

# Research Journal of Pharmaceutical, Biological and Chemical Sciences

## Methodological Bases Development of Gerontology Service in Republic of Kazakhstan.

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### ABSTRACT

Expediency and meaningfulness of the real research are determined by that the end of XX and beginning of XXI centuries are characterized a fundamentally new demographic situation increase in a world population, as absolute quantity and stake of persons of senior ages. In this connection politicians and scientists of the whole world are spare large attention to the problem of aging of population. The height quantity of senior ages people conduces to the further demographic aging to the increase of the demographic loading, and it stipulates the necessity of revision on bases of organization and financing of operating health protection and social services. Providing the medical and social help of elderly and old people, being a complex of services in a care and treatment of losing a capacity for self-service by persons, it is a major to date task for all civilized societies. Deep socio economic changes are in a republic, substantial transformations to the health protection and social defence require expansion of the complex scientific researches sent to the decision of urgent tasks on satisfaction of specific necessities of medical and socio character of such task force of society, as face of senior age. Making progress aging of population, growth among aged stakes of lonely resident produces new requirements to the medical and social help. Undertaken a complex socially and hygienical study had for an object on the basis of estimation of the state and prospects of development of medical organisational and socially legal aspects of material well-being of persons of senior age development of strategic directions of development of medical-social help to the persons of senior age on the whole on a republic by expansion of activity of gerontology service.

**Keywords:** gerontology, medicare, service, competence, senior age.

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## INTRODUCTION

The tendency of increasing the population of senior age people carries global character, entails not only the increase of requirement in a medical and social help but also renders direct influence on a medical and demographic situation. Every year a requirement increases in an operation ability and adequacy decision of the questions related to providing the quality of senior age person's life.

From data of the European regional bureau of (2001), in eighteen from 20 countries of the world in this region, middle age exit of population on a pension in that makes 65, persons older 65 make 13,3% - 17,9% population. In Ukraine, Moldova, specific gravity of elderly population makes 18-23,3% Republic of Belarus [1, 2], in Russia - 18,5% [3].

The world forecast height of senior age persons supposes the increase of loading on services of health protection and organs of social defence in connection with the high requirement of senior generation in the different types of the medical and social help conditioned in a number of chronic diseases [4]. The problem of elderly is determined by that, occupying a relatively small place in composition a population, this group uses the considerable medical, social and economic resources of the state [5].

For elderly people the special social problems, that, foremost, is related to the health, are peculiar. In many countries presently the to half of all budgetary facilities being at disposal of the system of medical and sanitary help is expended on medical service of elderly.

## DISCUSSION

In before undertaken home studies sanctified to the problem of study senior age persons, the separate aspects of demographic character were examined; medical and social questions of disability; providing of medical and prophylactic help to elderly on a mud flow, at the separate categories of population; the integrated model of providing of ambulatory and polyclinic medical and social territorial help was offered for the persons of superannuated; the deep analysis of legislatively-legal basis of vital functions of elderly with development corresponding recommendations is conducted. Questions are considered the characterizing separate states of the senior age person's health, psychological features, providing of medicare before hospital and hospital stages, in the conditions of rural locality.

At the same time, the questions of complex study and realization of such key positions, as conceptual, methodological and organizationally-administrative aspects of management, remain not to a full degree worked out by the system of associate measures of medical and social and economic character.

Despite undertaken efforts in this area, multilevel and different planned problems of geriatrics and gerontology on the whole, a level and quality of senior age person's health taking into account their physical, social and psychological prosperity do not find out the clear, oriented to their necessities program, strategy and tactics of her realization on the basis of the set features and conformities to law of the studied phenomena. To development of the effective government program in this area of public health and health protection and the accumulated world experience will promote. Pre-condition to it is direction of our own researches.

The advanced studies are practically absent on the analysis of factors, stipulating the state health of social cohort of people with determination of their requirements in the different types of medical and social help taking into account their socio- economic status in modern terms. About actuality of problem absence of adequate public medical and social policy testifies at planning of national infrastructure of medical and social service, republic presented in a general medical network, case- insensitive the age is related changes and physiological features. Reform of health protection at the end of 90th resulted in reduction of the specialized help, including her geriatrics direction. The basic loading on providing of medical and social help to this contingent is carried by the system of social defence of population. In the conditions of deficit of financing an important place is occupied by events on integration of activity of all departments rendering a medical and social help to the persons of senior age, modernisation of that requires in all round study and scientific ground.

## RESEARCH AIM

Development and perfection of methodological and administrative bases of the integrated medical and social help to the senior age persons on the basis of complex socially-hygienical research of their health state, way of life and quality of the rendered medical and medical and social help.

Research tasks:

1. To study basic medical and demographic indexes, characterizing the state and tendencies of becoming of population old.
2. To estimate a dynamics, conformities to law and features of level and structure of key indicators of health of persons of senior age.
3. To estimate the existent organizationally functional structure of medical and social help to the senior age population.
4. To define socially psychological status of persons of senior age.
5. To reduce the meaningful and guided factors of affecting the state of health of persons of senior age.

A scientific novelty of research consists in that first:

- the complex socially-hygienical analysis of the senior age person's health state of Republic Kazakhstan is conducted;
- multivariable complex description of contingent of senior age person is got for the construction system of their medical and social providing;
- at sociological research new conformities to law and features of socially- psychological and socio-economic status of senior age persons are set;

Theoretical meaningfulness of research consists from the development of approach systems to the decision of senior age person's problems, including development of processes of programmatic having a special purpose management on stabilizing and development of medical and demographic and socio-economic situation in a country, bringing in a considerable contribution to the theory and practice of public health and health protection. Conception or basic idea of this research consists of the methodological going near development and realization of strategy and tactics of perfection of geriatrics and gerontology service in a republic.

The practical value of research consists in possibility of the general use organs and organizations of health protection and social defence of calculation indexes of necessity in senior age persons in the different types of medical and social help for the aims of the current and perspective planning on the different levels of management.

Medical and organizational technologies of providing of medical and social help to the population of senior age offer.

An organizational and functional model is basis of integration, modernisation and development geriatrics and gerontology services.

The offered modules of perfection of management a medical and social help to the persons of senior age serve as by support at development of regional strategy and tactics of development of medical and social help on other territories of country, and also for perfection of normatively legal base of RK. [6]

Norms of loading of work of doctor gerontologist of ambulatory reception are methodical basis of decision of complex of problems of medical and social and organizational character.

## INTRODUCTION OF RESEARCH RESULTS

Research results are inculcated in activity of Ministry of health of RK, managements of health protection Almaty, Almaty and Zhambyl regions, management of employment and social programs Almaty and to the Almaty regions, in the educational and pedagogical process of the Kazakh national medical university the name of S.D. Asfendiarov, medical colleges at preparation of students, bachelors, master's degrees, graduate students

and middle medical personnel.

The worked out norms of loading of work of doctors gerontologists are recommended as a methodical base for planning of ambulatory reception of these specialists and creation of gerontology cabinets to Managements of health protection Almaty and to the Almaty regions. Personal deposit of author. An aim, tasks, research program, collection of primary material, his treatment, scientific estimation, formulation and forming of substantive provisions of dissertation, conclusion, conclusions and practical recommendations, is executed personally by an author.

Basic strategies of activity on providing of the effective functioning of gerontology service it is been:

- 1) perfection of organizational construction and control system;
- 2) realization of modern skilled politics;
- 3) perfection of the scientifically-methodical providing of activity;
- 4) strengthening, development and coordinating of international connections in area of providing the specialized geriatrics help of persons of senior age;
- 5) strengthening of legal frameworks of activity of service. Conclusion

Thus, optimization of medical and social help to the persons of senior age is presented as a new structure to the medical and social help to the studied contingent. The model of interdepartmental integration and dataware of subjects of providing of medical and social help is stopped up in basis of structure. The worked out organizationally-functional model of development of medical and social help to the persons of senior age plugs in itself her basic elements integrated with organizations of health protection (territorial polyclinics, municipal hospitals, forms of medicare) and social defence of population (Center of social employment of population, territorial centers of social service, medical and social examination, different forms of providing of social help). The Gerontology center, that is an executive, coordinating, consultative branch rendering a medical and social help to the persons of senior age, is formed to that end.

#### REFERENCES

- [1] Belokon O.B. To forming the conception of public medical and social policy in regard to the citizens of senior generation // Strategy of reformation of regional health protection : Collection of scientific works. -M., 2000. - P. 40-41.
- [2] Lugovoy B.E. A health of population of superannuated // Health Protection of Russian Federation. - 2002. - № 3. - P. 27-28.
- [3] Kabakova T.A. Demographic aspects in a region, related to becoming of population // old Clinical gerontology. - 2004. - T. 10, № 9. - P. 97-98.
- [4] Health of elderly : Lecture of committee of experts // Geneva, 1992. - P.7- 42.
- [5] Declaration on the problems of aging. // Materials of the Plenary meeting of the UNO. - 1992.- 186 p.
- [6] WHO Global Consultation on Violence and Health. Violence: a Public Health Priority. (Document WHO/EHA/ SP/. POA. 2). - Geneva: WHO, 1996.
- [7] Balabanova E.C. Socio-economic dependence elderly // the Elderly people are a look in the XXI century. Nizhniy Novgorod, 2000. - P. 118-120.
- [8] Arefeva T.K. Social problems elderly in modern Russian society // the Elderly people are a look in the XXI century. - Nizhniy Novgorod, 2000. - P. 117- 118.
- [9] Karuhin E. B Medical and social problems of elderly and old people // Clinical gerontology. - 1999. - № 4. - C. 88-96.
- [10] Neurological disorders: public health challenges. - Geneva, World Health Organization, 2006.
- [11] Pinquart M. Correlates of subjective health in older adults: a meta-analysis. Psychol Aging. - 2001. - Vol. 16(3). - P. 414-426.
- [12] Revised Global Burden of Disease (GBD) 2002 estimates. - Geneva, World Health Organization, 2004.
- [13] Singer P.A., Browman K.W. Quality end-of-life care: a global perspective. // BMC Palliative care. - 2002. - Vol. 1. - P. 4.
- [14] Tapper G.M. Strategic Positioning of Home Health Care Services in a Regional Integrated Delivery System // Home Health Care Management and Practice. - 1998. - Vol. 10, № 5. - P. 30.
- [15] The Seventeenth World Congress of the International Association of Gerontology. Vancouver. July 1-6. 2001. Abstracts // Gerontology. - 2001. - Vol. 47. - P. 718.