SIGNIFICANCE AND APPLICATION OF THE STRATEGY OF HEALTHY AND ACTIVE AGEING IN BOSNIA AND HERZEGOVINA

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Abstract: In the first half of 2015, a percentage of residents older than 60 years of age on a world level amounted to 12%, thus representing the fastest growing segment of the world population. For the past two centuries, a care for older persons and promotion of their active and healthy ageing has become a priority issue for social policy creators in numerous European countries. Ageing is a global trend and demands urgent action of all society segments. The background for all activities, responses and creation of adequate policies present a good insight into demographic trends, position of older people in the society and understanding the concept of social involvement enabling to observe the position of older people in different aspects of social participation, meeting their needs and achieving quality lifestyles. The active ageing concept became a priority for European Community policies, as well as organisations such as Organisation for Economic Cooperation and Development. The active ageing strategy encourages the shift of the health care system from a curative to a preventive model, as well as promotion and support of rehabilitation and independent living. The main idea behind the active ageing concept is to enable the individual to become an active participant in the life of his/her family, as well as in the society, despite existing cognitive or physical difficulties, frequently present in the senior age. The Strategy presents a basis for making policies and decisions in the health care, including decisions on allocation of financial funds within the health division. The Strategy must offer clear and convincing reasons why something is considered a priority. Bosnia and Herzegovina is in urgent need to implement a strategy that would improve the health of older people and enable healthy and active ageing.
Keywords: Strategy, active ageing, a third age person

1. INTRODUCTION

Health protection of older persons is the main indicator of improvement but also failures in the health protection of the entire population (Vuletic, 2018). Due to contemporary medicine development, the expected life expectancy increased and it is followed by simultaneous fertility rate decrease due to increase of the educational level and change of individuals' lifestyles. The aforesaid results in ageing of nations worldwide. In the first half of 2015, a percentage of residents older than 60 years of age on a world level amounted to 12%, thus representing the fastest growing segment of the world population. The average growth rate in this segment is estimated to 3.26%. At this moment, the share of this part of the world population is the largest in Europe, amounting to 24%, thus making the old continent countries the oldest nation. In addition, it is being estimated that individuals over 60 will make 25% or more population on all continents (except for Africa) by 2050, which is alarming indicator (Domazet, 2017). For the past two centuries, a care for older persons and promotion of their active and healthy ageing has become a priority issue for social policy creators in numerous European countries. The World Health Organisation defines ageing as the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age. It is a continuous process ensuring daily activities in order to improve health and preserve functional capacity. The key concept of such defined positive observation of ageing is the promotion of active ageing (Vuletic, 2018). Ageing of population is a global trend and demands urgent action of all society segments. The background for all activities, responses and creation of adequate policies present a good insight into demographic trends, position of older people in the society and understanding the concept of social involvement enabling to view the position of older people in different aspects of social participation, meeting their needs and achieving quality lifestyles (Labas, 2016). The expected life expectancy is not fixed or continuous, but it is in the tendency of continuous increase (Vilidicka, 2017). The improvement of life quality in old age present an important goal in research of gerontologists and becomes a subject of a larger interest of researchers, practitioners and creators

(Federal Ministry of Labour and Social Policy, 2018). Health is one of the most important aspects that must focus on policies directed towards older persons, as well as that population ageing has great consequences on public health (Babovic, 2018). In order for countries to face the aforesaid issues, the Second World Assembly on Ageing was held in Madrid in April 2002. The goal of the Assembly was to talk about challenges facing countries in terms of population ageing, as well as to agree on further steps to enable people to age with dignity and safety, and to enjoy life through fulfilment of all human rights and fundamental freedoms. As a result of discussions, the Madrid International Plan of Action on Ageing aimed to solve key challenges pertaining to building of the society for all generations (Stojanovic 2020).The European Innovation Partnership for Active and Healthy Ageing is an initiative of the European Commission for fostering innovations and digital transformation in the area of active and healthy ageing. Partnership was proposed in the Europe 2020 Strategy and presents the leading initiative of the Innovation Union (The United Nations Economic Commission for Europe – The Ageing Policy, 2009).

2. HISTORICAL DEVELOPMENT OF THE HEALTHY ACTIVE AGEING CONCEPT

According to the European Commission from 1999, active ageing means to adjust our way of life to the fact that we live longer, we have more resources and better health than ever before. At the same time, it is necessary to use possibilities brought by improvement. In practice, it means that we adopt healthy lifestyles, we work longer, we retire later and we are even active following retirement. The active ageing concept combines individual processes and possibilities in the community for health, cooperation and social integration. In the mid-nineties, the World Health Organisation developed such concept in order to promote healthy ageing and finding suitable answers on how to use the potential from older generation as better as possible in terms of "adding one life to another". The active ageing concept became a priority for the European Community policies, as well as organisations such as the Organisation for Economic Co-operation and Development (Labas, 2016). Active ageing is mentioned in Australia since 2005, whereas successful ageing, positive and healthy ageing were formerly dominant expressions (Federal Ministry of Labour and Social Policy 2018).

The year of 2012 was declared as the European year of active ageing and solidary among generations. By marking this year, the European Union contributed to development of series of innovative ideas, starting initiatives in the active ageing area, in cooperation with policy makers, citizens, academic community, governments, employers and civil society organisations (Fortuna, 2013).

Whereas the past century can be characterised as a century of growing world population, authors Devedžić and Stojiljković believe that 21st century will present the world's population ageing century. This is supported by results of the study from 2015, suggesting that in the first half of 2015, the number of population on a world level reached 7.3 billion, being around one billion more than 12 years ago (Domazet, 2017).

Author Ranjzin R. supports the active ageing concept but with additional critical considerations and proposal for widening the definition of such term. Active ageing, as a conceptual paradigm and a political framework, has the potential to further marginalise significant segments of the older population. Therefore, there is a need to widen ageing conceptualisations by introducing the term "authentic ageing", in order to include a cultural diversity of ageing and promote social inclusion. Authentic ageing presents an ageing process worthy of individual and conceived by a personal culture (Federal Ministry of Labour and Social Policy ,2018).

3. THE STRATEGY FOR HEALTHY ACTIVE AGEING

The Strategy for healthy active ageing encourages the shift of the health care system from a curative to a preventive model, as well as promotion and support of rehabilitation and independent living (Galic, 2013). EU country members pay great attention to development of national programs and strategies, aiming at proper implementation of necessary reforms in the domain of prolonging activities of older persons, that is, prevention of their additional marginalisation. It is clear that national strategies of the old continent countries and measures they entail differ due to specificity of sociological, demographic and other circumstances (Domazet, 2017). The main idea behind the active ageing concept is to enable the individual to become an active participant in the life of his/her family, as well as in the society, despite existing cognitive or physical difficulties, frequently present in the senior age. Programs and policies intended for active ageing should consider a few important specificities of the older age. Therefore, in addition to active participation in the society, within the active ageing concept, programs and policies should promote not only physical but also mental and social welfare of older persons, their autonomy and independence, but also the change of perceptions on ageing among the population (Bobovic, 2018). Introduction of the ageing problematics in all areas of politics cannot be imagined without participative approach. Data being collected in a participative manner or "from the bottom" should serve policy creators for follow-up and evaluation. A participative approach has another significant purpose, to provide participation of older persons in the policy creation process

concerning issues of their interest, including policy preparation, application and evaluation (The United Nations Economic Commission for Europe – The Ageing Policy, (2009).

4. IMPROVING THE POSITION OF THIRD AGE PERSONS IN BOSNIA AND HERZEGOVINA

Demographic trends in Bosnia and Herzegovina, along with existing legal framework pertaining to ageing of the population, include numerous challenges to decision-makers, associations of citizens, communities, as well as legal entities working in the division of taking care of older persons. The United Nations Department of Economic and Social Affairs assumes that by 2060, the proportion of persons at the age of 65 and more in Bosnia and Herzegovina would be above 30% in the total population, whereas it was around 15% in 2010. Bosnia and Herzegovina is a signatory of numerous international documents providing security for adherence of basic human rights and liberties, pertaining to protection of human rights of older persons (Ramic-Catak, 2016). As a signatory of the Madrid International Plan of Action on Ageing and revised European Social Charter, Bosnia and Herzegovina accepted to develop policies, strategies and action plans that would enable healthy and active ageing of its population, as well as to develop a system that would enable regular data collection and international reporting on successes pertaining to active ageing of the population. It was concluded that the primary focus of the Strategy for improving the position of older persons in the Federation of BiH should be to solve the following problems: poverty, health care services, residential space and living conditions, ageing in rural and economically jeopardised areas, social protection, lifelong learning, active participation of older persons in the community, prevention of violence, ignorance and abuse of older persons by their relatives or other persons, social attitudes towards older people, as well as their intergenerational solidarity (Stojanovic, 2018). However, although current legal regulations define rights in the area of health and social protection of the population in both entities, older persons in Bosnia and Herzegovina are not adequately recognized in legal terms as beneficiaries and resources for social development (Galic, 2013).

5. CONCLUSION

On grounds of demographic indicators, we can conclude that Bosnia and Herzegovina is in urgent need to implement a strategy that would improve the health of older people and enable healthy and active ageing. The ageing issue shall be successfully integrated once all relevant subjects and participants get involved in the decision-making process in order to provide a successful response to the needs of all-age groups in all areas of politics. In order to foster more efficient implementation of strategies, we can identify the need for a better intersectoral cooperation on the level of cantons, entities and Bosnia and Herzegovina. The application of strategy mostly depends on the promotion and indication to significance of healthy and active ageing of seniors.

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