not hear. The consequences arising therefrom which were compiled by Slowik (2007) for people with hearing disabilities include communication barriers, a deficit in navigation skills, the mental burden and limiting the network of social contacts, while they have an adverse impact on the development of speech-based thinking. And of course there is also the impact on speech itself. Tarciová (2014) describes the consequences of the disability based on the problems it causes in different areas, for instance linguistic, cognitive, educational, social, emotional and employment difficulties. Summing up all the consequences, we can say, although it would be a little truncated, that these stem from information and communication barriers. The uninitiated might say that if information cannot be obtained from hearing, it is possible to use other means

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such as sight or written text. But even these are not in practice options that would eliminate the problem. Even Komorná (in Beňo 2014) believes most of the general public with no direct personal experience of the hearing impaired are convinced that those with hearing impairments are indeed not able to perceive sounds, but their situation is not so bad because to talk to them it is enough to write down what needs to be said because they can read everything and accordingly write everything. Yet it is not all that simple. For the hearing impaired born to parents also hearing impaired, Slovak is a foreign language. Likewise, anyone born to hearing parents has still lost the pre-lingual hearing that comes prior to speech development, so they face the same difficulties in communicating and being understood as Slovaks able to hear experience with English or French. Therefore, the belief that being able to write text is sufficient for the hearing impaired is just plain wrong. Ordinary Slovaks with a command of English at just an intermediate level are still not always comfortable with English text, even though they know most of the words. Therefore, it is necessary to look for other ways to communicate information.

2 CURRENT LEGISLATION TO REMOVE THE DISABILITY BARRIER IN INTERPRETATION AND COMMUNICATION FOR PEOPLE WITH HEARING DISABILITIES

The most awaited idea in social services to overcome the communications barrier is the use of sign language interpreters. Beňo (2014) has written about the creation by interpreters of a bridge between the worlds of the hearing and of the deaf. More specifically, legislation in Act 382/2004 on experts, interpreters and translators specifically provides for interpretation. It is characterised as specialised training carried out for the needs of a sponsor. This law naturally considers sign language interpreters to be interpreters, too. It also defines the activities of articulate interpreters whose specific skills, abilities and experience allow under regulated conditions for one-way or two-way communication for the hearing impaired who do not know sign language and cannot hear spoken language. The law also does not leave out interpreters for the deaf and blind. In mentioning sign language interpreters, the particular act refers to another law which is significant for people with hearing disabilities. This is Act 149/1995 on sign language for the hearing impaired. For more than 20 years the law has provided them with the right to sign language interpreters when addressing basic life issues with government authorities. It guarantees them the right to education in sign language, which is currently affirmed in the Education Act No. 245/2008, and also the right to be informed through sign language in television broadcasts

by public institutions, libraries and video archives. This is partly fulfilled in Act 308/2000 on broadcasting and retransmission. Another law which refers to the provision of services by sign language interpreters is the Social Services Act No. 448/2008. Along with Act 447/2008 Coll. on severe disability premiums, as amended, it provides for the use of interpreter services as a social service for the disabled. It also describes rules for using interpreter services which Act 448/2008 cannot require if it is used as part of the helpdesk operations or nursing care services provided in Act 447/2008

In addition to the laws earlier mentioned, there are various other critical documents that influence the government's social policy on the hearing impaired. One of the most important is the United Nations Convention on the Rights of Persons with Disabilities (henceforth "UN Convention"). According to the European Commission (2016), the first ever comprehensive instrument for human rights which the EU has ratified as a whole. It was signed by all 27 Member States and has been ratified by 16. The Convention sets out minimum standards for protecting and securing the political, civil, social and economic rights of people with disabilities. The Convention entered into force in June 2010. It aims to protect and secure for all people with disabilities equal enjoyment of all human rights and fundamental human freedoms. To be more than just nice words and yet also an unenforceable law, the National Council of the Slovak Republic has in goodwill given its explicit consent to the Optional Protocol, which the President of the Slovak Republic ratified on 28 April 2010. This instrument is expressed in the consent given and decision taken to consider it an international treaty which, under Art. 7 (5) of the Constitution of the Slovak Republic, has precedence over laws.

However in this step, the Convention obliges States to ensure the disabled are accommodated in drafting legislation and in legislative changes. One such conceptual document is the National Programme for Development of Living Conditions of Persons with Disabilities for the years 2014-2020 (henceforth "National Programme"). To generate this document, the significant Council Directive 2000/78/EC was employed, whose objective has been to establish a general framework to combat discrimination (Národný program, 2016) and, of course, to enforce the UN Convention, too.

The National Programme is divided into several areas and articles that themselves include raising awareness about the exercising by the disabled of their rights, accessibility to facilities and services, equal treatment and protection against discrimination. There is also an article which should provide independent living and inclusion in society. Increased attention is being paid to work and employment, too. Special areas are dedicated to education, health, women's and

children's rights and also monitoring and the exercise of these rights. It is an important part of coordination and international cooperation in following-up on the National Programme.

Two articles mention plans relating to persons with hearing impairments and interpretation in the National Programme, for example the article on habilitation and rehabilitation. There is written mention about possibilities for personal development through lip reading, teaching sign language, learning how to communicate to people with hearing loss and social communication. But it is quite vague about how to reckon the options. No specific steps are described for improving the situation. But it does say you can follow your own path to improvement. For example, the Faculty of Social Sciences at St. Cyril and Methodius University in Trnava is participating in the National Program even with no intention associated with it, since in social services and counselling it teaches Communication with the Hearing Impaired as a subject. Implementing the National Program is only a secondary outcome of the faculty's agenda to improve the quality of education and enrich the profile of its graduates.

The National Programme includes a plan for concrete activities. It has several draft measures to improve the situation of people with hearing loss. Most of them should be continually met over the time horizon until 2020. For instance, one involves "visual display of public passenger transport" and another about making election speeches and discussions with the hearing impaired accessible through subtitles or sign language interpretation. And yet another task to "promote initiatives aimed at making audio-visual works, theatrical performances and art exhibitions available to people with visual and hearing impairments.

Now it is 2016 and there is concern about whether these measures are going to be implemented on time if the pace will be the same as it has been. Moreover, it appears that even now the deadlines are difficult to meet. There is one particularly significant draft proposal for the hearing impaired. This concerns ensuring access to the 112 emergency line. The hearing impaired cannot currently contact anyone on this phone line. Therefore, it is necessary to include an SMS option. Responsibility for fulfilment was taken over by the Interior Ministry and a timetable for such action by 2015 was set. Regrettably, such a contact with the emergency line remains unavailable. "A degree of independence, self-sufficiency in meeting needs and active participation in society are important aspects of the natural way of living even for individuals with a certain degree of health restrictions," (Slovák,2016) The inability to communicate in other ways than just voice services appears to discriminate against people with hearing loss.

All these promises are made, but they are being implemented very slowly. And this slow pace has also been observed by the UN Committee that monitors the actions of our government. They have sent our recommendations (Concluding observations, 2016) that need to be put in practice by 2020. There were 88 of them. They cover various areas whose status still fail to comply with the declaration our government made to fulfil the Convention's articles. The UN Committee expressed its displeasure, for example, over the lack of registered sign language interpreters and the inadequate degree of sign language interpretation on public television, in the courts and in public services. It cited in particular education, health and social care. Based on this concern, the UN has recommended that the contracting State significantly increase the number of qualified sign language interpreters who would provide services in public broadcasting, education, the courts and other public services.

3 TRUE PROVISION OF SERVICES

Interpreters are scarce in Slovakia. This is also evidenced in a survey conducted for the conference on the hearing impaired which was held by the authors of this paper, Roman Vojtechovský, Michal Hefty and Angela Hefty. Vojtechovský (2016) states therein that Slovakia has 15 registered and three articulate interpreters. There were 11 sworn interpreters on record, but only 10 after a recent period change. This is a really shocking number when you consider interpreters should be offering their services anywhere under the National Programme and the UN Convention.

In presenting the paper, the authors also offered a table that spoke about using the services of a registered interpreter. This is a services provided by the higher territorial units under the Social Services Act No. 448/2008 Coll.

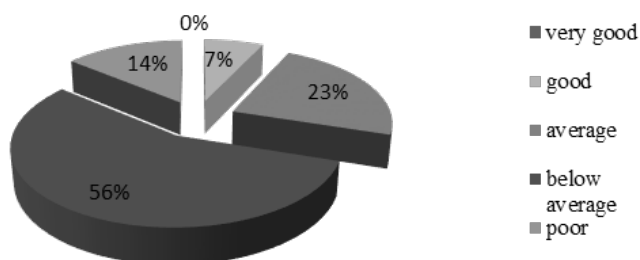
Table 1: Number of interpreting applications

VÚC	2012	2013	2014	2015
Tnava	20	30	53	83
Bratislava	0	0	0	0
Žilina	20	29	34	26
Nitra	14	14	14	15
B. Bystrica	13	13	14	11
Prešov	26	26	26	24
Košice	86	82	75	50

Source: Vojtechovský (2016)

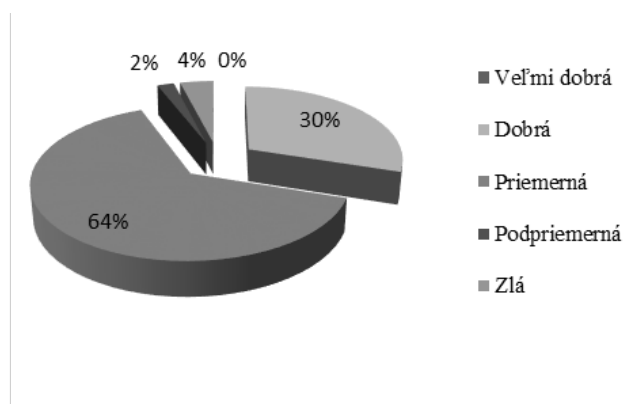
If you browse the very low, inadequate numbers, the table makes it clear that all regions have reported in recent years a relatively stable curve in the use of interpreting services. The question is whether those numbers talk about the real needs of the hearing impaired and the real need to use an interpreter. What is surprising is the Bratislava Self-governing Region's lack of expressed interest in the service despite having it available. The higher territorial unit has failed to register any applicants for this type of social service. A question intrudes about the relevance of sign language interpreting in Act 448/2008 Coll. when even the capital of Slovakia has no interest in the service. An explanation of this status is provided in Act 447/2008 Coll. on severe disability premiums, as amended. This law provides for the possible use of an interpreter within the realm of personal assistance. It could be said that the state caters to the deaf and they have even guaranteed them two options for interpretation in Act 149/1995 Coll. on sign language for the hearing impaired, as amended. The problem is that Sec. 44 of Act 448/2008 allows only one service to be used. Anyone that needs interpreting services can only choose one option: an interpreting service, interpretation by a personal assistant or interpreting as part of nursing services. No combination of these is allowed. Lepotová (2016), who has many years of personal experience as an interpreter, considers the legal limit to be unjustified. In her opinion, the ban on a hearing impaired person using one service if he or she has been registered for another is pointless. "A person with a hearing disability must have at any moment the option to decide which service to use, based on his or her critical needs. This is the opinion of the hearing impaired and something that should be respected since every life situation is unique and we do not know when it can happen. Anyone with a hearing disability knows best when he or she should have personal assistance services and when the services of a sign language interpreter are needed" (Lepotová, Ferko, 2012).

The benefit of these words is also seen in Table 1 above, which clearly indicates personal assistance to be the chosen method of interpretation. Blanket exclusion of one service over another thus creates the impression that interpreting services are not necessary. A survey published by Beňo (2014) also discusses the selection the hearing impaired would make if they had to choose. The survey was done in Trnava Region. There were 54 respondents with various degrees of hearing disability. There were originally 92 involved, but the number dropped due to inadequate reading comprehension. 61% of the respondents were men and 39% women. For this paper, three graphs have been chosen to indicate the present state. Graph 1 illustrates the view on the ability of interpreting services in Slovakia. Respondents answered here to the question **“How do you evaluate the availability of sign language interpreting services in Slovakia?”**

Graph 1: Opinion on sign language interpreting services availability

Source: Beňo (2014)

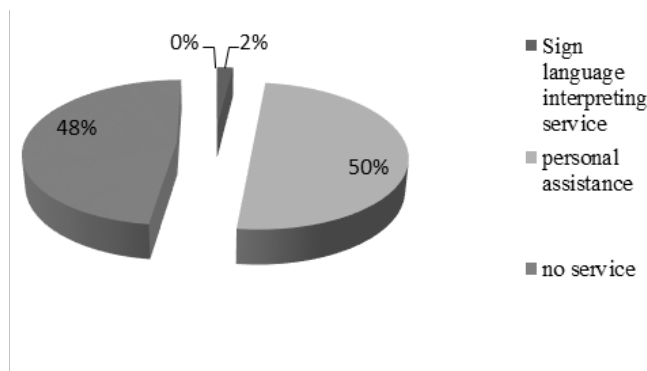
The graph shows no one answering in the questionnaire that the level of availability is very good. On the contrary, 56% of respondents said it was below average, 14% saw it as poor, 23% as average and only 7% expressed the availability of interpreting services as good. Regarding the question about the availability of personal assistance service, the respondents' answers were different. It can be seen on Graph 2 that only 2% thought it was below average as compared to interpreting services (56%). 64% of those asked considered it to be average, 30% good and 4% bad. As was the case with interpreting services, nobody indicated the availability of personal assistance as being very good.

Graph 2: Availability of personal assistance

Source: Beňo (2014)

partially explains the answers, illustrating the options for registration of services.

Graph 3 What service have you registered for?



Source: Beňo (2014)

The graph indicates that in the higher territorial unit only 2% requested an interpreting service, while 50% asked for personal assistance. 48% of respondents asked for no service at all. The survey let respondents comment on this choice in additional explanations. Those who had not applied for any service were relying on close relatives. These were mostly hearing family members who would interpret for them if needed and are handling many things for them. The preference for personal assistance over interpreting services can be explained by personal assistance being much easier in case of need than looking for an interpreter, which is naturally understandable when considering the number of sign language interpreters in Slovakia earlier mentioned.

CONCLUSION

In closing, it can be noted that not just competent people responsible for meeting either the National Program or the UN Convention lie at the heart of the objective state of interpreting services in Slovakia. Even the hearing impaired themselves are endeavouring to change the situation for the better. Organising different events to deal with current issues helps draw attention to matters that need to be addressed. For example, at the conference for people with hearing disabilities, a vision was presented by Jaroslav Cehlárik, director of the Trnava Association of the Deaf and Hearing Impaired (TASPO). Based on his experience managing an interpreting agency financed by the Trnava Self-Governing Region, he described how in future to solve the problems related to the lack of interpreters

in Slovakia. He also spoke of the need to educate and train young interpreters. (Cehlárik, 2016) He mentioned alongside Lepotová (2012) the absence of "sign language interpreter" as an occupation. This issue also highlights the lack of research into sign language and no existing codification of it. All of this leads to the inability to amend the Sign Language Act, the inability to make changes in laws covering sign language interpreters (employment of them, compensation, adding simultaneous transcription, etc.) and the subsequent inability to be trained. This also contributes to the lack of interpreters and the difficulty in meeting national obligations not just to implement conventions and social concepts, but also to hearing impaired citizens themselves.

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FINANCIAL LITERACY AS AN IMPORTANT PART OF EDUCATION OF SENIORS

Jaroslava Pavelková – Milan Schavel¹

Abstract

The contribution is devoted to the issues of education in financial literacy as an important part of lifelong education of seniors. In the postmodern present society, people change their cautious approaches and attitudes to spending and saving with a tendency to rapid growth in the consumption of goods and the subsequent willingness to get into debt. Reckless spending and financial consequences for them are being exposed the older age categories, which are becoming an easy target for banking and non-banking institutions, because they suffer from lack of knowledge about financial products. For these reasons, it is necessary to act on the seniors' awareness in the area of socio-economic competence and educate them in basic knowledge and skills to manage their finances and avoid any risk of financial indebtedness, state insolvency, executions, distraint, etc.

KEY WORDS: Financial literacy, debt, seniors, socioeconomic competences, prevention

INTRODUCTION

The money belongs to our world and its role in it is just as problematic as the world itself. It is with it as with that mythical spear, which wounds, that give, can also heal alone (Simmel, 1997, s. 25). Money is a means (Jakeš a kol., 2011, p. 3), which pay for the goods, accept it, but we spend, so we ensure ourselves of their cycle. It performs its function as a form of property, though we buy and sell goods; it can express the value of what you can sell or buy. They express the proportion in which we can exchange one commodity for another, including an expression of our receivables (money that someone owes us) and liabilities (debts, loans).

On the basis of this reality is the art of handling their financial resources one of the necessary competencies of modern man. We talk about **Financial literacy**, skills, how appropriately, intelligently and economically manage our money. It is based on the file of basic competencies with manipulations of finances (Pavelková, 2012). Financial literacy, as stated in the Haro Financial Literacy (2011), is a decisive factor in terms of economic psychology, because its absence creates negative economic, social, psychological and other effects on man and his family. Be experienced in the issue of money is far more than to be able to count.

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1 FINANCIAL LITERACY

Financial literacy is a set of knowledge, skills and abilities required of a citizen to financially secure himself and his family in contemporary society and actively performing at market of financial products and services. Financially literate citizen is well versed in the issue of money and prices. He can responsibly manage your personal, family budget, including the management of financial assets and financial liabilities with respect to change life situation. Financial literacy is a specialized part of a wider economic literacy, which also includes e.g. the ability to obtain income, consider the impact of personal decisions on current and future income, the ability of decisions about spending.

An integral part of financial literacy are also essential aspects of macroeconomic and fiscal area, especially given that it significantly contributes to the financial resources of individuals and households and thus has a significant impact on cash flows in private finances. Financial literacy as part of economic literacy forms the knowledge, skills, values and attitudes that the citizen should have in order to be able to exercise in contemporary society. With financial literacy is also linked particularly numeric literacy (in terms of literacy financing it mainly concerns the use of mathematical tools to solve numerical problems related to finances), information literacy (such as the ability to find, use and evaluate relevant information in context), and legal literacy (as orientation in the legal system, a list of rights and responsibilities and opportunities, where to go for help). Developing this literacy is also a means for creating and strengthening the economic, legal and political thinking of citizens. Financial literacy as manage your personal or family finances includes three components: cash, cost and budget.

2 ECONOMICS AND SOCIALLY DISADVANTAGED SOCIAL GROUPS

Many aspects of human life are influenced by the position of man in the socioeconomic hierarchy. Economic disparities are among others created by groups living in less favorable conditions different approach to education, quality of housing, catering, spending leisure time.

For disadvantaged population groups we can be considered groups that are displaced from common life in society. The process of gradual separation of individuals or groups from mainstream society can be understood as a social exclusion (socio-economic decline). The basic resources of society include employment, education, housing, health and social care (Hunyadiová, 2010).

The process by which an individual or a whole population group impeded or completely denied access to resources, positions and opportunities that enable participation in social, economic and political activities of majority society may be termed social exclusion (Schavel a kol., 2012). These groups include: long-term unemployed; employed at minimum wage; members of ethnic minorities; persons with disabilities; persons indebted, migrants; people with low skills; people for whom life has become "a social benefits" normal lifestyle, people with different kinds of addictions, children living in families at risk, i.e. in families broken, the poor, of multiple, with unemployed parents and in families where violence occurs (these children often have less education, worse health and have fewer opportunities and incentives to in order to properly develop socially); persons who live in disadvantaged areas with high unemployment, poor quality housing, with poor transport infrastructure and so on (Slabikář finanční gramotnosti, 2011); persons released from prison; mothers on maternity leave, mothers with small children; seniors.

Social exclusion is threatened by those groups of people who have a weakened bond to at least one of three comprehensive integration planes (Matel, Schavel, 2011). Based on a survey of the extent and course of social exclusion in Europe showed, that the Czech society is threatened by social exclusion same population groups as throughout Europe. Ethnicity and race is generally in the European population a significant feature of the structure of poverty and inequality. Poverty among ethnic groups is more numerous than at the majority population. It does not manifest itself only as job insecurity and low income or unemployment. It has the nature of the broader disadvantages: reduced life chances and narrowed the quality of life, inequalities in access to health care, to education and others (Mareš, 1999, 55).

2.1 Elderly population

In the context of today's complicated world, in which it is difficult for adults to know what to do, the most surprised is the older generation of citizens – **seniors**. Democracy and the newly formed sense of freedom, in fact, lives under the pressure of the consumer society brings the urgent crisis in his personal life, which just for this age group is difficult, due to the reduction of abilities to manage on their own power. In general, according to Hana Janečková (in Matoušek a kol., 2005, 163), the old man is characterized by his belonging to the age group defined the age of 60, respectively 65. He is associated with the social status of pensioner; he is considered inactive or unproductive and supposed are even health characteristics associated with involution - the loss of functional ability,

morbidity and gradual loss of self-sufficiency. According to doctors, old age is an individual concept and multifactorial phenomenon that depends on health, education, social environment, life style, etc., confirms the leading Czech expert on ageing Tamara Tošnerová (2009). Although age is clearly an objective reality, as stated in his publication Social Gerontology R. Čevela with team (2012, 17), is its definition of a concept, as well as setting the parameters of life in old age, including those of retirement and pension insurance, the concept of expected needs, rights and responsibilities of older people's changing social construct, which is the result of permanent deformation and negotiation among different social actors and responding to serious social changes which currently include primarily demographic changes, improving the health and functional status of elderly people and civilization development with the advent of the information society and a revolutionary new technology (life in old age can be in the 21st century longer, more proficient, freer and personally even socially economically productive than in the past).

Social adaptation cannot be without a full-fledged senior active relationship to the social environment. Adaptation of senior is related to how maintains, fulfills and develops own changed role as it participates in the life of the family, which has contacts with other people, how to maintain their physical, mental and spiritual abilities based on satisfying his own needs.

As reported by Koval (2005), human adaptation is universal and in old age have a number of peculiarities. In his youth, this process is influenced by employment and the active participation of consciousness, but in old age these factors disappear. The adaptation of seniors often reminds self-preservation. Morpho-physiological traits of senior, who is subject to the aging process, cannot be changed as quickly as the surrounding environment. As a consequence, there is a mismatch of these processes, the expression of which is usually a change of conduct, changing interpersonal relationships and social environment in general. The subject of social adaptation can be as society as a whole social group, as well as personality. Consistent with the content is the degree of social de-adaptation various. Social de-adaptation is dangerous because its cause lies in the contradictions of interpersonal, group, political, religious and economic and so on. They themselves fear isolation coupled with the fear of being alone.

It is possible to agree with B. Balogová (2005), which states that an older person *"loses certain social role, losing previously acquired contacts are changing the outlook and value system. An individual living the prior work-mode will be redirected to another activity, the area of culture, sport and self-interest. These changes in the lives of the elderly should, however, be gradual and nonviolent. In this period, senior is confronted with an ever-poorer social environment*

where they have to deal with the departure of children from home, the loss of a life partner, but also friends and acquaintances, which deepens social isolation. Financial situation is changing; deteriorating health, and often times, the older person cannot take care of him and thus impair the quality of life."

2.2 Inappropriate financial expenses

Reckless spending and financial consequences for them are currently subjected people of older ages. Now retirees are the easiest target for non-banking companies that can take advantage of their ignorance and inexperience with loans. Due to complicated contracts are subsequently charged for keeping accounts, early repayment of loans, and many other fees (chaotic systems, interest and contractual penalties) to impose execution on property.

On the contrary, causes of execution proceedings against the elderly are different. These people are becoming for example victims on demonstration events, tour offers, advertisements or teleshopping, unrepresentable doorstep sellers. They often also in no small measure subsidize their children or grandchildren. Now Chamber of Executors of the Czech Republic focuses on this age group. They offer practical training primarily for clients over 60 years at free consulting services at retirement home for the elderly.

A major problem for seniors is loans and purchases on demonstrations (Pavelková, 2012). Consumer organizations, therefore, constantly warn seniors to buy the uncontrolled expensive goods, take loans and unnecessarily run into debt. According to server financialnewspaper.net reported that sellers have practiced tricks and evolving psychologically pressure and manipulated with potential buyers, causing confusion and let them sign contracts that are actually purchase agreement with a high price, all professionally and quickly. The media began to consistently also to be interested in the problem (investigative documentary, made by Dymáková, 2013 called "Villains" about unfair practices on the Shows & Events). Public television aired it for the general public.

Although consumers in the Czech Republic are protected by the amendment to the Act on consumer credit (on February 25, 2013 under No. 43/2013 Coll., Published in the Collection of Laws of the Czech Republic an amendment to Act no. 145/2010 Coll., On consumer credit, which seeks to punish some dishonest practices in the consumer credit market in the Czech Republic), allows to impose a fine, which may be up to 100 thousand, undeterred by the company in the sequel organization and harass unsuspecting seniors by other activities, e.g. a threatening by e-mail messages that contain proposals for execution on the basis of non-compliance with financial claims against the company, which offer

bargain in the form of rescheduling, but which has to be agreed upon through an overpriced phone line (see below), which the individual is at the moment of danger economic stability even realize. Seniors are unable to meet obligations incurred and get into complicated financial situations. Another of the dangers to which older people are exposed is overpriced phone lines which attract providing loans or consumer ones. If someone needed to phone number 900 994 068, must reckon with the fact that the per-minute pay 99.0 Czech crowns. Any negotiation of the loan is not a matter of two minutes, it is obvious.

Senior may get into financial difficulties as a result of gambling and today in the society it is a serious socio-pathological phenomenon (Pavelková, 2012). Another dangerous way to the problems is the imprudent guarantee, often in the family e.g. to children. Offers help People in Need organization, which deals with issues of difficult life situations that arise due to lack of knowledge of financial products. Its investigation led to the conclusion that many companies and individuals allegedly offering "competitive" loans, in fact, ahead of speculation that their sacrifices will not be able to effectively defend. The result of her work is "Index of predatory lending".

Senior Council in July 2006 set up a free legal advice at the House of Unions in Prague 3, W. Churchill Square 2nd. At homes for the elderly it offers practical training, in free legal counselling offices).

Act no. 108/2006 Coll., about social services has brought long-awaited targeted activation of these groups. Socially activating services for the elderly are set in § 66 of this act; § 31 of the regulations implementing this act defines socially activating services such as outpatient, terrain and residential, provided for persons of retirement age or people with disabilities at risk of social exclusion (e.g. Social therapeutic activities, activities whose providing leads to the development or maintenance of personal and social skills of supporting social inclusion of individual: suitable for implementation and receiving information of financial literacy and their use in everyday life; Assistance of justified interests and looking after common personal matters: possible use of the acquired skills in financial literacy in common everyday situations; It offers to peacefully implement the knowledge and skills of financial literacy in basic activities and operations of Socially activating services).

During obtaining information on the issue of finance in the Czech Republic play an important role independent and most objective sources that are able to respond to specific requirements and individual needs of man, called Citizens' counselling offices (Slabikář finanční gramotnosti, 2011). They are grouped into the Association of Citizens Advice (AOP) and provide independent, professional, impartial and free social counseling in 18 areas of law and point

of the appropriate state and local authorities about inadequacies in legislation and unsolved problems. Just the financial and budgetary issues are a constant component and offer of the services civic advice.

3 EDUCATION OF SENIORS IN THE AREA OF SOCIO-ECONOMIC COMPETENCES

Currently seniors are among socially disadvantaged groups (financial security in old age, self-inflicted or the circumstances often present financial instability). For this reason it is necessary in the context rigorous prevention protect just the older generation. The purpose of targeted activities is to increase the chances of the elderly population gain and maintain socio-economic competences, in this case, financial literacy (obviously necessary as well as other social skills). We mean for example the concept of socio-economic competence includes financial literacy (i.e. the financial, budgetary information and literacy), and other soft skills i.e. communication.

3.1 University of the Third Age

Within lifelong education of citizens FSV UCM in Trnava, is organized for graduates of secondary schools and universities interest education of adults and seniors (from 45 years of age) at the University of the Third Age. Education is intended for people who are interested to broaden and expand the knowledge and acquire practical skills. In the course of Improving the quality of life of seniors took place within other lectures e.g. The importance of communication for the Elderly, Social counseling to seniors and Financial literacy for the aged (the purpose of which was targeted to activities to approach, to complement and strengthen the socio-economic skills the management of finances in the elderly population, including the prevention of debt).

4 PREVENTION OF DEBT CURRENTLY

Disadvantaged individuals and families suffering from socio-economic problems (financial instability) are often not able to help themselves. Here we can take the help of an educated social worker, or institutions (state and private) that are ready to contribute to a solution to the unfavorable financial situation of the individual and his family. Generally, we characterize the prevention of socio-economic instability in in compliance and ensuring consistent (Pavelková, 2014):

- Legislation and measures within the State, in the activities of the Czech

Trade Inspection, acceptance of ethics and morality, modified laws and their interpretation by business entities

- Desirable is also cooperation with the media, with all their possibilities
- The biggest task, however, carries a well-prepared teacher (educational institutions), an expert in the field of social work, which is also a knowledgeable the issue of financial literacy
- An educated social worker who has personal attributes, qualities and abilities, can contribute to improving the situation in this case in the problems of financial instability individuals
- Social counselling, not only basic but and specialized (addressing the needs in conflict with society), prevention, lifelong learning, the University of the Third Age, applying ethics, spiritual and pastoral activities

Offered counselling is in its content, as indicated M. Schavel and M. Olah (2010, 68-69), aimed at determining the extent of the character and causes of material poverty. It means that at the initial stage of social counselling a social counselor focuses on identifying the primary causes of debt (mainly used methods of social counselling - typical for a basic level of social counselling). Social counselor must obtain through own knowledge and experience (also used in communication skills) to the client collaboration and mobilize him to work on solving his unfavorable situation. Further work with the client, he is committed to providing relevant information (obviously uses and providing expert advice from specialists, working in a team, e.g. psychologist, doctor, priest, lawyer, financial advisor, etc.) presents proposals for solutions, directing, supporting and the search for possible sources of helpful practical remedy to socio-economic problems of the client. It is primarily a content framework counselling focusing on depriving families of debt, learn to manage, to avoid creating new debt, creating optimal conditions for the social bonds of family members, involvement of all family members on upcoming changes and resolution procedures the resulting adverse financial reality. In the state's social system, there are mechanisms that can be used (net of social subjects within local government laws that allow using e.g. provide social loans, a single dose of the social assistance, etc.). At the level of state administration in the field of social affairs are state benefits in material need, state social support in the form allowances (e.g. a child in preschool and school age in the form of subsidies to food, school supplies, motivational allowances, etc.). To use also civic associations those specializes on issues and provide clients with long-term assistance in relation to other entities. The actual financial crisis has highlighted the need for financial education focused on practical skills associated with managing personal or family budget, which is a

prerequisite for the financial security of individual and family. For these reasons, the project of financial literacy was prepared for social workers and helping professions in 2014 (authors M. Schavel and J. Pavelková), which acquaint with the basic financial counselling (education, prevention, counselling).

CONCLUSION

To exist in the postmodern society in the 21st century and to provide financially for the future and achieving financial independence is difficult and dangerous without socio-economic competence. The importance of education in financial literacy is aware of a number of subjects, starting with government and public organizations through high school to organizations providing social services. Their contribution is considerable, but not sufficient requirement. More and more people suffer indebtedness and inability to repay debts. Execution even affects seniors. Preventing financial debt and the acquisition of competences in the area of financial literacy among the older population becomes important. It depends on the rigorous education of seniors, but also social workers in transmitting the acquired information directly to seniors for the practical implementation of solutions to their possible financial situations in everyday life.

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THE POSSIBILITIES AND LIMITS OF THERAPIES WHEN SOLVING DOMESTIC VIOLENCE – HIPPO THERAPY AS AN EFFECTIVE THERAPY FOR SOLVING CONSEQUENCES OF VIOLENCE

Ivana Klimentová ¹

Abstract

The abuse performed on women is without any doubt the biggest and most serious violation of human rights. Nowadays there are organisations emerging that deal not only with the prioritised interests of the client during her social situation, but they also try to practice depth therapy and make the woman healthier after she underwent violence. In this paper we will present the psychological consequences of violence which change the whole integrity of the woman and the possibilities of therapy in Slovakia. At the same time we will present hippotherapy as an effective therapy when renewing the self-evaluation and self-esteem of a woman, which is an important thing during the process of reintegration.

KEY WORDS: violence against women, therapy, hippotherapy, social services

INTRODUCTION

Domestic violence is thanks to the influence of contemporary technology and the possibilities of individual sources of information, frequently the subject of discussion. It's commonly known that violence has been present ever since the creation of patriarchal systems, where there is a clear dominance of the man as the head and provider of the family, up to the present family structure, where a significant place, for example in finances, is occupied by the man as the breadwinner for the family. Domestic violence as a scientifically explored phenomenon hasn't been explored for a long time, and therefore there's an inconsistency in the terminology, definitions, and approaches to its identification and the effective removal. In general we distinguish primarily the term of domestic violence:

According to the place of action: *violence in a family*“, or, *domestic violence*“;

According to the person subjected to violence, in consideration with the family status and other specific characteristics: *child abuse, partner abuse, abuse of the elderly, physical and/or psychological violence of mentally handicapped people*;

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Specifying the subjects of abuse by gender: especially, *violence against women*“, but also, *violence against men*“. Violence on women doesn't have to be performed primarily in a family environment. However the term domestic violence still highlights the family environment not only as a „crime scene“(from the point of criminology), but also the close family, relational, emotional and social connections of the performers of such an unwanted action. (Motel, A. 2009a). The definition we consider to be revolutionary and the best for describing violence, is the one mentioned in the *UN Declaration on the Elimination of Violence against women* (The Vienna Declaration) from 1993. Here a gender-oriented definition of violence against women was published and up till the present time it's the broadest definition in the international sphere.

„*Discrimination against women is any action, distinction, exclusion or restriction made on the basis of sex which has or can have the effect of physical, sexual or psychological damage or suffering of women, including threatening these actions, pressuring or any other restriction of freedom, whether in public or private life. (OSN, 1993, art. 1)*“ There are different forms and consequences of violence, which can stretch from regular arguments to serious health damages. Amongst the forms of violence are:

Physical violence, it includes *various forms of brutality, the intensity of which increases. From pushing, kicking, beating, the increasing aggressiveness results into beating even to the intention of causing death. Physical violence is often connected with the destruction of possessions, i.e. mainly things which are of some value to women, for example destroying furniture. As a consequence of this violence, women suffer health consequences and problems of various degrees of threat to health and life.* (Löw, 1998, p. 56).

The most common form of violence, which is in praxis very difficult to prove is psychological violence. This, includes *emotional and verbal violence, the woman perceives this as a destruction of her own worth and mental health. An example of this can be mocking at home or in public, insulting remarks on her appearance or character, obloquy and outbursts of anger. Statements that the woman is crazy, mentally ill, makes things up or has suicidal tendencies.* (Egger, 2000, p. 3). Men use these statements in order to divert attention from their own actions, and look for the problem in the woman (Ponešický, 2005). Amongst the most serious forms of violence, which is also often present in relationships is Sexualised violence. In terms of consequences on physical and mental health of the victim it lies in-between physical and psychological violence. (Egger, 2000). The woman suffers not only physically but principally mentally. Sexualised violence includes all sexual acts which are forced upon the woman. It's an act of aggression and misuse of power and is not a result of uncontrollable sexual

needs (Matějková, 2007). Sexual violence is considered to be, *rape, a forced vaginal, oral or anal penetration, forcing sado-masochistic practices, enforcing prostitution, sexual contact with friends of the misuser, and forcing to watch pornography*“(Matejková, 2009, s. 120).

A form of controlling the victim by the aggressor is Social violence- „ *a behaviour which has as its goal the isolation of the woman.* “ (Egger, 2000, p. 4) From our experiences we state the following forms: preventing meeting family and friends, locking her up in the house, removal of telephone, checking of calls, emails, prohibiting the use of a car.

This is also closely connected to Economical violence. This means a certain imbalance in the access to financial sources and misusing the strong economic position. „ *The misuse of power over financial resources by refusing or minimalizing financial support, prohibiting going to work or being employment. The man forces the woman to leave her employment and restricts her own income*“ (Sopková, 1998, p. 103).

1 PSYCHICAL CONSEQUENCES OF VIOLENCE AGAINST WOMEN

In order to deal with violence, it's necessary to know its consequences. If we are aware of the consequences of violence, then we're able to effectively structure a subsequent intervention and therapy connected to this. The goal of therapy is the intentional impact on correcting damaged functioning. The damaged functioning can be related to mental processes, and personality or somatic processes and functions of organs. It can be subject to condition as psychogenic or somatogenic. In the following chapter we shall attempt to introduce some syndromes as well as mental consequences of violence. It's important to state that the listed syndromes are used in the praxis of social work. They aren't diagnoses of the World Health Organisation. Thus their consequences are observed from many years of experience of counsellors.

1.1 Stockholm Syndrome

One of the most frequently mentioned in the context of violence is the Stockholm syndrome. Authors describe that the Stockholm syndrome are mental changes in the victim of domestic violence in connection to a traumatic relation, which results when one has too much power in a relationship and „ *becomes completely dependent on the powerless person for the relative feeling of omnipotence*“ (Kones, 2003, p. 194).

According to J. Buriánek a Z. Podaná (2006), in order for a traumatic relation to originate, two significant conditions have to be fulfilled: the imbalance of power, by which a strong dependence of the submissive individual on the dominant one originates, the changing of phases of violence and nice behaviour, which is especially effective in building a strong emotional relation. The Stockholm syndrome is characteristic exactly by the fact that „ a new relation-dependence originates between the victim and the abuser. One of the signs of this syndrome is for example the loyalty to the abuser, an attempt to protect him and even compassion or a „ collaboration“ with him. Another one is the inability (due to loyalty) to seek help from the outside, especially from institutions and also the impossibility of leaving the relationship and abuser“(Sopková, 1998, p. 455). If we are to talk about the Stockholm syndrome, four conditions have to be fulfilled: the life of the victim is in danger, or they are convinced that it is, the isolations from other people, a temporary affections, or temporary amicability of the abuser (Egger,1999). According to us the specific idea is the emotional relationship between the victim and abuser, which is based on fear and the feeling of gratitude at the same time (the woman feels gratitude even for the lessened form or frequentation of violence), which results in the identification of the victim with their abuser and his needs and the inability of the victim to express negative emotions and needs.

1.2 Battered Woman Syndrome

This term has found its way into society under the influence of media and professional. Unfortunately the public oftentimes misinterprets it and defines its negative results. The situation of a woman in a pathological relationship with violent partner is defined by the so-called syndrome of a battered woman, which was coined as a term in professional literature in the 80's, when the violence on women was explicitly thematised. „ *It's a concept created with the goal to name a broad spectrum of psychological symptoms and patterns of behaviour which are a result of a long term presence of partner violence and which help the victim to survive in violent situations.*“ (Marvanová, Vargová, 2008, p. 40).The syndrome of a battered woman is defined as „ *a collection of specific characteristics and consequences of misuse, which lead to the reduction of the woman to effectively react to the experienced violence. Thus it's a development of characteristic physical, psychological and social symptoms such as depression, low self-esteem or isolation, a recurrent experiencing of trauma, a learned helplessness, withdrawal from the outer world, eating disorders, exhaustion, headaches etc. which are a result of direct personal experience with recurrent*

violent attacks, the inconsistent and changeable behaviour of the abuser and a reduced possibility of the victim to influence their own life“ (Marvanová, Vargová, 2008, p. 40).

In order for the syndrome of a battered woman to develop, the whole cycle of violence has to be repeated at least twice. In addition there are four basic characteristics of this syndrome: the woman believes that she is responsible for the violence, she can't imagine that someone other than her would be responsible for it, the woman is afraid for her own life or for the life of her children, the woman has an irrational feeling that the abuser is omnipresent and knows everything. (Marvanová, Vargová, 2008) The syndrome of a battered woman manifests itself most frequently in the shape of PTSD, learned helplessness and self-destructive reactions.

1.3 Post-traumatic stress disorder

When defining post-traumatic stress disorder it's necessary to mention that as the only diagnosis, it's considered to be a result of violence and thus it's a psychological diagnosis, used officially. During judiciary procedures it's the only way to sue for psychological abuse. However the proving of PTSD for courts is very broad and complicated. At the same time our court system is generally against these types of resolutions of crimes.

The term PTSD is a term used for an anxiety disorder, which typically develops after an emotionally difficult, stressful event, which by its severity supersedes the regular human experience and is traumatic for the majority of people (Egger, 1999). A traumatic reaction begins as a reaction to the feeling of being helpless, unable of a meaningful action in the face of a traumatic experience. If there isn't a possibility of a variant of attack or escape, there's a possibility of disintegration of the personality. Traumatic events thus raise deep changes in the physiological, emotional or cognitive area. It's difficult for the victims to place them in the experiences they've had so far and to understand the meaning of suffering that they're going through. „ *During traumatic experiences the so-called learned strategies of reacting and accommodating are impossible to use“ (Egger, 1999, p. 77). Partner violence is undoubtedly one of the most serious stress factors in a family, because it significantly affects the development of PTSD in its victims, especially when the intervals between the violent incidents get shorter and the victim has less time to process the trauma. „ *In cases when a traumatic situation is the subject of domestic violence, the symptoms are usually more complex, last longer and are more difficult to handle with intervention“ (Marvanová, Vargová, 2008, p. 42)**

The symptoms of PTSD lie mainly in three categories (Egger 1999):

- Hyperarousal - women who were subject to this type of trauma are in a permanent expectation of new danger, and through this maintain their body in constant alert.
- Intrusive symptom. – the so-called „flashbacks“, a suddenly arisen, intrusive and haunting feelings of the experienced traumatic situation
- Constrictions – manifest by the so called „traumatic trance“, when a woman is subjected to absolute helplessness and inability to put up active resistance or escape.

These signs can raise situations which remind of the experienced trauma. The victim is thus faced with psychological numbness, emotional paralyses and avoidance of situations which could be perceived as threatening or the loss of interest in the outside world and despise to think about the future.

1.4 Learned Helplessness

The theory of learned helplessness derives from the fact that some women in an abusive relationship are literally imprisoned (Marvánová, Vargová, 2008). This theory arises, from a theory of social learning and results of the experimental psychologist M. Seligman- violent incidents in relationships occur unexpectedly, the consequence of which is that the women undergo a feeling of losing control over their own situation and gradually they lose the motivation to react. The result of this is the feeling of helplessness, an inclination to depression and feelings of anxiety, the ability to deal with the situation also decrease in the ability to deal with the situation“(Buriánek, Podaná, 2006, p. 28).

Naturally the syndrome doesn't appear in all the victims in the same amount, some try to at least partially to control the place and time of the incident, but more or less violence is considered as necessary by all the victims. Based on our experiences we have found out that in the starting phases of abuse in a relationship the victim is surprised by the violent expressions of their partner, which she neutralises with the help of various mechanisms of manipulating with reality. In the subsequent phase she gains knowledge that she can't control the violence, which then leads to the loss of activity and motivation to look for solutions, the falling into a state of helplessness, loss of the feeling of being competent, lack of self-esteem, emotional deficits (glumness, apathy), and the end of hope in the change of this situation, lack of belief in the existence of a solution and help, which accommodates life to an ever-present terror and threat. Therefore we are justified in believing that the learned helplessness is one of the reasons why abused women don't perceive their ability to escape an abusive relationship. (Buriánek, Podaná, 2006).

„To get rid of the syndrome, it's first of all necessary to separate the victim from the abusive partner, during which outside help may be required. Thereafter it's necessary to change her negative expectations, return her self-confidence and self-worth and help her regain the feeling of being in control of her life“(Buriánek, Podaná, 2006, p. 28). An effective form of help which we can apply is counselling and psychotherapy.

The possibilities for quality and available psychotherapy in Slovakia are few. However there are organisations that deal with crisis intervention and provide basic and specialised counselling. Some of them provide forms of individual and group therapy after training their employees. But in cases of long-term abuse, when the above mentioned symptoms manifest themselves, are the therapies provided sufficient enough?

The organisation Náruč O.Z which has for numerous years been concerned with helping families and children in crises and thus also provides persons who have been subject to violence with: assessment of the current psychological state, the depth of trauma and possible prognosis, a support group for women and children, the development of parental skills, individual psychological counselling for victims of domestic violence and their children. It also provides social guiding of the client. A question arises that whether during these types of activities we can talk about psychotherapy that is long-term and planned? To a certain degree they deal with basic and arisen problems which immediately show themselves after abuse, such as dealing with legal documents and orientation in the area of providing specialised counselling. But is this sufficient for these cases? Do they work on getting rid of or lessening of the trauma caused by violence? And what is most important, are they working on the perception that the client has of herself after the violence and abusive relationship? As we mentioned above, the woman is under a constant pressure and stress, which causes a change in the identity and self-perception and even a complete destruction of self-esteem. Only a few organisations deal with this self-perception, where they place emphasis on the renewal of self-esteem and self-determination of a woman after abuse. Documents of psychological-counselling services which are free for citizens in the realm of the Office for labour, social services and family provide, orientational psychological counselling for a family with domestic violence⁴² which presents a basic orientation in the issue.

The organisation which specialises in helping women in violence „Woman in Need” provides specialised counselling. We understand this as providing professional advice and methodological guidance of clients with accepting her decisions. The goal should be the solving and overcoming of her problem with the help of methods of social counselling and other techniques and approaches of

social work (for example encouragement, feedback, active listening, empathy). The focus of counselling here is to pass on information enabling the orientation in possibilities which are available for the client -helping her know other options, end the feelings of isolation, help her gain control over her life and therapeutically eliminate traumatic consequences caused by violence (Brnová, 2011). By providing quality information in the right time it can quicken the process of solving the violence. But what is solved is the client's present, reoccurring or one-off crises. Once again the emphasis isn't placed on self-image and the renewal of self-esteem, which is in the context of abuse extremely important, and even a key factor in further reintegration. The organisation provides filial therapy which we could call a training of parental abilities.

One of excellent diagnostic process in determining the range of disorder is art therapy. To fulfil its goals it uses means like drawing, painting, sculpturing, making models, graphics or creating masks. The correct application of art therapy releases stress. For many, art therapy is a helpful means of relaxation. It's equally as good applied to treatment of people with mental health issues, which women after abuse are. Art therapy presents a great venting for getting rid of negative emotions, when diagnosing PTSD, as well as the treatment of perception and self-valuing for women after abuse. As all therapies, also this therapy is limited by possibilities, the mood and position of the client. It's one of the few therapies which partially deal with the perception that the client has of herself and the world. It doesn't work primarily with the woman's self-esteem and self-determination, but with naming the feelings that are present in a woman after abuse. The question is where is this heading?

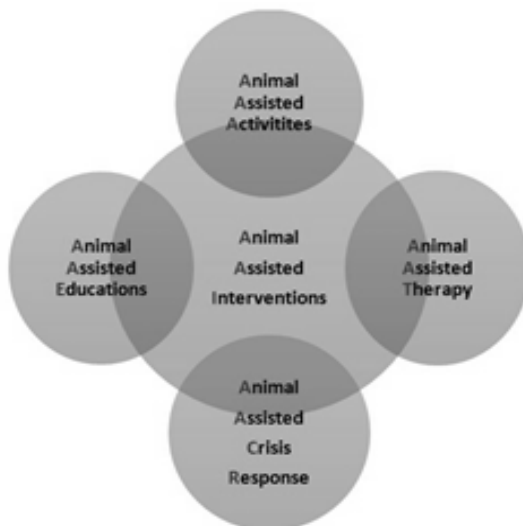
2 HIPPO THERAPY AS AN EFFECTIVE THERAPY AGAINST THE CONSEQUENCES OF VIOLENCE

The pioneers in hippotherapy, who were at the same time doctors, are Karol Hornáček and Karol Holly In Slovakia they're considered to be professional leaders in this area and they write (Holly, Hornáček (2005) that generally this therapy has an equalizing effect. Certain qualities are adapted into a norm, whether they manifest themselves in an excessive or lacking way. Most commonly hippotherapy is connected to the correction of muscles and physiognomic insufficiencies or muscle tensions. But in our case we can't forget to mention the psychological opportunities of hippotherapy. The authors state that hippotherapy itself can influence the therapy of a person. Not only is there a mutual interaction between a person and an animal (horse), but in this case the animal doesn't function solely as a „neutraliser“ of negative emotions, but

can bring out the positive emotions in the client and what is more important, it works on the self-image. The authors describe the effect on self-awareness and self-esteem of a client who's influenced even by the act of sitting on a horse; when the client sees the world from the top, he controls it, „ is in the saddle“ and somewhat has control over his or her fate. This is very important for women who have lost control over their lives as a result of abuse. The sense of content is also determined by the release of endorphins and can be intentionally used in case of the discomfort of clients who have problems with perception and are constantly tense. An over-independence is improvable by the behaviour of a horse, since it reacts on expressions of hyperactivity, aggressiveness, noise or inappropriate behaviour through its own natural defence reactions, and thus teaching the client to follow certain rules which can lead to greater self-discipline. The attributes that a horse naturally has enable him on the one hand a non-verbal communication (thanks to a simple, „ horse language“), and on the other they precisely set boundaries, which the undisciplined client or a client with behavioural issues can't step over. The client thus has to accommodate himself to the horse. He respects its authority and also the authority of the therapist, who in turn disciplines the horse.

At the same time, during hippotherapy the client has to learn to control the situation. By commands, she has to, through a certain level of strength and dominance, give a sufficient signal to the horse. Therefore an individual who believes in himself during a certain situation, and in the horse, is ready for possible complications and is consequently made into a person with a healthy and strong self esteem

The author Marák (2016), specialised his article on the use of hippotherapy. He describes the various possibilities and steps of using a horse. The international non-profit organisation DELTA SOCIETY, which is responsible and supports the connection of a person and animals and all activities done with the assistance of animals, differentiates the activities of an animal by its functions. All international organisations which deal with animal therapy have adapted these terminological identification and these divisions of acronyms have their place also in Slovakia. The following types of therapies are used AAI, AAA, AAE, AAT, a AACR.

Picture 1: DELTA SOCIETY

Source: (Marák, 2016. s. 216)

The abbreviation AAI / Animal Assisted Intervention/ stands for all interventions used towards a person with the assistance of an animal. The Delta Society uses this name for all interventions regardless of which animal will be assisting. Thus these names are used for all animal therapies and animals that are used.

AAA /Animal Assisted Activities/ - *A horse as a stimulating means in an environment/* This form presents activities, with the assistance of animals, that have a motivational, educational and recreationally-relaxing character and so have an impact on improving the quality of life. They are more informal, despite the fact that they are performed by specially trained professionals. In our area we could talk about activities that aren't intentional or goal-driven, but those that use an animal, a horse, more like a stimulating means in an environment where the client lives or visits. A horse as a stimulating means in an environment wouldn't have to be specially trained like a hippotherapeutic horse, but could be something similar like a pony or another type. He wouldn't be exactly used for rehabilitation per se, but more like an aesthetic stimulant, or an impulse for the development of cognitive functions. Typical activities of this form are observing, petting the animal and communication. The target group for this form of intervention has a broad spectrum ranging from children to young adults and

people with depression, as well as women themselves. During hippotherapy one can't forget about the gradual steps of the process, as well as the safety of clients. Therefore I would place this phase at the very beginning of working with as horse and client. Not everyone can connect with the processes and nature hippotherapy, since just the fact of a horse being a large animal that weighs several hundred kilograms and can cause damage if basic safety rules and mutual interaction aren't followed, is intimidating. One has to take into consideration the fact of the horse being a powerful animal which gives the impression of natural respect and sometimes even fear. The gradual steps and accommodation of the tempo of the horse and client are important, as they determine the boundaries of mutual interaction in therapy.

AAT /Animal Assisted Therapy/ *A horse as a therapeutic means* /in this case the goal is a direct contact of a person with a horse, with the intention to improve the physical or psychological state of the client. The main goal of this form is the support of the process of treatment or rehabilitation. A typical activity is a physiotherapeutic exercise using the types of walks of a horse, which the hippotherapeutic team does under the guidance of the physiotherapist. In our case, the focus is on the improvement and support of the social and emotional, the so-called non-cognitive functions, and the therapeutic unit is led by a psychotherapist, psychologist or a specialised teacher. The target group are clients with behavioural issues, emotionally or socially disturbed people or women who have been raped. After the adaptation of a person to a horse and vice-versa, the second phase and subsequently the therapy begins. The client gradually learns how to lead a horse, communicate with it on an appropriate level, from the position of a person with good self-esteem, who doesn't use violence to reach a goal, only appropriate educational steps and through language and signals of the horse in cooperation with it and the perception of oneself and the environment, cooperates and leads the horse where it's meant to go.

AAE / Animal assisted Education / - *A horse as an educative, ergotherapeutic, rehabilitation and socialising means*

During this form of therapy the various aspects of using a horse are discussed. It can be a natural or intentional contact with a horse. Its intention is a broadening of an educational effect, the increase in social abilities, removing isolation and inactivity of the client, eliminating stress relief, developing communication, practicing work activities and the motivation to work. The main goal is the general activation of the client, also an important factor for women after trauma and abuse.

According to Marák (Marák 2016, p. 216) „*In the ergotherapeutic part, the point lies in the work needed when operating stables and caring for horses. It*

has to do with working in stables, cleaning the place and animals, feeding, and in the summer time it's mowing, collecting straw, supplying and maintaining the area which leads to regularity and self-discipline (Marák, 2016. s. 216). „ In the rehabilitation and socialisation part it's mainly the activation and motivation of a client and creating relationships with other people and animals. The focus of this form is the training of pro-social behaviour, building motivation through appropriate impulses, increasing self-esteem, the correction of self-worth, and elimination of fear. “

Hollý, Hornáček (2005) state that in these diagnosis many mechanical effects that influence the personality of a person are also useable in all parts of this form., The authors describe also the possible effect in the important requirement for concentration in organic mental disorders. The client gains a lot of new experiences and habits, which enrich his cognitive functions and processes. Oftentimes it happens that there doesn't have to be a connection between the client and the therapist. The clients can have a negative stance towards a therapist because it's often he who from their point of view steps into their personal freedom. The emotional neutrality of the horse can thus have an important role in therapy and in learning new patterns of behaviour. Because the client can't exactly accuse the horse of prejudice and the instructions of the therapist as a breach of his rights. „ *Another important role is the fact that the hippotherapist is in these cases perceived more like a trainer and the client doesn't perceive him as an enemy. The possible mechanism of effect of hipporehabilitation in depressive and manic clients is in the activities associated with the horse or riding, since riding requires physical activity and that helps to improve psychological activity. The depressed client has to put in more effort for the horse to understand him and thus receives a feedback. A weak client becomes stronger and gradually confirms the knowledge that depression is an illness and not a true inability. “* (Marák, 2016. s. 216) On the other hand, in clients with a manic-depressive disorder, when self-esteem and self-worth is elevated, the client has the opportunity to get to know the true boundaries of his abilities, because when he's on a horse he quickly finds out that he has to behave appropriately, or respect the instructions of the therapist, because in the contrary case the horse won't listen to him or will even panic.

AACR / Animal Assisted Crisis Response /

One of the last phases and possibilities of making use of a horse is in the process of crisis intervention. „*This form is characterised by a natural contact between a horse and a person, who has found himself in a crisis situation. The method is centred on getting rid of stress, anxiety and improving the mental and physical state of the client. “* (Marák, 2016. p. 217). As the author himself states,

the target group of this form are usually victims of misfortunes, violence, where women who were subject to abuse, surely belong.

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HUMAN DIGNITY AND NEW CHALLENGES FOR SOCIAL SERVICES

Mária Dávideková¹

Abstract

Individuals, families or groups of inhabitants, and solving their problems, influence the climate of society, thereupon social services have an important position in the social policy of state, local governments, as well as non-state actors. Social services are not important only due to the number of clients who need them, but mainly due to the fact, that without their existence a part of the clients would not be able to participate in social life; consequently exercising of their human and civil rights would not be possible, what would result in their social exclusion. Our paper wishes to point out the importance to preserve human dignity, selected ethical principles, values, its legitimacy and importance mainly obeyed during communication with the clients of social services.

KEY WORDS: Client. Human dignity. Social services. Social policy. Values.

INTRODUCTION

To protect and respect basic human rights, especially the human dignity, belongs to fundamental ethical obligation of social workers as well as the other employees in the area of social services.

It is necessary to emphasize that each human life has its unique, unrepeatable and inalienable worth and dignity, and all that results from the nature of "*being human*". The main mission of each of us is to be the person responsible at all levels – to be responsible to oneself, to the surrounding world, and of course to those, who need our help - to the clients. With these planes are quite naturally connected any types of activities in the field of social services which are not only help, support, or services, but also accompanying. Therefore these activities can be hardly imagined with the absence of ethical context.

The principles of respecting the human rights, and the dignity of each person without differentiation, belong among the basic requirements of social work, but also in the scope of social services. Respect for human dignity, respect for ethical principles, fundamentals and behaviour are crucial for the helping profession of social workers. In fact, the specific of all helping professions is the fact that the client is "in dependant position" from the helping worker. Anyone who adopts the standards, principles and values that create the essential part of this profession,

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has to act in compliance with them not only in own professional life but also in the private life.

Our paper primarily focuses on the respect for human dignity and ethical principles, but also the key values in the profession not only of a social worker, but of all the workers in the area of social services. Protection of human rights and freedoms of social service recipients are entrenched in the Constitution of the Slovak Republic, in the Universal Declaration of Human Rights, in the Convention for the Protection of Human Rights and Fundamental Freedoms, in the European Social Charter, but also in the Law No.448 / 2008 Col. on Social Services and amendments supplementing the Law No. 455/1991 Coll. on Trades and amendments. The providers of social services "subordinate" their business to ethics and general principles of social services. They respect the recipient's right to dignity, self-determination, privacy, but also the safety. The recipients' human rights and freedoms are always available and made public in individual social service facilities.(Dávideková,2014)

1 HUMAN DIGNITY – “DIGNITAS HUMANA”

Human dignity is the subject of interest not only of philosophy, law, political science, theology, but in our opinion it is necessary to point out its importance for various helping professions, among which are undoubtedly included the social area, psychology, and medicine.

The concept of human dignity was preceded by the Declaration of the Rights of Man and of the Citizen, as well as the Declaration of Independence. The important international declarations and conventions, and in considerable extent also the Constitution of the Slovak Republic, deal with the issues of human rights and freedoms, the human dignity included. It is not enough only to manifest the human dignity, but it should become the natural part of thinking of every person, as well as the whole society. Whoever denies or refuses to recognize the human dignity of others, in considerable extent disputes the value of own life.

Human dignity in helping professions of all workers in social services, is not just the imagination and the idea of the status of a person, his attitude to social work, but it is the most important right of the human, closely related to the right of human to the life (Mráz, 2001).

The right to human dignity, as a fundamental human right is linked to social rights. Free development of man is conditional upon the social rights realization. The message of the UN Universal Declaration of Human Rights, adopted in 1948 –where every human being is born free and equal in dignity and rights, is in our opinion the motto and the symbol of human rights. The Universal

Declaration of Human Rights has gained recognition, and became the source of human rights codification at national and regional levels. *Respect and esteem for human rights is the fundamental value of a pluralistic, democratic society, the Slovak Republic included, and therefore is the message of Universal Declaration of Human Rights 'timeless.*

The value of human dignity is indispensable also when providing individual forms of help, or the social services to clients, who are highly dependent on help and support of family, community or the whole society.

The right to human dignity, equality and other civil liberties, has its social ratio, the ties to social rights, where their implementation in the social area is subjected to them. Therefore it is very important and useful to consider all human rights in mutual relations. "People are free and equal in dignity and rights" (Dudžáková, 2014).

Human dignity and the dignity of human are the keywords for 21st century, and from them arises concepts of mankind, human, humanity; and thus humanness. Here can be talked about humanistic aspects of human dignity. The right to human dignity, in particular, must be the right of conscience of every human being, it should be the basis of any personal relationship. The respect for human dignity has general application, and as it was already mentioned, who denies the human dignity of anyone, denies mainly his own dignity, and thus questions and disparages his own axiological system., denies and belittles values as well as the valued system of life. Dignity is the term derived from the free being, and points to the competences of a man as a person. „ From the attributes of every human being’s status dignity shall be derived inalienable rights, expressing our relationship to the other person and shape our behaviour towards him. " (Mráz, 2001).

The life definitely represents the fundamental and starting value, the essence of our personality, and the manifestation of the being. In the value hierarchy, the life is at the forefront positions (own life and the life itself). Human dignity reflects not only the value of a human, but also of equality, freedom and autonomy. Every single person - each our client deserves reverence, without distinction to his nationality or religion, and important is respecting the dignity of specific groups and communities in our society. The right of human dignity must be mainly the right of conscience of every human being, and should be the base of any social relation also in the area of social services.

The process of human dignity recognition lasted for thousands years, and today is respected, protected and we try to implement the right in our daily life and apply it in the area of "social practice."

Social work, social services are based on the respect for the values and dignity

of all people, and the rights that come out from it. All the staff in social services should promote and protect the physical, mental, spiritual integrity and well-being of each individual client. Namely it means:

1. Respect the right to self-determination - respect and promote the human right to make own choice and decision, irrespective of their values and life decisions provided that it does not threaten the rights and legitimate interests of other people;
2. Communicate with each client as a complex being - Social workers should be concerned about the "whole entity" of a man - of a client within the family, community, social and natural environment and try to understand all the aspects related to human life;
3. Promote the right for participation - promote the full involvement and participation of people – clients, who use their services in such a way, that they can achieve empowerment in all aspects of decisions and actions that interfere their lives;
4. Increase client's satisfaction through improved quality - conditions through ensuring the effective and aesthetic furnishing of accommodation and the environment in which the client lives;
5. Promote his participation in social life and his integration among "common population";
6. Recognition of diversity -have to recognize and mainly respect the ethnic and cultural diversity in the companies where they work, taking into account the individual, group and community differences;
7. Obligation to challenge social conditions that contribute to their social exclusion, stigmatization or oppression, work towards the inclusive society.

Based on the above mentioned we want to state that not only social work, but also any work in the area of social services is based on respect for human dignity. This fact is also declared in the Montreal definition of social work (2000) which, among other facts says, that the principles of human rights and social justice are the essential in social area (Pavelková,2012).

Humanity should be one of the basic characteristics that each social worker and other workers in social services dispose. All professionals are daily confronted with difficult human destinies, often have the major impact on the lives of our clients, enter into the most intimate human relations. Daily at work they come into contact with new clients, where the main aim is to help the clients to solve their precarious life situation. Every single client has his human dignity that should be respected by the worker, and he should avoid any prejudice to the client. During the work is very important to accept the Code of Ethics with important ethical

values such as respect for the rights of client, confidentiality and secrecy, the primacy of interests, and especially highlight the ethical responsibility to the client. Thus ethics is an integral part of everyday work of all helping professions.

1.1 New challenges for social services

At present, social services represent a wide area of help to the clients in various life situations. Recently the interest and demand for social services in our territory has been rapidly increasing mainly related to demographic changes. Social services are specialized services, social services as well as other activities, or a set of activities are specifically aimed at solving the unfavourable situation of citizens-clients, who for various reasons, found themselves in the situation that they cannot, are not able to solve or cannot solve on their own.

Social services are provided to socially disadvantaged people, as to improve their quality of life, or when possible, help them at maximum to integrate into society. Social services take into account the person –recipient of social services, his family, or group to which he belongs. (Habánik, 2015, p.61-66).

It is important to note that since 1989 our society has undergone several changes in social sphere development that finally resulted in the long-awaited adoption of the Law 448/2008 Col. on Social Services, which came into effect 1.1.2009. In no other area bound with social protection in Slovakia has happened as many changes as in the recent years in social services.

The current legislation of social services deals with legal relations during social services provision, social services financing, and the supervision of provided social services. Social services are gradually decentralized to regional, local, and self-government levels, which are legally responsible for their financing, provision, or ensuring through the network of public, but also private providers.

Through the gradual changes, further development in the area of provided social services, and identification of needs appeared the law amendment, as we know it at present, as to be adapted as much as possible to present time and the clients' needs. The law regulates legal relations and conditions of social service provision, with the emphasis on social inclusion and meeting the social needs of people in unfavourable social situations. (Kubičková, 2015, p.175).

The law exactly specifies, who can become the client of social services. In accordance with the law here belong the individuals, families and communities, which find themselves in unfavourable social situation because of poor health, severe disability and reached retirement age.

The mentioned law on social services is being complexly aimed at individual, family and community of individuals, the respect for human dignity, it guarantees

the right for services provision or ensuring the right to choose the provider as well as the other rights in social services providing. The law guarantees the right for provided social services or ensuring their provision, also the right to choose the provider under the statutory conditions. Social service providers, in accordance with Law No 448/2008 Coll., can be *public providers* - municipalities, legal persons established by municipal bodies, or *private providers* - other legal or natural entities. The law sets out detailed obligations of the social service provider, with emphasis on satisfaction of basic needs and requirements of social services recipients. Social services are provided in outpatient, terrain, and residential form, or by the other means, in accordance with the unfavourable social situation and environment, in which the person occurs.

Further trends in social services development – National priorities of social services development during 2015 – 2020

In 2009 the Ministry of Labour, Social Affairs and Family of the Slovak Republic, draw up the National development priorities of social services for the years 2009 to 2013, (now for the years 2015 to 2020) that come out of real situation in social services provision with identified needs in the Slovak Republic, as well as with included the European Community priorities (availability and accessibility of social services and their financial sustainability). At the same time it was the starting point for creating the community development plans for social services and for the self-governing regions, the concepts creation of social services development.

Among the main aims of national priorities for social services development for the years 2015 – 2020 in the Slovak Republic belong:

- ensure the implementation of the right of citizens for providing social services, taking into account the human rights and non-discriminatory access with the emphasized respect for human dignity;
- ensure accessibility to social services in accordance with the needs of target groups and communities;
- ensure development of social services that is available to people in segregated areas with concentrated poverty and generationally reproduced poverty;
- increase accessibility of community-based social services with emphasis on the development of social services for the family that takes care of its member, dependent on the help of another person in the self-servicing;
- deinstitutionalise social services;
- promote the principle of integrated long-term health-social care;

establish the system of performance and quality conditions evaluation of social services

National priorities respond to the important challenges of social help to citizens; here belongs mainly the development of diversified care services at the community level, with included necessity of social services modernization. It also confirms the key role of the social services, bound with promoting the people inclusion into society, social cohesion with regard to the services provided at the community level. At present, social services are becoming the integral part and fulfilment the objectives of Europe 2020 strategy (Bočáková, 2014, p.5)

National priorities also reflect and respond to the current situation of social services in Slovakia, mainly to the lack of capacity of social services provided in the natural (domestic as well as community) environment of citizens, the need to ensure sustainability of social services funding, but also the development of necessary quality, which are primarily based on the needs, identified in the national and European context, with emphasized availability and accessibility of social services, their long-term financial sustainability and efficiency.

Social services, as it was already mentioned, are the part of public policies, which clearly promote the *human rights dimension* and orientation to the beneficiary needs. Citizens, due to their unfavourable social situation, are dependent on social services, they have the right to exercise their rights and also for free and independent life with the support of society on the non-discriminatory basis. Respect for fundamental human rights and freedoms is the basic pillar of all documents, that were adopted by the international community : the United Nations Convention on the Rights of the Child, the Convention on the Rights of Persons with Disabilities, the Convention on the Elimination of Discrimination against Women, the European Social Charter (revised version). (Slovák, 2016, p.83-84)

Among other important national and international documents are included: the EU Charter of Fundamental Rights, the European Charter of Family Carers, the European Charter of the rights and responsibilities of older people in need of long-term care and assistance, Manifesto of the Government of the Slovak Republic for 2012 - 2016, the National Programme for Active Ageing for 2014 - 2020, the National programme for the development of living conditions of persons with disabilities for 2014 - 2020, Strategic framework for health for the period 2013-2030. Social services under the Law shall be provided through specialized, service and other activities that the provider is obliged to provide or arrange, if these activities are included in the listed services. The provider may also carry out other activities that improves the quality of social services.

1.2 Benefits of amendments to the Law No 448 / 2008 Coll. on Social Services (since 1.1.2014)

It should be noted, that the National Council of the Slovak Republic on 28. 11. 2013 approved and adopted the amendment to the Law No.448 / 2008 Coll. - Act. 485/2013 Coll., (in force since 1. 1. 2014). Here are just selected modified amendments to the Law on Social Services. The purpose of this amendment to the law on social services was primarily led to improve the quality of social services, their sustainability and accessibility. The extensive modifications and changes are mainly related to ensure the protection of social service recipients, whose incomes are very low, what means that they are below the law-determined amounts of subsistence minimum or only slightly overlap the limit, further aimed at achieving the conditions which enable citizens to remain as long as possible in their natural habitat and provide community-oriented social services in accordance with the Slovak Government's priorities, the principles of deinstitutionalization and the commitments of the Slovak Republic undertaken in international documents.

Further was introduced a new group of social services, crisis intervention, which include community centres and terrain social service crisis intervention, which is an important tool for solving the problems in segregated communities, which had not have the legislative support yet. Other new types of social services and specialized activities belong the *service of early intervention*, that specifies the provision of social services in assisted living facilities - a flat or a family house, where is set the age limit for the stay in the facility, and the *house for the elderly* that limits the possibility of the year-round stay at social services homes.

In detail are regulated the conditions governing the quality of social services and their evaluation system. With quality of provided social services is related the quality and accreditation process of educational programs and professional activities in social services, therefore, further were specified the conditions for accreditation.

2 NEW CONCEPT OF SOCIAL SERVICES QUALITY

Since 2014, the new concept of quality of social services in the Slovak Republic and its subsequent management is based on two basic pillars and one superstructure. The pillars are illustrated in Figure 1:

Figure 1: The pillars of social services in Slovakia since



- **Supervision over social services provision**
- **Conditions evaluation of provided social services**
- **superstructure**– self-evaluation and permanent improvement (Brichtová, Repková, s.56-57, 2014).

Brichtová and Repkova mentioned that , the individual pillars of the social services concept are mutually independent, that means, that the results of one pillar are not subject to evaluation of the results for other pillar. The specific nature of each of the pillars can be combined with one another pillar and support the overall effectiveness and management quality system of social services as a whole (p.57, 2014).

Further can be stated that the new amendment of the Law promotes the establishment of facilities, mainly of family-type through regulating the capacity for establishment of new social services facilities. National development priorities of social services have the intention and ambition to capture all 21st century key trends in the development of social services for all people in unfavourable social situation, dependent on the help and support of other person, whether for individuals or for the families who suddenly find themselves in unfavourable (crisis) life situation and they need help. Preparing, acceptance, but especially

the subsequent implementation requires compliance of all participating parts. Important are also the answers to fundamental questions: *What changes should be planned in the structured offer of services for residents and how to implement them? How to organize the necessary services in the given territory? How to create efficient and economical network of services in order to achieve the most complex and most effective offer, and to meet the needs of all people?*

COCNLUSION

Significance, interest and importance of social services has been increasing not only in our country but also in Europe. Generally, present time sets high requirements for provided services, and it is not different in the field of social services for all people in strenuous social situations, where is helped to a particular person with his human values and dignity in the situations, where is dependent on the help of others. Maturity and level of society can be simply measured through the quality of provided social services. The main issue of public or private providers would be offering of such variety of social services that would meet the needs of the services recipients, but also positively influence their satisfaction. Important is the great emphasis on the factors that affect the beneficiaries of social services. Therefore, the respect for human dignity, ethical values, principles are in practice regarded as essential assumption of success of each employee in the social sector when performing their profession.

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ANNUAL CONFERENCE
FACULTY OF SOCIAL SCIENCES UCM TRNAVA
Social Policy and Services
Conference Proceeding

Volume Editor

doc. PhDr. Oľga BOČÁKOVÁ, PhD.

Technical Editor

Mgr. Jakub BARDOVIČ, PhD.

Cover

PhDr. Michal IMROVIČ, PhD.

Published by

The Faculty of Social Sciences
University of Ss. Cyril and Methodius in Trnava
4/A, Buciarska St. 917 01 Trnava, Slovak Republic

Pages: 348

Edition: 100 pieces
1st Edition

Published: 2017

ISBN 978-80-8105-867-7