

ROMANIAN SOCIAL PROTECTION SYSTEM FOR EDERLY PEOPLE

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Abstract

In recent decades, demographic ageing has become a sensitive issue with an impact on various fields of activity and on future generations, marked by an alarming increase of elderly population and declining birth rate. The National System of Social Assistance represents a complex system of measures of monitorization and control of main risks that the citizens are exposed to respectively old age, illness, unemployment, injury and poverty. Through the guaranteed intervention of the state the framework for respecting human rights is insured, the means and measures of social protection, manifesting solidarity with the elderly people in need. As a member of the European Union, Romania is committed to promote and to implement political strategies for active ageing, insuring measures for maintaining optimal health conditions for citizens, social security, assistance and social protection. The purpose of the article consists in theoretical analysis of the national system for assistance and social protection destined for the elderly in Romania, which plays a fundamental role in implementing and updating policies for active ageing, as well as to stimulate population growth.

Keywords: *ageing population, active ageing, elderly people, social services, social protection*

Résumé

Au cours des dernières décennies, le vieillissement de la population est devenu une question sensible et l'impact sur les divers domaines et sur les générations futures, marqué par une augmentation de personnes âgées et de la baisse du taux de natalité. Le système national de sécurité sociale est un système complexe de mesures pour surveiller et contrôler les principaux risques pour les citoyens exposés aux vieillesse, maladie, chômage, pauvreté. Grâce à l'intervention de l'Etat est garanti un cadre des droits humains, des mesures de protection sociale et des moyens, pour la solidarité avec les personnes âgées dans le besoin. Comme

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Etat membre de l'Union européenne, la Roumanie est déterminée à promouvoir et mettre en œuvre des stratégies pour des politiques actives du vieillissement, assurant des mesures pour maintenir un état optimal de santé des citoyens, la sécurité sociale, la santé et la protection sociale. Le but de l'article est une analyse théorique du système national d'assistance sociale et de protection pour les personnes âgées en Roumanie, il a un rôle fondamental dans la mise en œuvre et la mise à jour des politiques de vieillissement actif, et de stimuler la croissance rapide de la population.

Mots-clés: *vieillesse de la population, le vieillissement actif, services aux personnes âgées, sociaux, la protection sociale*

Rezumat

În ultimele decenii, fenomenul de îmbătrânire demografică a devenit o problemă sensibilă și cu impact asupra diverselor domenii de activitate și asupra generațiilor viitoare, fiind marcat de o creștere alarmantă a populației vârstnice și reducerea natalității. Sistemul național de asistență socială reprezintă un sistem complex de măsuri de monitorizare și control al principalelor riscuri la care sunt expuși cetățenii, respectiv bătrânețea, boala, șomajul, accidentarea și sărăcia. Prin intervenția garantată a statului este asigurat cadrul pentru respectarea drepturilor omului, măsurile și mijloacele de protecție socială, manifestându-se solidaritate față de persoanele vârstnice aflate în dificultate. Ca stat membru al Uniunii Europene, România se angajează să promoveze și să implementeze strategiile politicilor de îmbătrânire activă, asigurând măsuri pentru menținerea stării optime de sănătate a cetățenilor, securitate socială, asistență și protecție socială. Scopul articolului constă în analiza teoretică a sistemului național de asistență și protecție socială destinat persoanelor vârstnice din România, acesta având un rol fundamental în aplicarea și actualizarea politicilor de îmbătrânire activă, cât și în stimularea accelerării ritmului de creștere demografică.

Cuvinte cheie: *îmbătrânirea demografică, îmbătrânire activă, persoane vârstnice, servicii sociale, protecție socială*

Introduction

Population aging is a global phenomenon which, in recent decades, is affecting all countries of the world. The overall reduction in the birth rate and the decrease in the number of children in parallel with the increase in the number of elderly constant results in changing the balance between generations.

The global phenomenon of population aging generates imbalances in the public pension systems, social services and health services in the E.U. countries, representing a challenge for governments and policy makers in these countries to reform these systems. Romania faces the same demographic issue, specific of E.U. countries, namely the decline of the total population, the growth of the elderly population and the average life span, feminization of aging, however the economic potential of Romania leads to difficulties in managing the social impact upon the elderly. Demographic forecasts regarding Romania show that in the following decades we will register a high and quick index of elderly people. It is estimated that between 2010 and 2050, the population structure by age group will

be fundamentally altered. Population of 60 years of and over will increase from 4, 2 (2005) to 6, 5 million (2050), and as a share in the total population from 19, 3 % to 33, 3 % (Ghețău, 2007, pp. 28-29).

Demographic ageing can be considered a success of public health policies, of economic and social development, representing of the biggest victory of humanity, but also one of biggest challenges it faces.

Eurostat index concerning population ageing is calculated by analysing “the number of people with ages of 65 and over, expressed as a percentage of the number of people with ages between 15 and 64 years old”. The higher the percentage, the older the population.

The age structure of the population is characterized by decrease in birth rate, which reduced the absolute and relative growth of young population (0-14 years). In parallel, increasing life expectancy has led to an increase in the number and share of elderly population (65 years and over). In this respect, it is noted a reduction in the share of young population (0-14 years), from 23, 7 % (1990) to 15, 4 % (2015) and increasing the share of the elderly population (65 years and over), from 10, 3 % (1990) to 16, 9 % (2015). Adult population of 15 to 64 years old decreased steadily from 66 % (1990) to 60, 7 % (2015).¹

In the following years, the index of dependency, namely the ratio between the number of potentially active population and the number of children and the elderly, will increase, and if we add the low birth rate and low number of active persons among the population, the demographic situation starts to show disturbing overtones. Concerns about the demographic ageing of the population had begun as early as the 1980s, as well as the economic and social consequences of early retirement policy, causing re-conceptualization of ageing and of terms such as productive ageing, healthy ageing and active ageing (Zrinščak, Lawrence, 2014, pp. 314-317). Society's ability to discover and understand all aspects of demographic changes and to connect them and tackle them through social policies and social work may be a guarantee to ensure the social welfare of the population.

1. Active ageing-normative concept. An objective of public policies

Active ageing is a normative concept that describes what should be a desired situation for old people at this stage of their lives. From a sociological perspective, some scholars consider that it is important to not only describe how their lives should be, but also for the realities and experiences perceived to be studied by the persons concerned (Bolzman, Kaeser, pp. 29-44). Active ageing means ageing in optimal conditions of health, having an active role in society and fulfillment professionally, as well as an autonomy in daily life and involvement in civic activities, this concept being developed in relation to the national system for

¹ Demographics Statistics offered by National Institute of Statistics, available by <http://statistici.insse.ro/shop/>, accessed on 04.10.2015

assistance and protection of the elderly. In Romania, as in other European countries, the ageing population is recorded due to the accelerated growth in the number of retirees, and the main challenge of the future will be generated by the pressure of public expenditure in the area of pensions and health.

A study by Eurostat regarding the active ageing indicates that only 47 % of Romanians consider that their country is "adapted to the needs of the elderly" (compared to 65 % in the EU) and only 27 % of the employed persons interviewed have expressed interest to continue working even after retirement age (33 % in the EU)². However, latest data contained in the public opinion barometer published in 2014 under the SenioriNET Project³, over 20 % of the elderly population of Romania needs home care services, but only 0.23 % of seniors are benefiting from these services and a percentage of over 81 % of providers of home care services have experienced an increased demand of services from the senior citizens. Survey results also show that the elderly do not know their rights and don't know they are eligible for home care services.

A holistic approach to active ageing involves the existence of programmes and concerns direct grant assistance, social security and social benefits to senior citizens. Assistance programmes and social protection of the elderly shapes three important dimensions, i.e. active ageing on the labour market, promoting independent living and participation in society. According to a. Walker (2002) active aging is "a comprehensive strategy to maximize the participation and well-being of senior citizens" (Walker, 2006, pp. 78-93). In this respect, European active ageing perspective emphasizes health, participation, and well-being of the elderly person. Regardless of age, the individual may play an important role in society and one can enjoy a good standard of living, even at old age. In this sense, the challenge is to use to the fullest the potential of elderly people who have it. European Year Initiative 2012 aimed to promote active ageing in three directions:

a. Participation in the labour market

With the increase in life expectancy in Europe, increases the retirement age at the same rate with the fear of job loss or inability to find another to ensure a decent pension. Therefore, elderly workers should be offered better opportunities in the work market with measures that insure: lifelong learning and the development of new skills, optimal working conditions, strategies for the management of the age pyramid in enterprises, specialized services for placement

² Information available by http://ec.europa.eu/romania/news/02032012_lansarea_anului_european_al_imbatranirii_active_ro.htm, accessed on 22.08.2014

³ Network SenioriNET Opinion Barometer on cooperation between NGOs providers home care services and public authorities (26 february 2014), available by http://www.caritas.org.ro/index.php?option=com_content&view=article&id=236:serviciile-de-ingrijire-la-domiciliu-o-ans-la-via-demn-pentru-varstnicii-din-romania&catid=3:lista-stirilor&Itemid=91, accessed on 06.04.2014

of older people, combating discrimination on age criteria, social and tax benefits that would encourage employment, the transfer of experience.

b. Active role in society

Retirement should not be considered as interruption or lack of activity. The contribution of older people to society when caring parents, spouses or grandchildren, or when they are volunteers, is often overlooked. One of the proposed objectives while promoting *European Year for Active Ageing* was to highlight the significant role they have in society the elderly and create more favorable conditions for their welfare measures to provide security of income in old age, the support for social participation and volunteering to support elderly taking care of another person, by ensuring a balance between work and duties to the person under care, of solidarity and dialogue to overcome differences in the use of new technology.

c. Autonomous way of life

With age, people's health is deteriorating, but the process may be slowed by environmental adaptation measures for older people with health problems or disabilities. Active aging means as well, ensuring the means necessary for older people to stay as long as possible in control of their lives. The objectives of the European Year of Active Ageing promotes action supports the establishment of a society change that supports easier social inclusion of people of all ages. This requires a sustained effort of collaboration between the various stakeholders, through actions of health promotion and prevention methods, provision of housing tailored for the elderly, provide means of transport adapted and cost effective, goods, services and suitable environments for the elderly, long term care based on an autonomous way of life, adaptation of technology that encourages an autonomous way of life.

In Romania it was officially launched the *European Year of Active Ageing* and *Solidarity between Generations*, multiple projects and activities being undertaken at national, regional and local level have aimed to promote active aging population. One of the projects under the European Year 2012 was initiated and implemented by *Caritas* Organisation Romania, which launched an electronic platform for and about active old people, aimed at creating an electronic platform for and about seniors active from Romania⁴. A unique initiative in Romania, this platform is a way to promote both remarkable life experiences of active seniors as well as the best practices concerning active aging and solidarity between generations. On this site there are resources available, advice and information about maintaining health, psychology, nutrition, volunteering and legislation, specialists who offer advice for older people who want to be updated with the

⁴ The electronic platform, <http://www.mereutanar.com>, not available, but was founded information by http://www.caritas.org.ro/index.php?option=com_content&view=article&id=172:primul-site-dedicat-seniorilor-activi-din-romania-wwwmereutanarcom&catid=3:lista-stirilor&Itemid=91, accessed on 06.04.2015

latest information in these areas and to adopt an active way of life. Caritas Organisation Romania was involved in organizing activities which were conducted with and for the elderly throughout the year 2012 and whose objective was keeping them healthy and active socially, culturally, economically and professionally. Besides the fact that it highlights the potential and skills of older people in Romania, the program has the role of bringing older and younger generations closer, the latter initiating seniors in the use of new technologies. Adding to this the fact that the site was itself a platform where the most active seniors from Romania can be nominated. From April 3rd to August 15th, 2012, people who knew, respected and wanted to show some appreciation for the elderly were able to nominate and to post the story on the mentioned platform. The most exciting stories, interesting and rare, collected during the project were awarded Seniors Gala, held in Bucharest on the occasion of the International Day of Older Persons (October 1st).

The Policy Centre for Diversity and Security (CRPDS), a nonprofit association based in Romania, operating in the field of conserving national cultural heritage and sharing common values and developed the project: “*My grandparents are cool!*”⁵. In this regard, CRPDS aims to promote the European Year of Active Ageing in 2012, organizing a public campaign highlighting the values of sharing experiences between generations. Also CRPDS continued to engage in numerous projects to fight against the marginalization of the elderly and to encourage dialogue between generations, bringing together several actions, such as:

- Establishing an electronic platform that presents stories, passions, common habits and objects that have value for both the young for their grandparents.
- The action “Orchards for the future” was organized in two villages in southern Romania (Borduşani, Ialomiţa and Caraula, Dolj County) with joint participation of children, adolescents and the elderly;
- A 24-minute video entitled “My grandparents are cool!” Produced and broadcasted to improve awareness about the problems of the elderly.

Princess Margareta of Romania Foundation implemented the project “*Volunteers - Ambassadors of Change*”⁶, which had as its objectives: the fight against exclusion and poverty by assisting the elderly at home or in nursing homes, encouraging seniors to actively participate and contribute to social life, offering them the chance to participate in various cultural and social activities, including as volunteers, to promote activities and exchanges between generations, awareness raising on the specific needs and living conditions of the

⁵ The electronic platform, <http://www.buniciimeisuntcool.ro/> not available, but was founded information by <https://www.facebook.com/BuniciiMeiSuntCool>, accessed on 04.04.2015

⁶ Available by <http://www.fpmr.ro/index.php?page=aproape>, accessed on 04.04.2015

elderly, and promoting voluntary activities, training and supervision of volunteers that provide assistance for the elderly.

The good practices enuntiated highlight models, active tools for promoting social policies destined for the elderly, to bridge the gap between generations and to raise awareness about the specific needs of these social categories.

2. The elderly. Conceptual distinctions

The elderly form a heterogeneous group in terms of age, qualification, gender, marital status, income etc., their socio-economic as to the degree of economic sustainability of their country, the rights and needs of this population in -a certain institutional environment, policy and in a certain community and societal context.

The elderly are a vulnerable population group with specific needs due to their physiological limitations and frailty characteristic of the ageing phenomenon⁷. Defining the concept of elderly person is based on biological and chronological perspective. These two criteria are analyzed to consider a person elder, the latter being more commonly used. UN General Assembly (1985) classifies the person according to age as follows: adults (45-59 years old), the elderly (60-64 years) and old people (65-90 years) (Roş, 2012, pp.76- 89). The aging population can not be considered a homogeneous entity, with other markers on the subgroup of elderly such as „younger” (65-74 years), the subgroup of elderly 'old' (75-84 years) and "longeval" (85 and over)⁸. Some authors believe that with retirement also occurred more semantic innovations to redefine the borders of age crossed by these people respectively „third age”, „dependent elderly” and more recently, the term „senior” (Caradec, 2001, p.20).

According to the legislation in Romania, the elderly person is a person who has reached the statutory retirement age⁹. The important event that marks the transition of an adult from active to inactive professional life is retirement. Under current law, the standard retirement age is 65 for men and 63 for women, and for military personnel in active troops and graduation volunteers, policemen and civil servants with special status in the penitentiary system, national defense, public order and national security, standard retirement age is 60 years for women and men also¹⁰.

⁷ Social Assistance Law no. 292/2011, art. 92, para. 1 and 2, published in the Official Gazette, Part I no. 905 of 20.12.2011

⁸ Report of the National Council for the Elderly, Romania Design elderly population by the year 2060 in May 2014, pp.13-14

⁹ According to art. 1 of Law No. 17/ 2000 on social assistance for the elderly, republished in 2007 in the Official Gazette, Part I no. 157 of 06 /03/ 2007

¹⁰ Law no. 263/ 2010 (updated 2015), published in the Official Gazette no. 444 of June 22, 2015

In Romania there are *five types of pensions*, respectively *retirement pension* (standard retirement is 65 for men and 63 for women), *early retirement*, *partial pension*, *disability pension* and *descendant's pension*¹¹. Social security benefits due under the public pension system in Romania and the benefits associated with these rights can transform the countries where the insured establish domicile or residence, as regulated by international agreements and conventions in which Romania is a party. Along with pensions there are other rights insured to the elderly such as: balneary treatment, death grant, in case of death of the ensured, pensioner or a member of the family¹².

The meaning of retirement is overwhelming for those who were used to define the usefulness in their profession. In general, the attitude towards retirement depends on a number of factors including: the person's socio-economic status, type of prior employment, health status, type of individual behavior. For many elderly people retirement is regarded as a loss and, as with any other losses, a meaning has to be found before that person could overcome it. The results of a sociological survey revealed a classification of retirement depending on attitude towards retirement (Gârleanu-Șoitu, 2006):

- retiree open to social and cultural life is 24 % of the population over 50 years;

- unhappy pensioners, forced to reduce consumption; most are women and are big consumers of mass-media, representing 14 % of the population over 50 years of age;

- the happy pensioner, comes from every social class and is active consumer; He is friendly, representing 22 % of retirees over age 50 years of age;

- pensioners who isolate themselves, are oriented towards themselves, come from modest social classes, representing 12 % of population over 50 years of age;

- caring people, with no excesses, come from all social categories, representing 28 percent of retirees over 50 years of age.

Some of the effects of retirement consist in reduction of income and occurrence of financial difficulties which is reflected in the loss of social positioning and individual prestige, loss of social status, the emergence of a negative image regarding the person, representing a burden for other family members. In Romania, it was registered in the year of 2015 a total of 5140, 8 thousand state pensioners and farmers with a monthly pension of 830, 2 lei/month, income that is below the national minimum wage¹³. These considerations related to the effects of retirement, exacerbated by the income indicators resulted

¹¹ Idid., art.51

¹² Ibid. art. 121

¹³ Data on the monthly pension, offered by Ministry of Labour, Family and Social Protection for the Elderly available by www.mmuncii.ro/J33/index.php/ro/, accessed on 18.09.2015

from pensions which are produced may outline a profile of the socially assisted pensioner or a potential beneficiary of social welfare.

3. The national system of social welfare for the elderly in Romania

The social welfare state is a concept of governing in which the state plays a key role in protecting and promoting the economic and social well-being of its citizens, based on the principles of equal opportunity, equitable distribution of the benefits of social and public responsibility for those who cannot prevail of the minimum provisions for a better living¹⁴. The general term may cover a variety of forms of social and economic organization. Sociologist TH. Marshall identified the modern welfare state as a distinctive combination of democracy, welfare and capitalism (Marshall, 1950). The emergence and consolidation of the European states, later called “of well-being”, constitute an essential element of the transformation of Europe, beginning with the Industrial Revolution and the French Revolution, welfare state being sketched from an institutional point of view in the second half of the 19th century, occupying itself between the formation of national states (german and italian) and War World One.

Romania is defined as a “social state” by regulations in the 2003 Constitution, in article 47 being specified that the state must ensure, through social and economic measures, a fair standard of living for citizens and, at the same time, rights for all citizens, without discrimination.

Social protection, a concept introduced by John k. Galbraith, represents the policies and programs designed to reduce poverty and vulnerabilities through effective promotion of the labour market, reducing people's exposure to risks, and increase their ability to manage economic and social risks, such as: *unemployment, exclusion, disease, invalidity and old age* (Heise, Lierse, 2012, pp. 1-42). As an element of international law, the International Labour Organisation adopted the 1952 Convention nr. 102, published in Official Gazette, Romania part I no. 325 dated 15/ 05/ 2009, it is promoted the term “*social security*”, which is a complementary element of social insurance and social assistance¹⁵. In Romania, the social assistance law regulates the national system of social assistance and defines it as the ensemble of institutions, measures and actions whereby the state, represented by the central and local public administration authorities, civil society, involved in preventing, limiting or removing temporary or permanent effects of situations which may give rise to marginalization or social exclusion of

¹⁴ Britannica Online Encyclopedia - Welfare state, The Editors of Encyclopædia Britannica, available by <http://www.britannica.com/topic/welfare-state>, accessed on 04.10.2015

¹⁵ Available by http://www.euroavocatura.ro/legislatie/348/Conventie_nr_102_1952_a_OIM_privind_normele_minime_de_securitate_sociala/page/4#nextPage, accessed on 30.08.2015

individuals, family, groups or communities. The national social welfare system intervenes subsidiary or, where appropriate, supplementary to the social security systems and the system of social welfare benefits and social services system. In other words, looming three areas of intervention of the social assistance system, namely, *intervention in the labour market*, through policies and programs that promote employment on the labour market, *social security*, which mitigates the risks associated with unemployment, invalidity, age limit, and *social assistance*, which interferes with the resources transferred to vulnerable people.

Social assistance benefits, depending on the conditions of eligibility, categorized into social welfare benefits, which are based on sample testing the livelihood of a person living alone or of family, universal social assistance benefits, granted without testing the livelihoods of single persons or family and categorial social assistance benefits, with or without testing the livelihoods of single persons or of family.

The current system of social assistance, mainly comprises the following aspects: transfers from the State budget, various facilities, home care services, hosting services, supervision, rehabilitation in special units, specialized personnel for the provision of services, decentralization of social actions to the communities, and local and county funding, social partnership and solidarity of the members of the communities, the identification of beneficiaries and to establish forms of support.

Under the Social Assistance Law 292/ 2011, social services represent the activity or set of activities carried out in order to meet social needs, as well as special needs, individual, family or group, to overcome situations of difficulty, risk prevention and combating social exclusion, promoting social inclusion and raising the quality of life.

Social services with primary character (proximity services) involve actions for prevention or limitation of difficult situations or vulnerability, which can result in marginalization or social exclusion.

Integrated services/ specialized are centered on maintaining, restoring or developing individual capacities to overcome a situation of social need.

The granting of social services requires a comprehensive and integrated approach to ensure the maintenance of elderly persons in their own home. Legislation on social assistance provides that elderly person's family is required to provide care and maintenance, so as the family income is not affected, considered to be the minimum necessity for the livelihood of the person obliged to maintenance as well as their children's livelihood. At the core of the process for the granting of social services for the elderly are the following principles: equality, freedom of choice, independence and individuality of each person, quality services, affordable, flexible, adapted to social needs, transparency and the participation of community members in according social services, confidentiality concerning the beneficiaries of social services, respect for human dignity.

The elderly benefit of social assistance measures depending on the personal circumstances, socio-economic nature, medical and physiological, in addition to the benefits of social insurance to cover the risks of old age and failing health. Protection of the elderly, whose daily living cannot be supported by their own means, through a wide variety of benefits and services such as social assistance or specialized care in residential units.

Social welfare for the elderly is regulated by Law No. 17/ 2000 setting out the social services provided to senior citizens in their homes, in residential institutions, in daycare centers, clubs for the elderly, apartments and social housing. Social welfare services for the elderly person is granted at the request of the person concerned, the legal representative of the elderly, the Court, the specialized personnel within the City Council, the Police, the pensioners organization, of religious organizations recognised in Romania or nongovernmental organizations that have social welfare activity for the elderly. Homes for the elderly are organized into wards for three categories of single elderly persons, namely: *dependent people, semi-dependent people and people who are not dependent.*

In the wake of a study it has been identified a number of problematic areas of elderly persons, namely: access to adequate medical care, poverty/indigence, difficulty in socialization, lack of company, faulty information or advice, problems of the social care system for the elderly, limited capacity of auto-manangement/ the need for administrative support, dependency on others (caregivers problems) and spiritual needs (Bodogai, 2009). This is a list of the difficulties incurred by in Romania the elderly, shows that some of these can be classified into categories of vulnerable social groups of the population.

Current services intended for the protection of the elderly, under Law No. 47/ 2000 republished, are day services, care services at home and residential services.

The main categories of social services granted to senior citizens provided for by the current legislation are:

- *Social services aimed for personal care, prevention of social exclusion and support for social reintegration*, legal advice and administrative support to pay current obligations and services, housing and household care, aid for housekeeping, food preparation;

- *Socio-medical services* for aid in order to achieve personal hygiene, readaptation of physical and psychological capacities, adaptation of housing to the needs of the elderly person and economic activities, social and cultural, as well as temporary care in day care centres, night shelters or other specialized centers;

- *Medical services*, in the form of consultations and health care, are awarded on the basis of legal regulations relating to health and social security;

- *Counselling social services* in order to prevent social exclusion and for

social reintegration, without payment of a contribution, as a fundamental right of the elderly, done by social workers.

According to the proposal project of the Romanian Government for the approval of social services Nomenclature and of the framework regulation on the organization and functioning of social services classified categories of social services granted to the elderly, as follows:

- *Day care centers for the elderly* (day care centers for assistance and rehabilitation, day care centers for socialization and spending free time/ club type, multifunctional day care centers);

- *Residential centers for assistance and care* (homes for the elderly, pensioner communities, respiro centers, crisis centers, protected housing);

- *Residential care centers and socio-medical assistance* (socio-medical residential centers, palliative care residential centers);

- *Home care services* (home care units, home care provided by caretakers, personal assistants, health care centers and in-home assistance for people with disabilities).

Community services for the elderly are realized with their consent and assume the temporary or permanent care at home, temporary or permanent care in a home for the elderly and care in day care centres, clubs for the elderly, nursing homes, apartments and social housing. Under the Law, the people that can benefit of social assistance are the ones who are not in someone's care already, have no housing and no possibility to secure living conditions on the basis of their own resources, or don't realize they are not sufficient to ensure the needs, cannot be managing alone or requires specialized care, and is unable to ensure the socio-medical needs, because of disease, physical or mental state.

In home personal care services for the elderly are carried out by a formal or informal caregiver. By legal status, the person has facilities and support services, allowances, counselling services, respite type services and holidays for care in accordance with the Law. In order to maintain their own living environment and prevention of situations of difficulty and dependency, the elderly benefit from counselling services, accompaniment, as well as services intended for dwelling adaptation or arrangement, depending on the nature and degree of impairment of functional autonomy.

3.1. Social assistance benefits insured for elderly persons

Social assistance benefits represent, according to the Romanian legislation, some form of addition or substitute of income individual / domestic derived from work in order to ensure a minimal standard of living, as well as a form of support in order to promote social inclusion and quality of life for certain categories of persons whose rights are expressly provided for by Law (according to article 7 of Law No. 292/2011).

In accordance with the provisions of law No. 17/2000 republished, the

elderly person that is found in one of the following situations shall receive adequate assistance and social protection needs, meaning the person has no family or dependants or persons bound to them, according to the legal provisions in force, no housing and no possibility to secure living conditions based on own resources, don't realize their own income or they are not sufficient to ensure the necessary care cannot be managing single or require specialized care, or are unable to ensure socio-medical needs, because of disease physical or mental state.

Social security benefits for the elderly are:

- social assistance benefits in preventing and combating poverty and the risk of social exclusion;
- care allowance granted in accordance with the law;
- grants or contributions to ensure the quality of social services, intended to cover the cost of food in canteens, social centres and residential care, as well as to support certain nutritional supplements;
- facilities relating to urban transport and interurban, telephone, radio and tv, the purchase of food, balneary treatment or for recreation, as well as other services;
- aid for emergencies which endanger the life and safety of the elderly person, and to avoid institutionalization;
- aid in kind such as: food, clothing, footwear, medicines and medical devices, construction materials and the like.

The elderly have the right to receive health care at home, in a residential centre for the elderly, day care centres, clubs for the elderly, nursing homes, apartments and social housing, and the like. In the case of granting services of home care, the elderly person must have incomes five times lower than the monthly net income level taken into account in determining social aid for a single person, social services and socio-medical services being provided to their home without them paying a contribution. If the elderly person's income is above the level mentioned above, the applicant must pay a contribution that is determined according to the established services and revenues, without exceeding the cost set by the City Council.

In order for the elderly to receive assistance and care services provided by a public residential center or day care center or at home, they have to address the request at the Town Hall where they have domicile. As a result of the survey that will be conducted at the domicile of the elderly person, local public administration authorities shall determine entitlement to social support services provided in centres that are in own administration. Social survey will include data on illnesses of the person demanding, the ability to manage themselves, living conditions, income, etc. Evaluation of functional autonomy is performed, as a rule, at the place of residence of the person by a mobile team of evaluators, specialists in social work and psychology from Public service of social assistance within the General Directorate of social assistance and child protection.

In the situation of elderly persons that are dependant, it is mandatory that the person's medical specialist be added to the team. The right to social assistance for the elderly and is determined with due regard to the framing criteria of levels of dependency, as provided for in the normative act which regulates *the national grid for evaluation of elderly needs*¹⁶. Conditions of service and eligibility criteria for inclusion in the social programmes implemented are different, depending on the requested service. The average monthly cost of maintenance shall be determined annually by the local councils and/or County, as applicable, before adopting their own budgets. It is established depending on the degree of dependency of the elderly in care and takes into account maintenance expenses, food and household inventory objects, bed mattresses and equipment, sanitary materials and other necessary materials.

In the case of services provided in residential centres for the elderly, in the absence of income and legal supporters, services provided in residential centres for the elderly will be ensured without paying the contribution. If the applicant and the legal advocates have insufficient income, the amount of payable monthly contribution for maintenance is determined by the Municipal Council/County. If the elderly person has income, it owes a monthly maintenance contribution in the amount of up to 60 % of the monthly personal income, without exceeding the average monthly cost of maintenance approved for each dorm. If the monthly maintenance contribution of up to 60 % of the monthly personal income does not cover the full value of the monthly maintenance contribution, the difference shall be paid by guardians of the elderly cared in care centers if they realize a monthly income with the amount greater than 600 lei, per family member. Legal supporters can cover their own monthly contribution revenues through a payment engagement. If by applying the quota of 60 % it covers the total amount of the monthly contribution, legal advocates are no longer held by the obligation to support the payment of the difference in contribution. The average monthly cost of maintenance in residential centres for people with disabilities is governed by specific legislation in force¹⁷. The right to social assistance in social assistance institutions for the elderly is determined on the basis of the survey and certificate of employment in a disabled category, as appropriate.

3.2. Health services and social assistance in Romania. Pensions and other social insurance rights of migrants in Romania

¹⁶ The Government Decision no. 886 of 5 October 2000 for approval of the National Grid needs assessment of older people, published in the Official Gazette no. 507 of 16 October 2000

¹⁷ Order no. 467/2009 on the establishment of average monthly maintenance cost in the residential centers for people with disabilities and the level of contributions payable by monthly maintenance disabled adults assisted in centers or their supporters

The Romanian social insurance system regulates the rights of older people affected by the migration process. As a socio-demographic event, migration refers to the movement of a person, either individually or within a group, outside of his community of residence, during a period of reference given, to change stable domicile and/or usual work place (S, 1984, p. 20). Therefore, the central authorities of Romania have elaborated a strategy regarding immigration, by targeting measures for migrant individuals¹⁸.

According to the Romanian legislation, payment of health insurance by persons who have been granted residence permit in Romania is compulsory for all periods in which they hold that right, including those in which the holder is not in the country. Insurance has to be paid monthly, and its value is influenced by the level of income of the holder.

At the request of legalizing residence in Romania for the first time, the Romanian Office for immigration is requesting proof of health insurance, in this case the practice of the national institutes of health is to require payment of voluntary insurance, since the person does not have an identity document issued by the Romanian authorities. The categories of individuals covered by the rules referred to in the optional health insurance are: accredited members of diplomatic missions in Romania, foreign citizens and stateless persons temporarily in the country, without soliciting long stay, Romanian citizens residing abroad temporarily in the country. Persons with pensioner status, people with disabilities or those who are unemployed, do not have pension or social aid are automatically insured and not pay medical insurance. People who don't realize revenue will pay compulsory health insurance contributions representing 5, 5 % of the national minimum wage, depending on the taxable incomes obtained in the last 5 years.

Under Law No. 292/ 2011 social assistance to foreigners and stateless persons who have their domicile or residence in Romania are entitled to social assistance, according to the Romanian legislation and the regulations of the European Union and of the agreements and treaties to which Romania is part of.

The social services system includes services of assistance and support to ensure the basic needs of the individual, personal care services, recovery/ rehabilitation, insertion/ social reinsertion, etc. Social services benefits are granted to the following categories: individuals and families in difficult situations (individuals and families without income or with low income), the elderly, the homeless, people with disabilities, victims of trafficking, persons deprived of their liberty and other persons in cases of social need.

If a citizen has a permanent residence permit or temporary residence permit which is not conditioned by conducting activities in Romania and meets the legal conditions, can benefit from all the rights provided by the Romanian law

¹⁸ National Immigration Strategy for the period 2015-2018

on social protection. These conditions relate mainly to the minimum qualifying period of contribution in the public pension system and other social insurance rights, as well as the standard age the person must meet to be entitled to a pension.

Public administration institutions specialized in the assistance of the elderly which provide specialized services are organized at the local level through The Public Service of Social Assistance (S.P.A.S.) of the Cities and at County-level, General Directorate of Social Assistance and Child Protection (D.G.A.S.P.C.) for the sectors of Bucharest and the Counties and other profit-making private bodies accredited to provide assistance and protection services.

Discussions

The general phenomenon of demographic ageing obliges the society to cope with an increasing number of retirees, but also has a large, significant number of them who were left alone. In this sense, demographic ageing compels a rethinking of the place occupied in society by these people, that are increasingly numerous. This exerts pressure on the annual budgets of social insurance that provides pensions and other rights. Therefore, there are at least three sources of these pressures, namely assuring the pension amount and duration of payment, the small value of these pensions provided to some categories of pensioners and the increasing health costs for the elderly. Demographic and epidemiological transitions result in changes regarding the health needs of the population, the increasing number of requests for long-term care. Profiled tendencies highlight the increasing prevalence of long-term care in the population and the inability of informal systems to respond to these needs, bearing in mind that the traditional family functions that change.

At present, Romania has low social standards, especially in the pensioners situation who receive allowances for various disabilities, being levied as “social assistance”, sometimes it confuses, precisely because of the allocated sums are smaller than in Europe. Therefore, the financial consequences of demographic trends observed are justified to identify fair and protective solutions for both existing generations and for those that follows, and a series of economic changes, infrastructure, health care and social assistance for the elderly. The problems identified at the level of this category of population, coupled with those of the migration phenomenon, are leading to the shaping of an intervention aimed at balancing the ratio of contributions to the budget and the social funds and the beneficiaries, the revision of the pension system, decreasing the dependency rate, decreasing the number of retiring early, extending and intensifying programmes for socio-medical services tailored to the needs of the elderly population. In addition, protective services and social assistance must be accredited for the reconstruction and development of the capacities of older people (including those who have isolated progressively), understanding the

nature of the problems they're facing to identify constructive solutions and to develop individual and collective skills in their support.

In European culture the degree of civilization and development of a society is measured by the system of social protection that exists in that society, so the redistribution of revenue systems and the system of social services fail to provide an acceptable standard of living and equal opportunities for participation in social life for all citizens. The Social State in Romania promotes a mixed responsibility, on one hand, through the component of family involvement, and on the other hand the public and private social protection and assistance. Both support systems should be sustained and developed, their complementary intake modifying in time also depending on the socio-economic situation. The most important need of the elderly is to benefit of social support for optimal management of their own lives, prevention of loss of autonomy and efficient integration at a society level, using their professional and civic potential. Assistante and social protection programs for the elderly should be viewed through a double optic, one of awareness of the population on the processes of ageing, and the other at an educational level. Thus, at the family sphere level, the focus is on educating the elderly family members, for the purposes of restructuring the perceptions and cognitions pertaining to the meaning of the third age, and at the societal level, educating society, for the purpose of combating so-called "myths relating to the elderly" (they don't fall in love anymore, they are a burden, they are unproductive, always have medical problems, can't learn, always forget, can't enjoy life, etc.).

The establishment of a comprehensive and dynamic framework, allowing for the development and implementation of policies and programmes for social assistance intended for the specific needs of the elderly in order to support their participation in the economic life, social and cultural community and ensure their right to a life, must be a priority intervention to overcome the level of covering only the social need. Although there are many forms of care of elderly people, both in the residential system, as well as the day care and home care, the active programs of State policies should promote and to address a strategy of gradual replacement of residential institutions and to be focused with alternative services support for the elderly in need, ensuring equal opportunity and individual or group autonomy, protection through integration, curative potential, after the family model. Even the inability to maintain elderly people within the constellation of their family, active ageing remains an integrative process for empowering elders concerning autonomy and their usefulness for as long as possible with the age and, where possible, to be able to contribute to the economy and society. Such an approach could allow the creation of two directions of action for the programs of assistance and social protection destined for the elderly, one oriented towards an "inclusive society" and the other towards a "participative" one.

The mobilization of the necessary resources, empowering relevant factors and ensuring effective public-private partnership, in view of valuing the elderly in society and to promote the protection and respect for their rights, constitutes a central goal. Completion, tabulation and professionalization of the specialized social services system in order to ensure accessibility, transparency and coherence of the system for the benefit of the elderly, the most important target in providing support services in the long term, both formal and informal, is the share of the years spent active by the elderly population with good health.

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