



**GIVINGCARE**  
Empowering Caregivers

# Proces staranja

Module 1: OSNOVNA NAČELA SKRBI ZA DRUGE

Sub-Module 1.4.: Proces staranja



Co-funded by the  
Erasmus+ Programme  
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# Uvod

<b>Module</b>	OSNOVNA NAČELA SKRBI ZA DRUGE
<b>Sub-module</b>	Proces staranja
<b>Lesson nr.</b>	#1
<b>Duration</b> (minutes)	300
<b>Date</b>	

# Izid učne ure

1. Razumeti koncept staranja
2. Prepoznavanje glavnih učinkov in sprememb, ki jih povzroča proces staranja.
3. Prepoznavanje težav in patologij, ki prizadenejo odrasle ter njihovih učinkov na več ravneh.

# Teme

Uvod v zdravje in staranje

- Zdravje in staranje
- Teorije biološkega staranja

Proces staranja

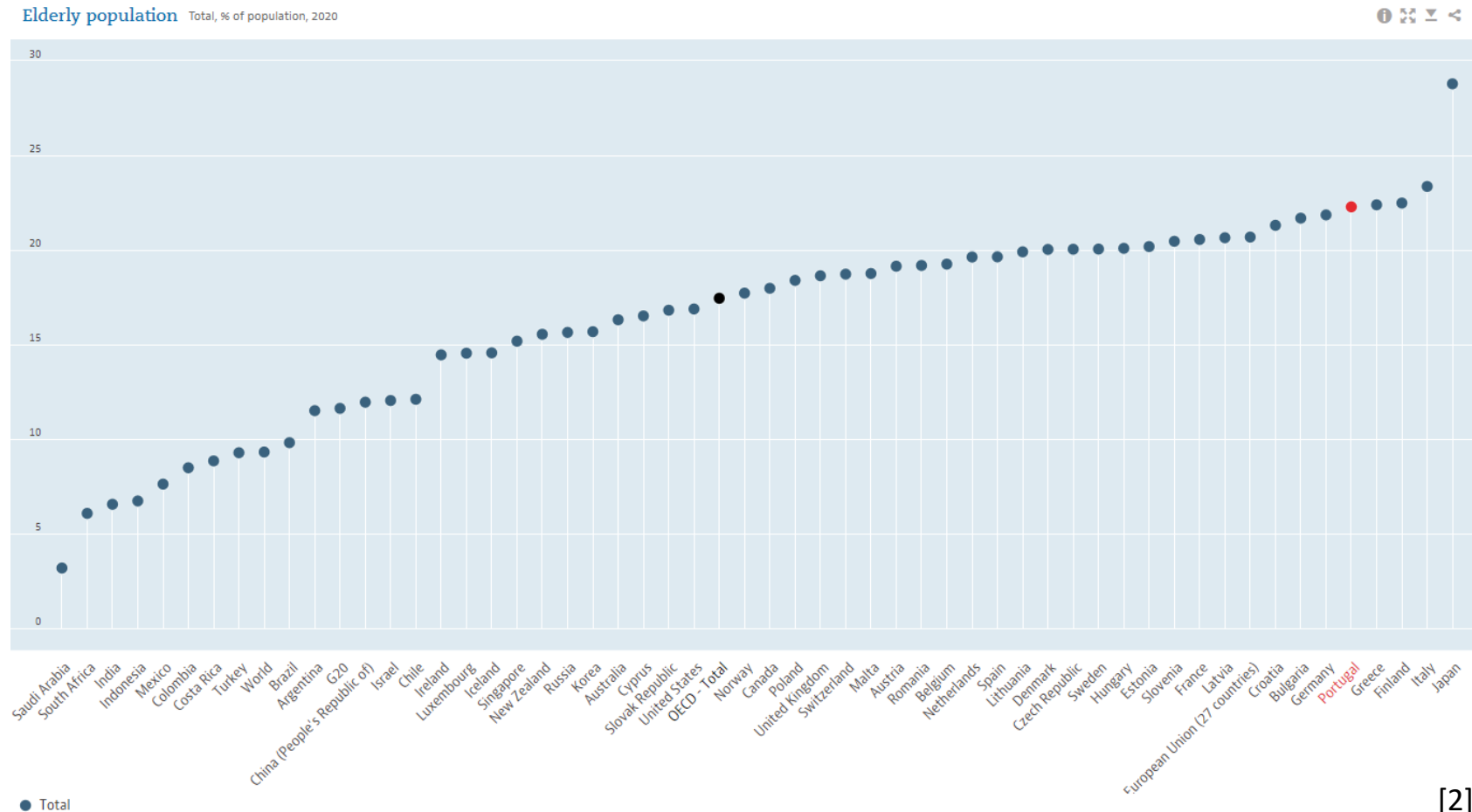
- Fiziološke spremembe
- Psihološke spremembe
- Družbene spremembe
- Zdravo in aktivno staranje: koncepti

Glavna vprašanja, povezana z zdravjem, ki prizadenejo odrasle

Staranje in kronične bolezni/stanja

# Uvod v zdravje in staranje

- ✓ Med letoma 2015 in 2050 se bo delež svetovnega prebivalstva, starejšega od 60 let, skoraj podvojil z 12 % na 22 %.
- ✓ Leta 2050 bo 80 % starejših ljudi živelo v državah z nizkimi in srednjimi dohodki.
- ✓ Staranje prebivalstva poteka veliko hitreje kot v preteklosti.

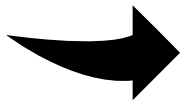


# Uvod v zdravje in staranje

“Staranje lahko opredelimo kot časovno odvisen niz kumulativnih, progresivnih, notranjih in škodljivih sprememb, ki se začnejo kazati v reproduktivni zrelosti in se na koncu končajo s smrtjo (Arkinhg, 1998).”[3]

“Čeprav staranje samo po sebi ni bolezen, pa običajno poveča dovzetnost za boleznii.”[3]

“Staranje se nanaša na proces ali skupino procesov, ki potekajo v živih organizmih in sčasoma privedejo do izgube prilagodljivosti, funkcionalne okvare in nazadnje smrti.”[4]



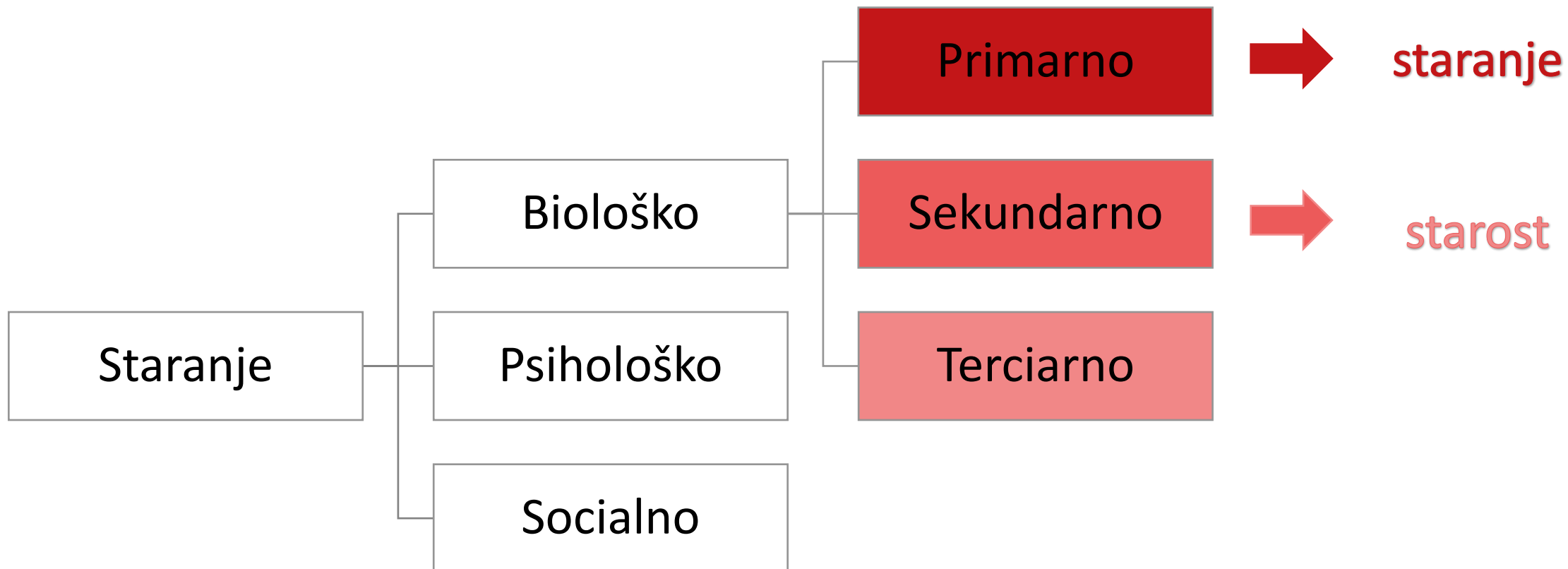
“Zdravje je stanje popolnega telesnega, duševnega in socialnega blagostanja in ne le odsotnost boleznii ali slabosti.”[5]

3. Moody, H. R. (2002). *Aging. Concepts and Controversies* (4th ed.). Pine Forge Press.

4. Spirduso, W. W., Francis, K. L., & MacRae, P. G. (2005). *Physical Dimensions of Aging* (2 ed.). Human Kinetics.

5. Constitution of the World Health Organization, (1948). <https://www.who.int/about/governance/constitution>

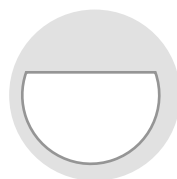
# Uvod v zdravje in staranje



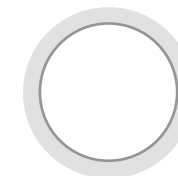
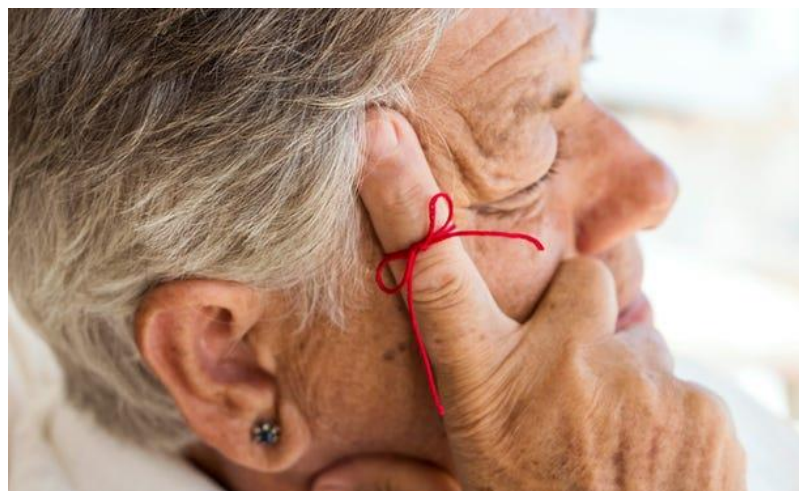
# Uvod v zdravje in staranje



**Biološko**



**Psihološko**

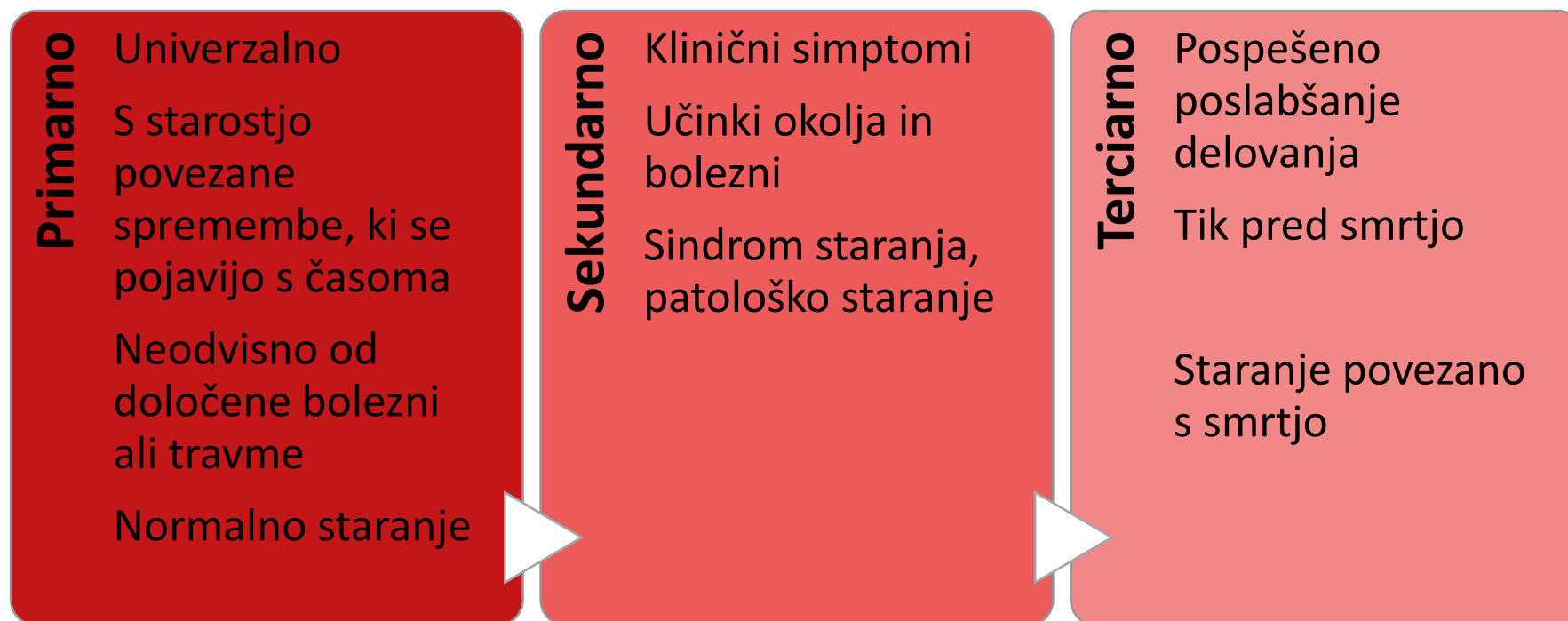


**Socialno**





# Uvod v zdravje in staranje



3. Moody, H. R. (2002). *Aging. Concepts and Controversies* (4th ed.). Pine Forge Press.

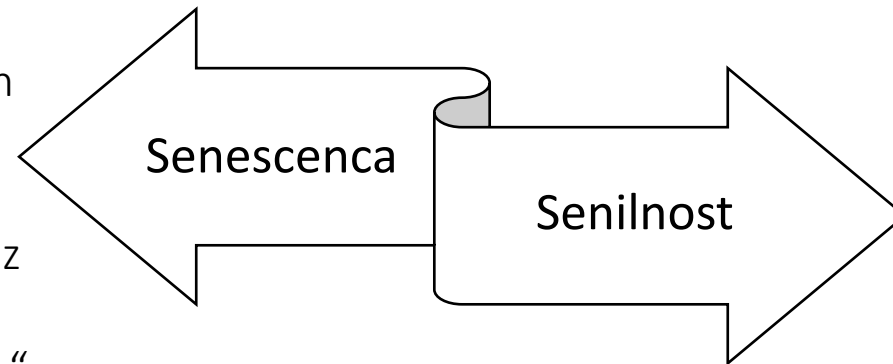
4. Spirduso, W. W., Francis, K. L., & MacRae, P. G. (2005). *Physical Dimensions of Aging* (2 ed.). Human Kinetics.

7. Ram, N., Gerstorf, D., Fauth, E., Zarit, S., & Malmberg, B. (2010). Aging, Disablement, and Dying: Using Time-as-Process and Time-as-Resources Metrics to Chart Late-Life Change. *Res Hum Dev*, 7(1), 27-44.  
<https://doi.org/10.1080/15427600903578151>

# Uvod v zdravje in staranje

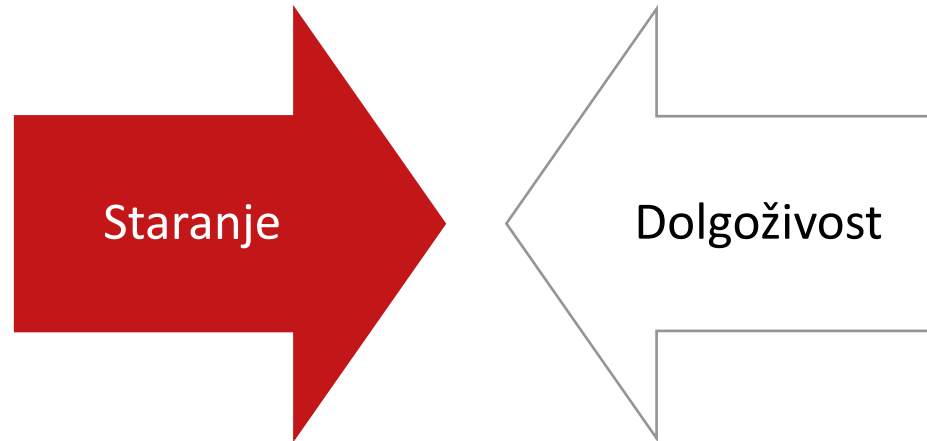
“Senescenca opisuje vse postmaturalne spremembe in naraščajočo ranljivost, s katero se posamezniki soočajo zaradi teh sprememb.”

“Senescenca opisuje skupino učinkov, ki z naraščajočo starostjo vodijo v zmanjševanje pričakovanj glede življenja,” (Comfort, 1979).



“Lastnost biti senilen (= kazati slabe umske sposobnosti zaradi starosti “(Cambridge Dictionary)

# Uvod v zdravje in staranje



“Normalno staranje lahko opredelimo kot temeljni biološki proces, ki je odvisen od časa in čeprav sam po sebi ni bolezen, vključuje funkcionalno izgubo ter dovzetnost za bolezni in smrt.”

→ **Gompertz Law**

# Uvod v zdravje in staranje: Biološke teorije

## Teorija o obrabi

Staranje kot posledica naključja

Vsak dan umre na tisoče celic, ki se nadomestijo, in popravijo se poškodovani deli celic

## Avtoimunska teorija

Sistem lahko sčasoma postane okvarjen in ne loči več telesu lastnih tkiv od tujih.

## Teorija ure staranja

Sistem lahko sčasoma postane okvarjen in ne loči več telesu zadnjih tkiv od tujih

Staranje se obravnava kot normalen del zaporedja, ki vodi od spočetja prek razvoja do staranja in nazadnje do smrti

## Teorija navzkrižnih povezav

Spremembe, ki jih opazimo, so posledica kopičenja zamreženih spojin v kolagenu, ki postopoma postane tog.

Povezovalno tkivo v telesu, na primer koža ali očesna leča, s starostjo izgublja elastičnost

## Prosti radikali

Prosti radikali so zelo reaktivni in strupeni, ko pridejo v stik z drugimi celičnimi strukturami, pri čemer nastanejo biološko nenormalne molekule

Antioksidativne snovi

## Celična teorija

Normalne telesne celice imajo omejen potencial za razmnoževanje in ohranjanje svoje funkcionalne zmogljivosti (Hayflickova meja).

Telomere

# Uvod v zdravje in staranje: Socialne teorije

## Teorija modernizacije

Vloga in status starejših sta obratno sorazmerna s tehnološkim napredkom. Dejavniki, kot sta urbanizacija in socialna mobilnost, povzročajo razpršitev družin, medtem ko tehnološke spremembe zmanjšujejo vrednost modrosti ali življenjskih izkušenj starejših, kar vodi v izgubo statusa in moči.

## Teorija razdruževanja

- Na starost gleda kot na čas, ko se starejša oseba in družba medsebojno ločujeta, kot v primeru upokojitve.
- Ta proces ločitve je razumljen kot naravna in normalna težnja, ki odraža osnovni biološki ritem življenja.

## Teorija dejavnosti

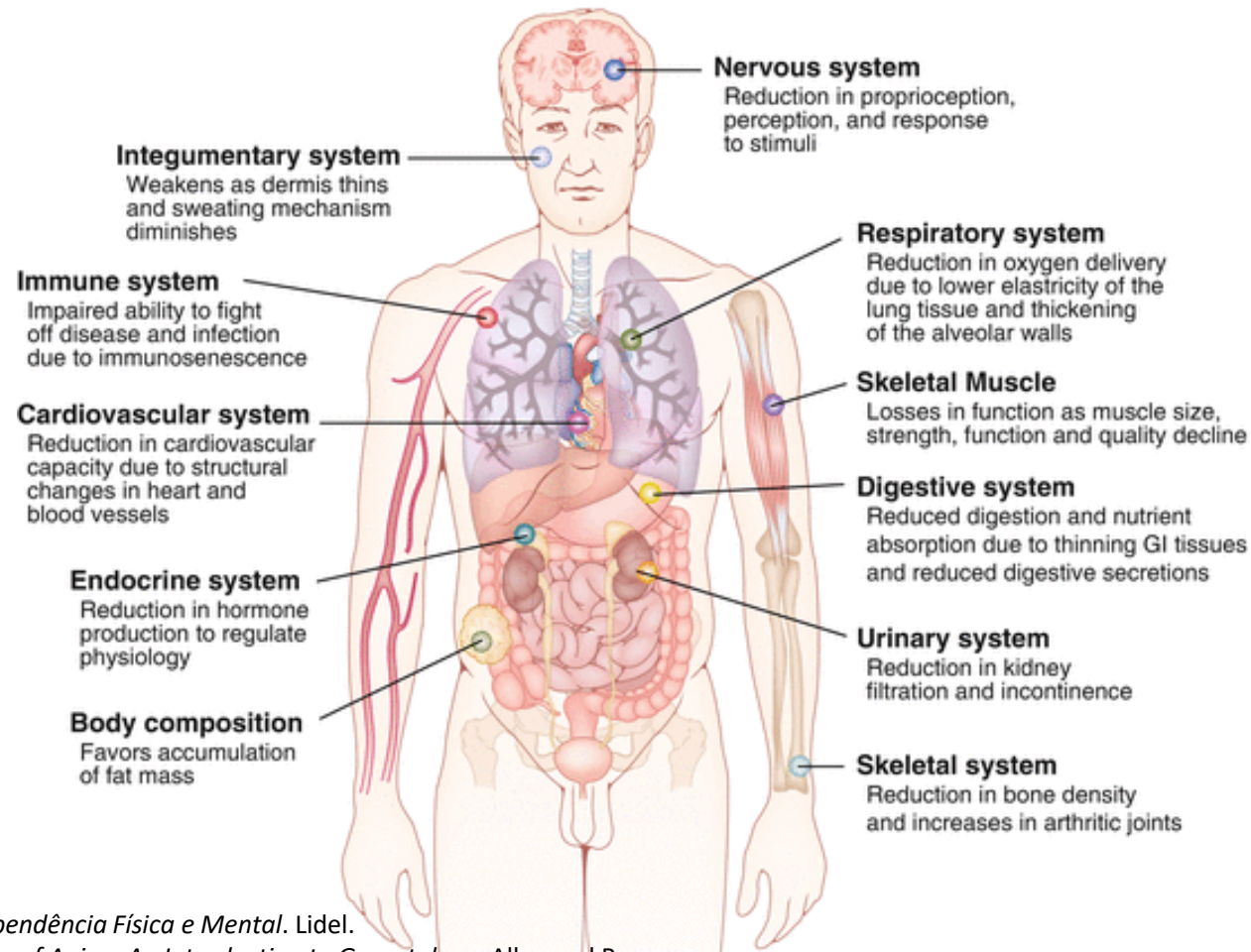
- Teorija dejavnosti je priznala, da večina ljudi v starosti nadaljuje z vlogami in življenjskimi dejavnostmi, ki so jih imeli prej, saj imajo še vedno enake potrebe in vrednote.
- Podobno meni tudi teorija kontinuitete staranja, ki pravi, da so ljudje, ki se starajo, nagnjeni k temu, da čim bolj ohranjajo iste navade, osebnost in življenjski slog, ki so jih razvili v prejšnjih letih.

# Uvod v zdravje in staranje - miti

1. Starost neizogibno spremlja senilnost.
2. Večina starih ljudi je osamljenih in izoliranih od svojih družin
3. Večina starih ljudi je slabega zdravja
4. Starejši ljudje so pogosteje kot mlajši žrtve kaznivih dejanj
5. Večina starih ljudi živi v revščini
6. Starejši ljudje so s starostjo bolj verni
7. Starejši delavci so manj produktivni kot mlajši
8. Starim ljudem, ki se upokojijo, se običajno poslabša zdravje in zgodaj umrejo
9. Večina starih ljudi nima zanimanja za spolne odnose ali sposobnosti za njih.
10. Večina starih ljudi konča v domovih za ostarele in drugih ustanovah za dolgotrajno oskrbo

## Ageism

# Proces staranja: psihološke spremembe



6. Sequeira, C. (2010). *Cuidar de Idosos com Dependência Física e Mental*. Lidel.


8. Kart, C. S., & Kinney, J. M. (2001). *The Realities of Aging. An Introduction to Gerontology*. Allyn and Bacon.

9. Fragala, M. S. (2015). The Physiology of Aging and Exercise. In G. M. Sullivan & A. K. Pomidor (Eds.), *Exercise for Aging Adults: A Guide for Practitioners* (pp. 1-11). Springer International Publishing.

10. Spirduso, W. W., Francis, K. L., & MacRae, P. G. (2005). *Physical Dimensions of Aging* (2 ed.). Human Kinetics.

11. Shephard, R. J. (1997). *Aging, physical activity, and health* (1 ed.). Human Kinetics.

# Procesi staranja: Psihološke spremembe

- 
- Kratkoročni spomin se s starostjo opazno spreminja, dolgoročni spomin pa se s starostjo slabša manj.
  - Nekatere spremembe v kogniciji so s starostjo normalne, na primer počasnejši reakcijski čas in slabše sposobnosti reševanja problemov.
  - Osebnostne lastnosti ostanejo s časom razmeroma stabilne.
  - Demenca (najpogostejša je Alzheimerjeva bolezen) ni del normalnega staranja.



# Procesi staranja: socialne spremembe

Upokojitev

Vloga  
babice/dedka

Odvisnost in  
bolezen

Spremembe v  
znanih  
odnosih

Mreža socialne  
podpore

Smrt

# Procesi staranja: ključni koncepti

Avtonomija je zaznana sposobnost nadzora, obvladovanja in sprejemanja osebnih odločitev glede vsakodnevnega življenja v skladu z lastnimi pravili in željami.

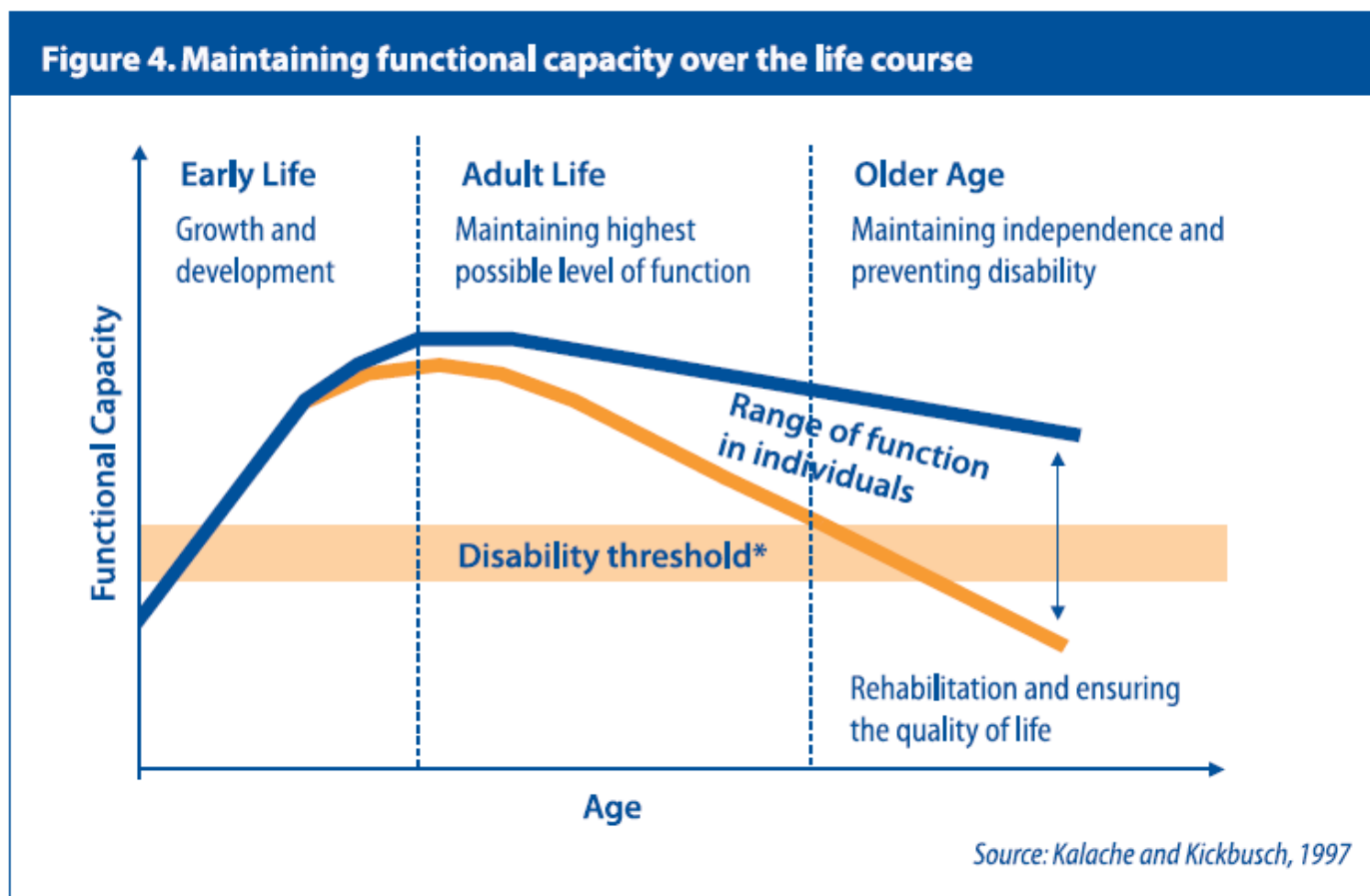
Neodvisnost se običajno razume kot sposobnost opravljanja dejavnosti iz vsakdanjega življenja (ADL), tj. sposobnost samostojnega življenja v skupnosti brez in/ali z majhno pomočjo drugih.

Kakovost življenja je “posameznikovo dožemanje svojega položaja v življenju v okviru kulture in vrednostnega sistema, v katerem živi, ter glede na njegove cilje, pričakovanja, standarde in skrbi. Gre za široko zastavljen koncept, ki kompleksno vključuje človekovo telesno zdravje, psihološko stanje, stopnjo neodvisnosti, socialne odnose, osebna prepričanja in odnos do pomembnih značilnosti okolja.” (WHO, 1994).

Pričakovana življenjska doba v zdravju se pogosto uporablja kot sinonim za “pričakovano življenjsko dobo brez invalidnosti”. Medtem ko je pričakovana življenjska doba ob rojstvu še vedno pomembno merilo staranja prebivalstva, je za starajoče se prebivalstvo še posebej pomembno, kako dolgo lahko ljudje pričakujejo, da bodo živeli brez invalidnosti.

ADL (osnovne)  
IADL (instrumentalne)

# Procesi staranja: Aktivno staranje



“Aktivno staranje je proces optimizacije možnosti za zdravje, sodelovanje in varnost, da bi izboljšali kakovost življenja v starosti.” [13]

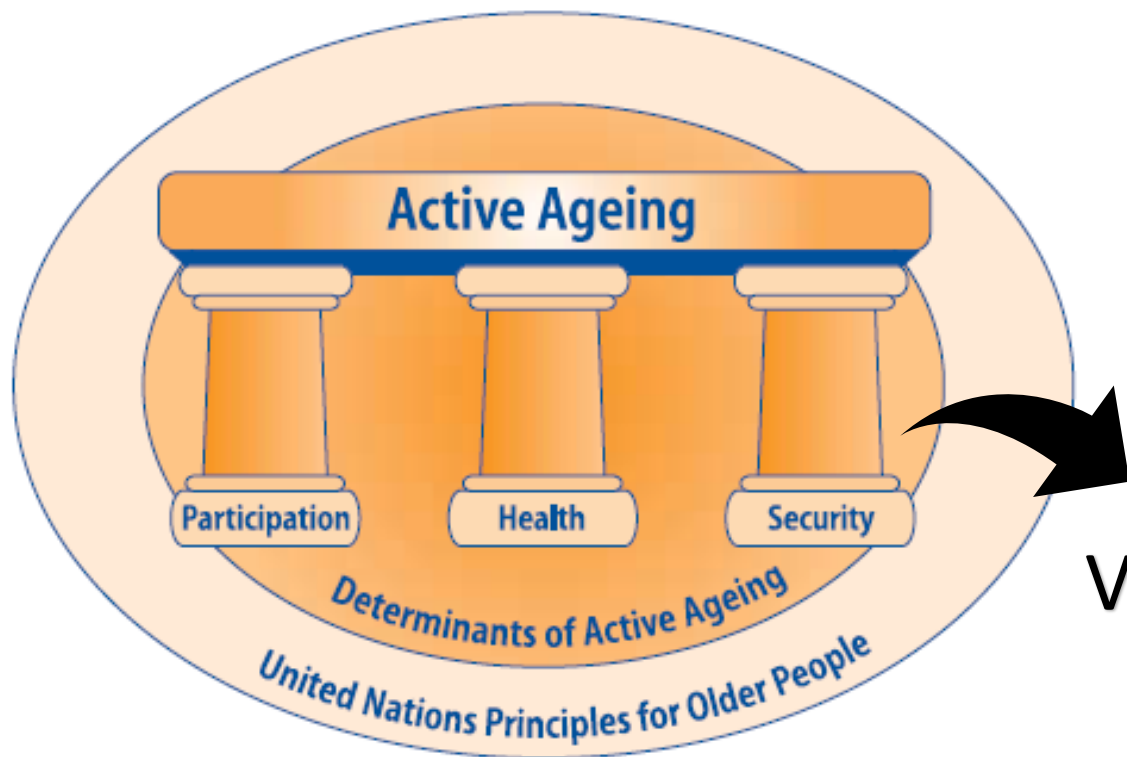
\*Changes in the environment can lower the disability threshold, thus decreasing the number of disabled people in a given community.

# Prosesi staranja: aktivno staranje

Figure 8. The determinants of Active Ageing



# Procesi staranja: aktivno staranje



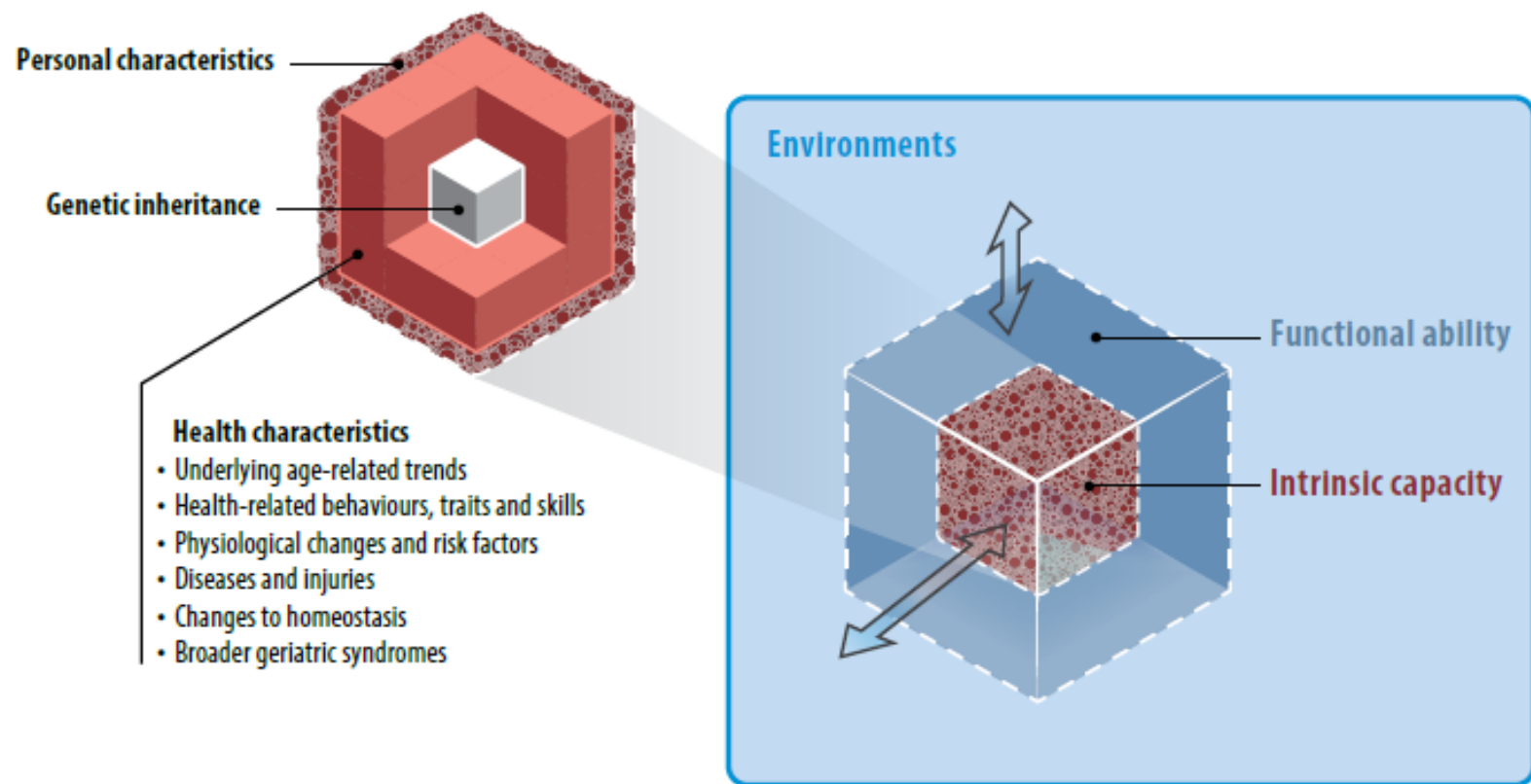
Vseživljenjsko učenje

12. World Health Organization. (2002). Active Ageing: The Concept and Rationale. In *Active Ageing: A Policy Framework*. Geneva. WHO.

13. Ribeiro, O., & Paúl, C. (2011). Envelhecimento Activo. In O. Ribeiro & C. Paúl (Eds.), *Manual de Envelhecimento Activo* (pp. 1-12). Lidel.

# Procesi staranja: zdravo staranje

**Fig. 2.1. Healthy Aging**

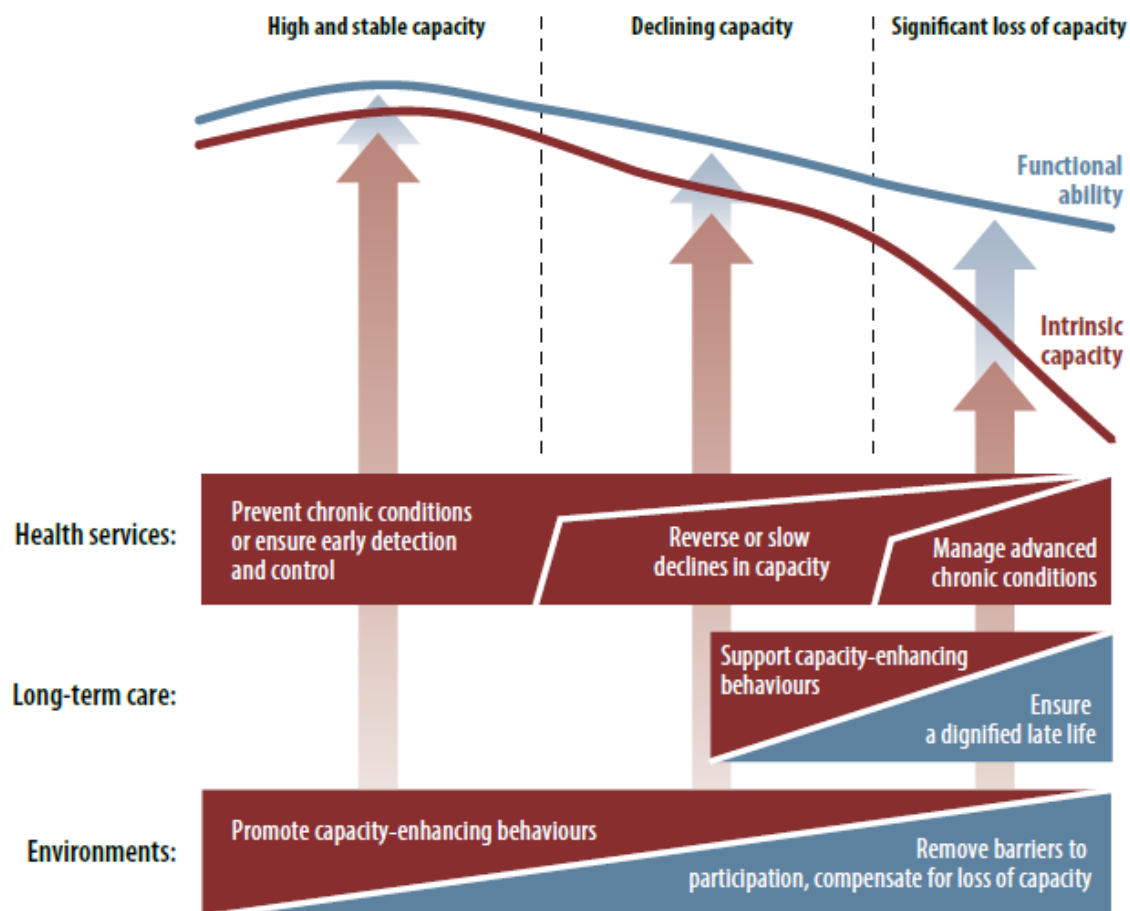


14. World Health Organization. (2015). *World Report on Ageing and Health*. Geneva. WHO.

15. World Health Organization. (2020). *UN Decade of Healthy Ageing*. Retrieved 13/12/2021 from <https://www.who.int/initiatives/decade-of-healthy-ageing>

# Procesi staranja: zdravo staranje

**Fig. 2.4.** A public-health framework for *Healthy Ageing*: opportunities for public-health action across the life course



## Ključna vprašanja za ukrepanje na področju javnega zdravja:

- Ravnanje z raznolikostjo
- Zmanjševanje neenakosti
- Omogočanje izbire
- Staranje na svojem mestu

14. World Health Organization. (2015). *World Report on Ageing and Health*. Geneva. WHO.

15. World Health Organization. (2020). *UN Decade of Healthy Ageing*. Retrieved 13/12/2021 from <https://www.who.int/initiatives/decade-of-healthy-ageing>

# Procesi staranja: zdravo staranje

**Table 1. Guiding principles for the *Decade of Healthy Ageing***

Interconnected and indivisible	All implementing stakeholders address all the Sustainable Development Goals together instead of a list of goals from which they pick and choose.
Inclusive	Involves all segments of society, irrespective of their age, gender, ethnicity, ability, location or other social category.
Multistakeholder partnerships	Multistakeholder partnerships are mobilized to share knowledge, expertise, technology and resources.
Universal	Commits all countries, irrespective of income level and development status, to comprehensive work for sustainable development, adapted to each context and population, as necessary.
Leaving no one behind	Applies to all people, whoever and wherever they are, targeting their specific challenges and vulnerability.
Equity	Champions equal, just opportunities to enjoy the determinants and enablers of healthy ageing, including social and economic status, age, gender, place of birth or residence, migrant status and level of ability. This may sometimes require unequal attention to some population groups to ensure the greatest benefit to the least advantaged, most vulnerable or marginalized members of society.
Intergenerational solidarity	Enables social cohesion and interactive exchange among generations to support health and well-being for all people.
Commitment	Sustains work over the 10 years and into the longer term.
Do no harm	Commits countries to protect the well-being of all stakeholders and minimize any foreseeable harm to other age groups.

**Decade of Healthy Ageing**  
2020-2030



Click Here!

14. World Health Organization. (2015). *World Report on Ageing and Health*. Geneva. WHO.

15. World Health Organization. (2020). *UN Decade of Healthy Ageing*. Retrieved 13/12/2021 from <https://www.who.int/initiatives/decade-of-healthy-ageing>



# Procesi staranja: zdravo staranje

## Zdravo staranje:

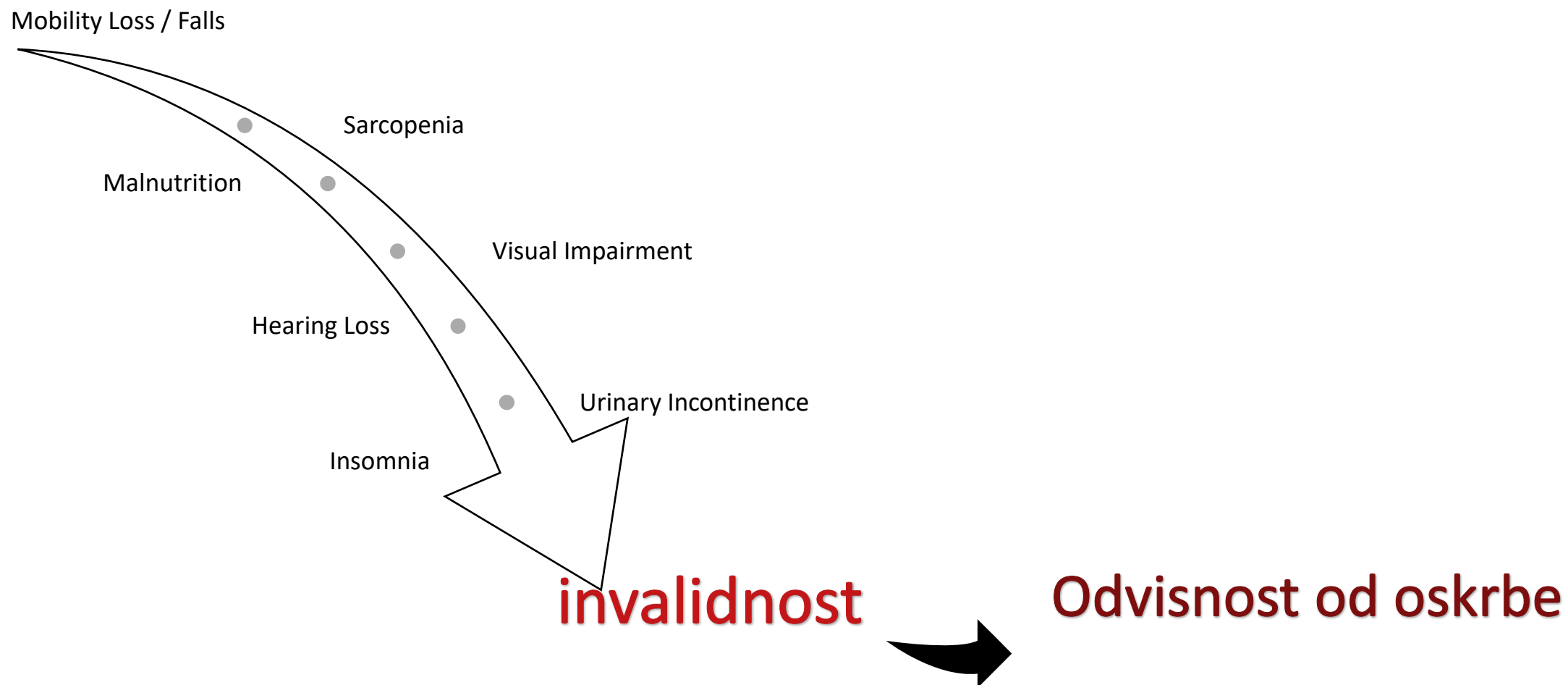
- je na pravicah temelječ odziv na staranje prebivalstva;
- vključuje človekov razvoj
- vključuje vse osebe, tudi tiste, ki se soočajo z boleznijo ali invalidnostjo;
- omogoča starejšim, da imajo osrednjo vlogo, vključno z odločanjem o svojem življenju;
- zmanjšuje neenakosti, ki se kopičijo v življenjskem obdobju;
- optimizira funkcionalne sposobnosti s pristopom celotne družbe in
- obravnava skrb vlad za trajnostne in stroškovno učinkovite pristope.

14. World Health Organization. (2015). *World Report on Ageing and Health*. Geneva. WHO.

15. World Health Organization. (2020). *UN Decade of Healthy Ageing*. Retrieved 13/12/2021 from <https://www.who.int/initiatives/decade-of-healthy-ageing>

16. World Health Organization. (2021). *Decade of healthy ageing: baseline report*. Geneva. WHO.

# Glavna vprašanja povezana z zdravjem



# Vpliv na družino, družbo in zdravstvene storitve:

## Top 10 causes of DALY in Portugal for both sexes aged 85 years and above (2019)

[Hide filters](#) | [Top-10 deaths](#) | [Top-10 DALYs](#) | [Underlying data](#) | [Download with OData API](#)

### Filters

Country

Portugal

Year

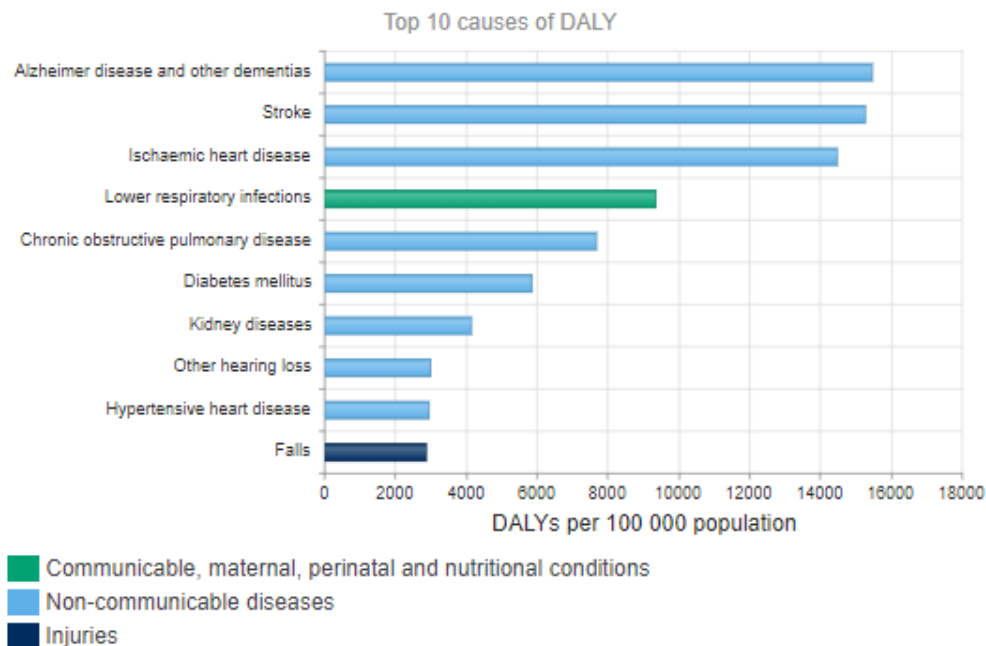
2019

Sex

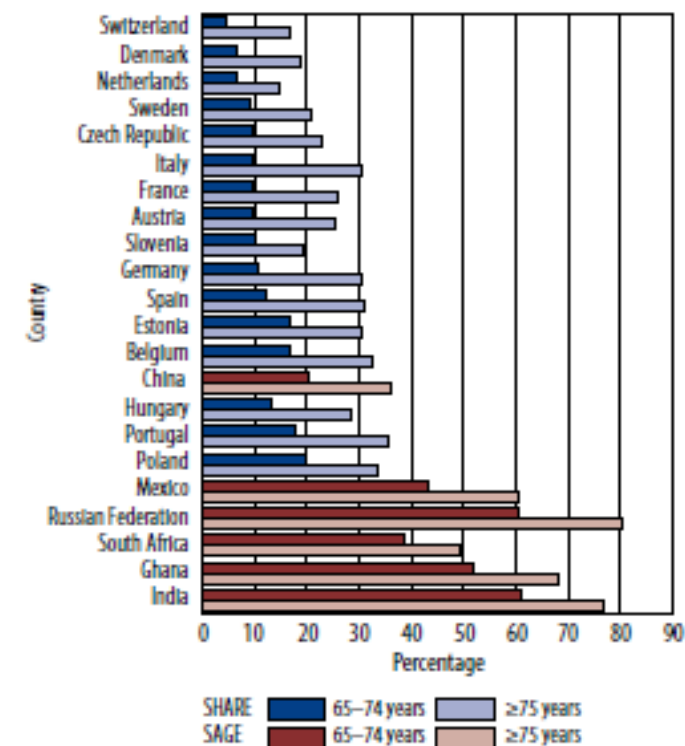
Both sexes

Age group

85 years and above



**Fig. 3.20.** Percentage of the population aged 65–74 years and aged 75 years or older with a limitation in one or more of five basic activities of daily living (ADL), by country



Note: The five basic ADL items included in the analysis were eating, bathing, dressing, getting in and out of bed, and using the toilet.

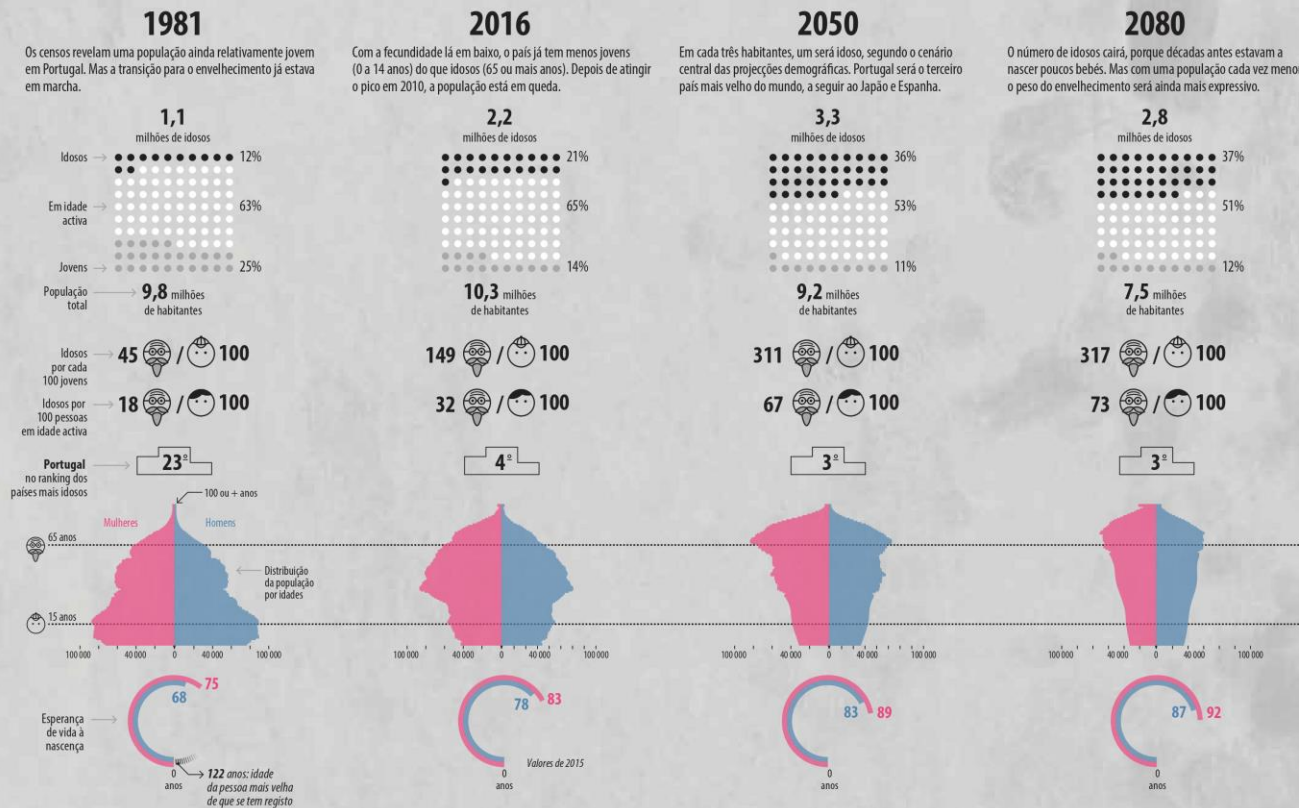
14. World Health Organization. (2015). *World Report on Ageing and Health*. Geneva. WHO.

17. World Health Organization. (2020). *Global Health Estimates 2020*. Retrieved 14/12/2021 from

<https://www.who.int/data/gho/data/themes/mortality-and-global-health-estimates/global-health-estimates-leading-causes-of-dalys>

# PORTUGAL, UM PAÍS A ENVELHECER

O PAÍS É HOJE O QUARTO DO MUNDO COM MAIS IDOSOS E AINDA IRÁ SUBIR MAIS UMA POSIÇÃO. EIS UM RETRATO DO QUE ESTÁ A ACONTECER.



## DE QUE MORREM OS IDOSOS

O cancro e as doenças dos aparelhos circulatório ou respiratório são as principais causas de morte depois dos 65 anos. (Dentro de cada grupo estão representadas apenas as doenças mais comuns, em % dos óbitos).



HOMENS

APARELHO CIRCULATÓRIO	29%
AVC e outras doenças cerebrovasculares	11%
Enfarte e outras doenças isquémicas do coração	7%
Outras doenças cardíacas	6%



MULHERES

APARELHO CIRCULATÓRIO	35%
AVC e outras doenças cerebrovasculares	13%
Outras doenças cardíacas	8%
Enfarte e outras doenças isquémicas do coração	6%

**A MORTE TAMBÉM ENVELHECE**

A queda na mortalidade infantil e a melhoria dos cuidados de saúde concentraram a esmagadora maioria dos óbitos nos idosos com mais de 70 anos.

1970	2016
Dois em cada cinco mortes	Quatro em cada cinco mortes

**CANCROS 27%**

Pulmões, traqueia e laringe	5,1%
Próstata	3,8%
Colón	2,9%
Estômago	2,3%
Sistema linfático	2,2%

**CANCROS 17%**

Mama	2,3%
Colón	1,8%
Sistema linfático	1,8%
Estômago	1,5%
Pulmões, traqueia e laringe	1,4%

**APARELHO RESPIRATÓRIO 15%**

Pneumonia	6%
Doenças crónicas	4%

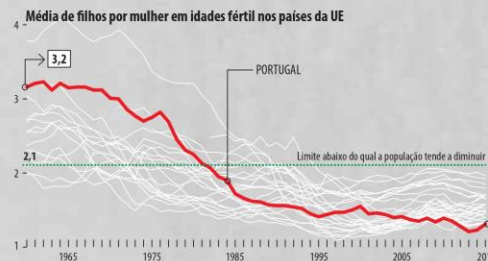
**APARELHO RESPIRATÓRIO 13%**

Pneumonia	6%
Doenças crónicas	2%

## RAZÕES DO ENVELHECIMENTO

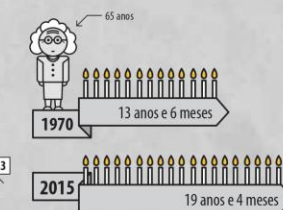
### MENOS FILHOS

A fecundidade em Portugal caiu abruptamente e agora é a menor da União Europeia. A fatia jovem da população encolheu, aumentando o peso da população idosa.



### MENOR MORTALIDADE

A morte ocorre menos em idades precoces e, com isso, mais pessoas atingem os 65 anos. E, uma vez aí chegados, vivem mais anos agora.



### MAIS EMIGRANTES

Cerca de **846 mil pessoas a menos** é o saldo entre os emigrantes e imigrantes em Portugal desde 1960. Os que emigram normalmente estão em idade activa, o que contribui para o envelhecimento.



## DESAFIOS PARA O FUTURO

**SAÚDE**

Os sistemas de saúde devem adaptar-se a necessidades mais complexas, com cuidados integrados, pessoal treinado e estruturas de apoio a longo prazo. A tecnologia traz oportunidades de monitorização da saúde dos idosos em tempo real.

**TRABALHO**

Com o prolongamento da vida activa, é preciso eliminar barreiras à contratação dos idosos. Os locais de trabalho devem ser adaptados às necessidades desta população e as aptidões profissionais e tecnológicas atualizadas ao longo da vida.

**CIDADES**

Muitas cidades já estão a adoptar estratégias para o envelhecimento. Incluem medidas nas áreas da habitação, transportes, espaços públicos, lazer, comunicação, serviços e apoio social. Planos de ordenamento devem integrar estas e outras preocupações.

**DINHEIRO**

O envelhecimento cria um enorme problema para a protecção social dos idosos, pois há menos população em idade activa para sustentar as pensões. Muitos países estão já a aumentar a idade da reforma, mas a um ritmo ainda modesto perante os desafios que se colocam.

**DISCRIMINAÇÃO**

É um problema transversal que é preciso combater no trabalho, nos serviços, na comunidade, na família. Envolve campanhas públicas de sensibilização contra o estereótipo do idoso e legislação que defenda os direitos dos mais velhos.

# Vpliv na družino, družbo in zdravstvene storitve:

Starostnikom  
prijazna okolja

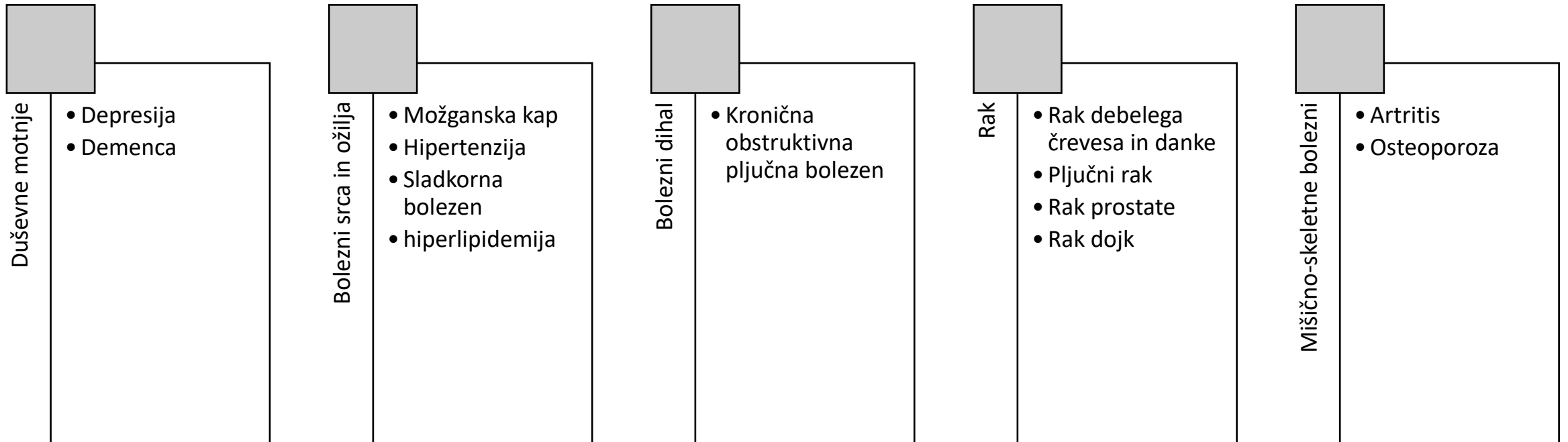
Boj proti  
staranju

Celostna  
oskrba

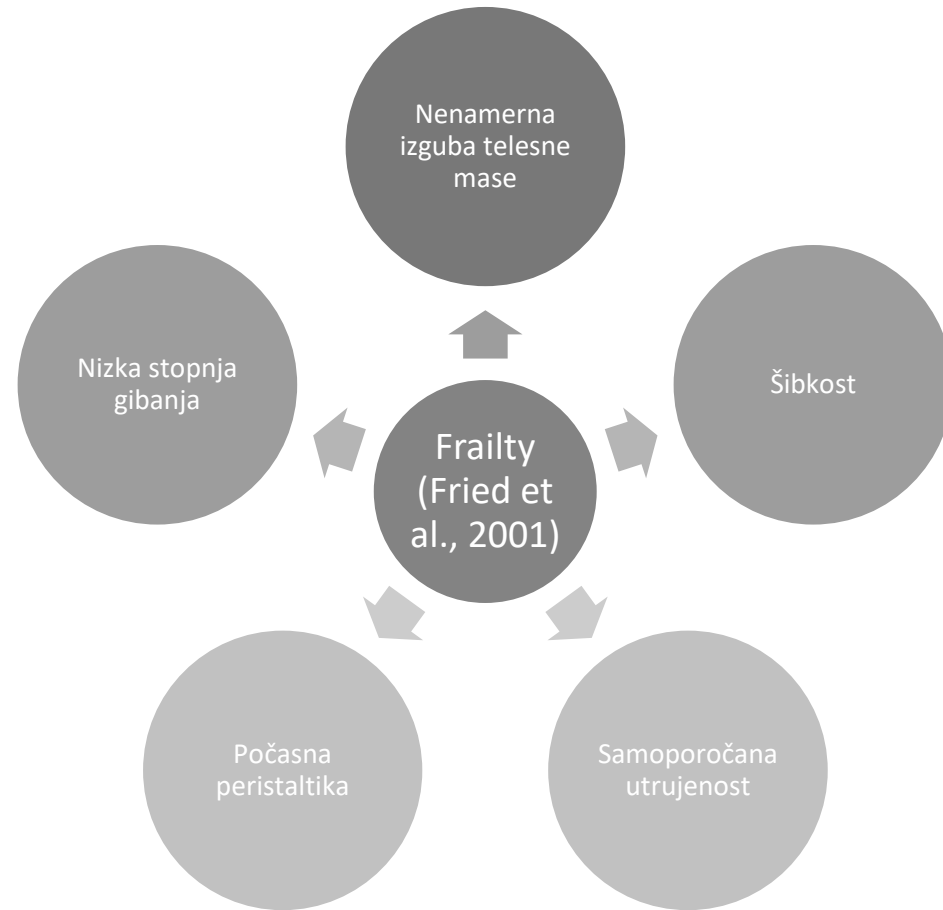
Dolgoročna  
oskrba



# Staranje in kronične bolezni/obolenja



# Staranje in kronične bolezni/obolenja

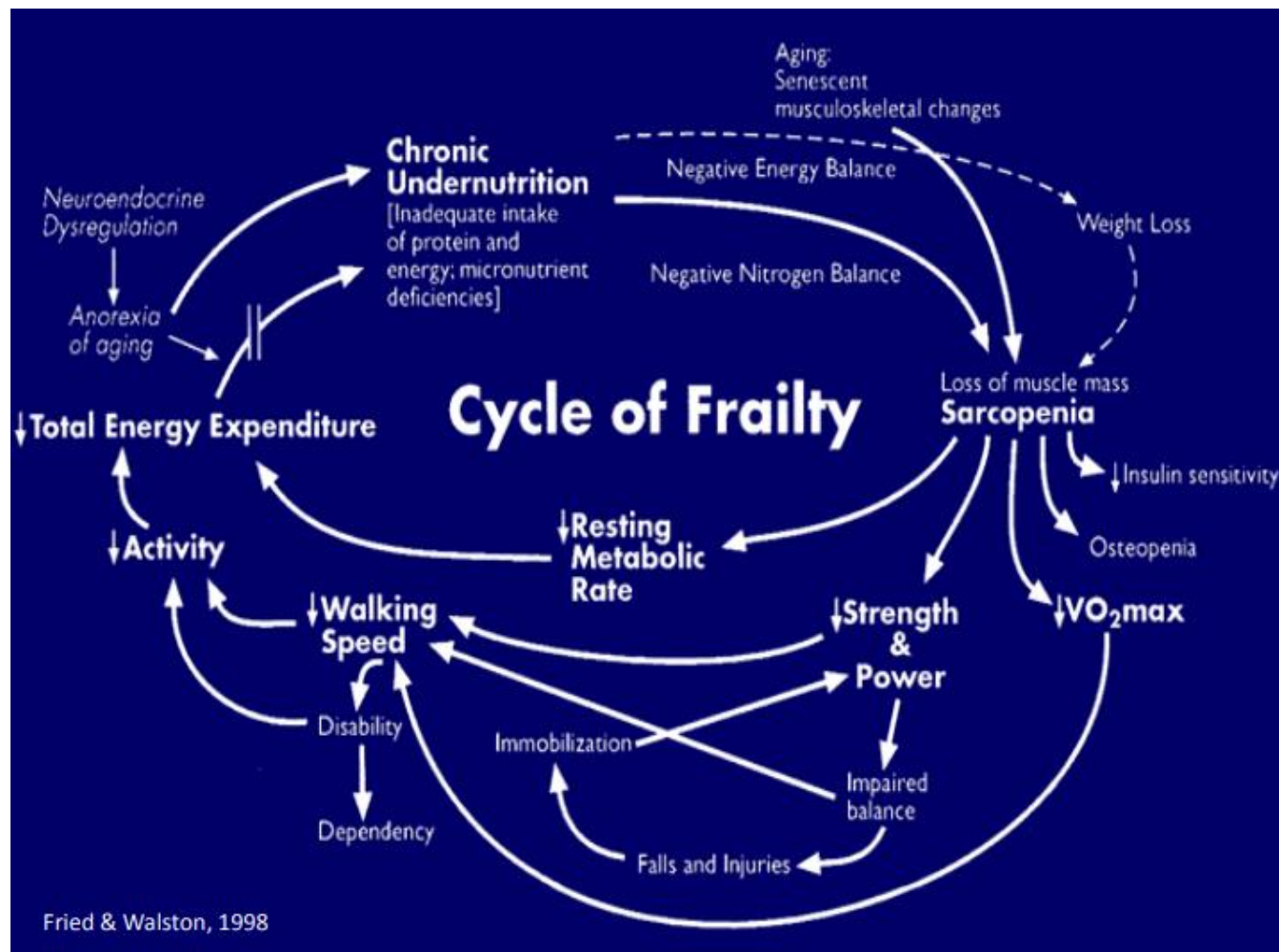


“Krhkost lahko konceptualno opredelimo kot klinično prepoznavno stanje pri starejših ljudeh, ki so bolj ranljivi zaradi s starostjo povezanega zmanjšanja fizioloških rezerv in delovanja več organskih sistemov, tako da je sposobnost obvladovanja vsakodnevnih ali akutnih stresorjev ogrožena” (Svetovna zdravstvena organizacija, 2016)

19. Fried, L. P., Tangen, C. M., Walston, J., Newman, A. B., Hirsch, C., Gottdiener, J., Seeman, T., Tracy, R., Kop, W. J., Burke, G., & McBurnie, M. A. (2001). Frailty in older adults: evidence for a phenotype. *J Gerontol A Biol Sci Med Sci*, 56(3), M146-156. <https://doi.org/10.1093/gerona/56.3.m146>

20. World Health Organization. (2016). *WHO Clinical Consortium on Healthy Ageing: Topic focus - frailty and intrinsic capacity*. WHO.

# Staranje in kronične bolezni/obolenja



Povečano tveganje za:

- Smrtnost
- Hospitalizacijo
- Institucionalizacijo
- Invalidnost BADL
- Nezmožnost izvajanja dnevnih aktivnosti

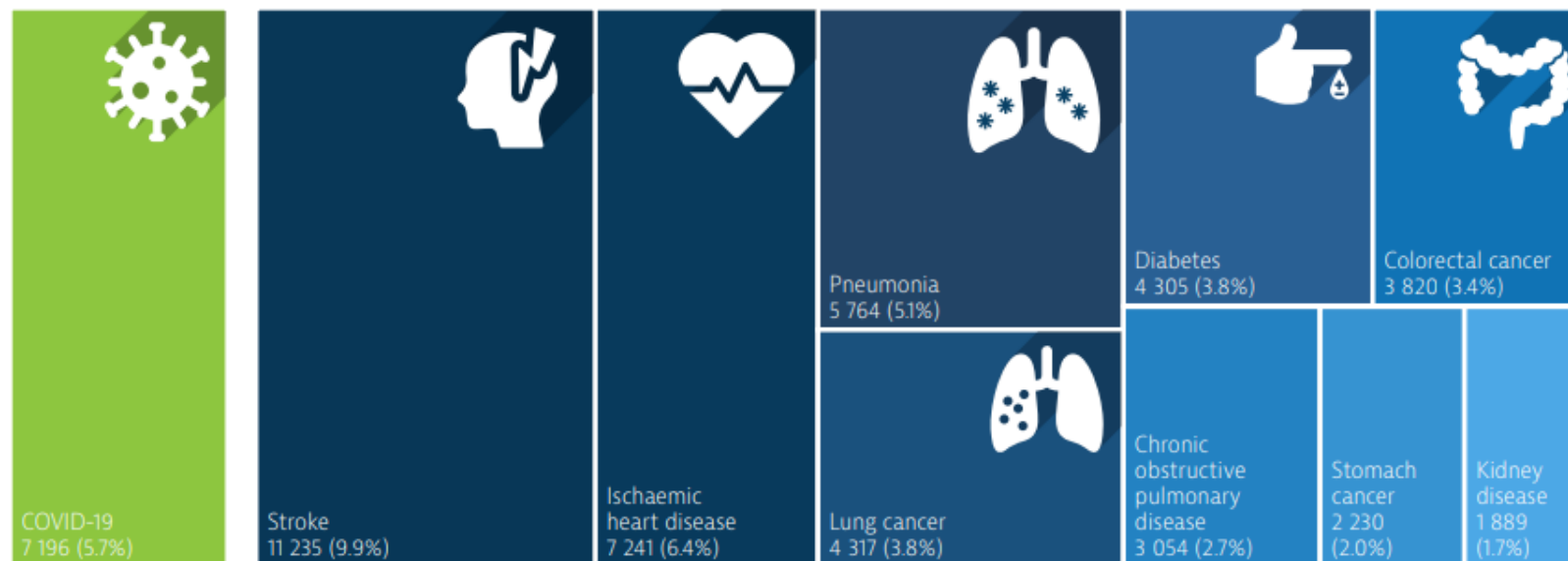
19. Fried, L. P., et al. (2001). Frailty in older adults: evidence for a phenotype. *J Gerontol A Biol Sci Med Sci*, 56(3), M146-156. <https://doi.org/10.1093/gerona/56.3.m146>

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# Staranje in kronična obolenja/stanja

Figure 3. Stroke and ischaemic heart disease are the main causes of death, but COVID-19 led to many deaths in 2020

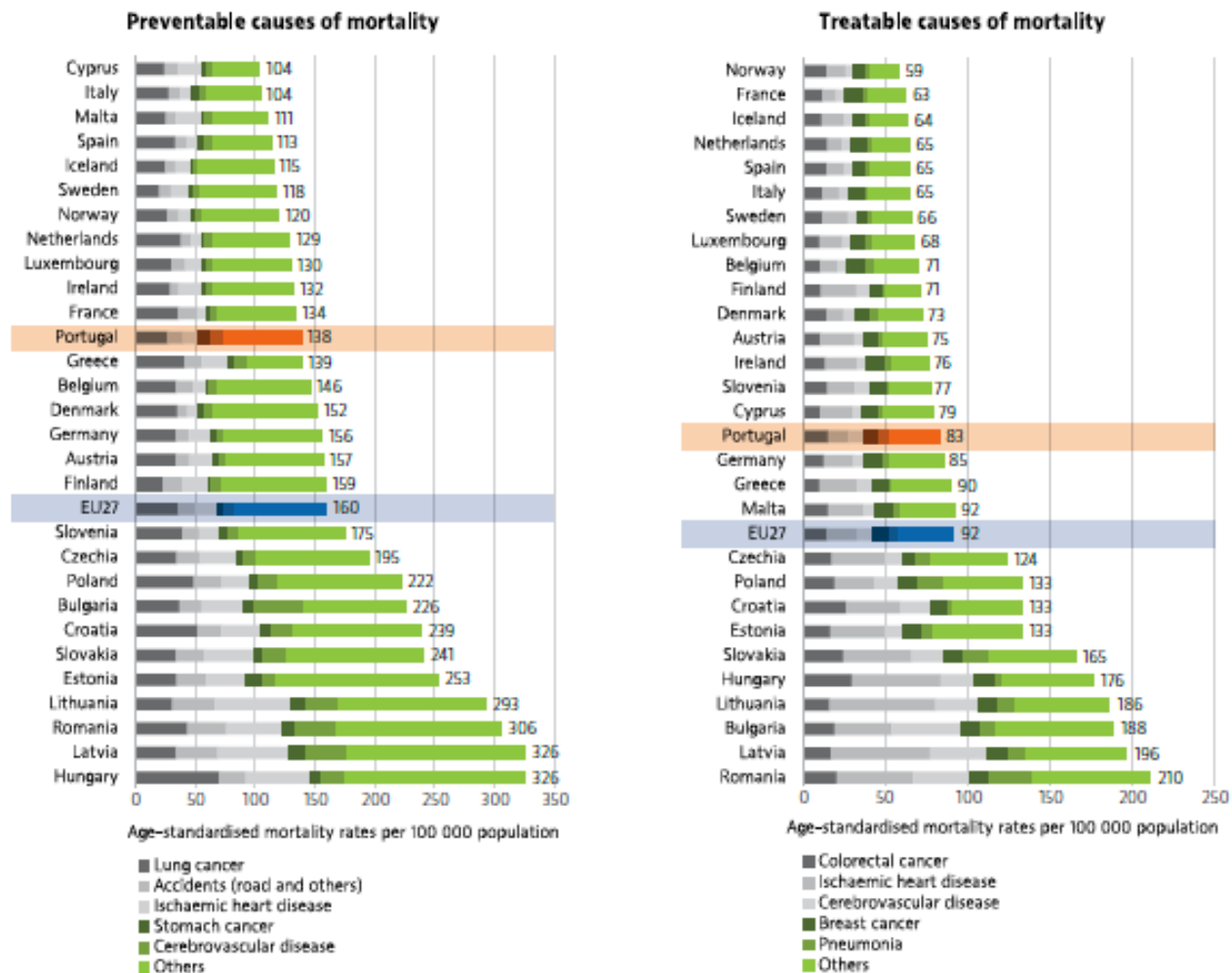


Note: The number and share of COVID-19 deaths refer to 2020, while the number and share of other causes refer to 2018. The size of the COVID-19 box is proportional to the size of the other main causes of death in 2018.

Sources: Eurostat (for causes of death in 2018); ECDC (for COVID-19 deaths in 2020, up to week 53).

# Staranje in kronična obolenja/stanja

Figure 11. Portugal has lower levels of preventable and treatable mortality than the EU average



Stopnja umrljivosti je na Portugalskem rahlo višja od EU povprečja.

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Hvala!

