The turn of the 21st century was marked by the rise of formal democracy in Lithuania. Classical democracy perceived and understood mainly through elections and citizen participation in the political and policy processes has been extended to more instruments and more levels. Residents can now actively participate in decision-making at all levels: at the macro level as a part of electorate, as well as at the micro level as users of public services. The objective of the article is to analyse the process towards democracy in Lithuania from the perspective of residential care and user-involvement. The empirical part of the article provides an analysis of the results of the sociological research on residential care institutions, which reveals how significant co-participation and empowerment in the organization of social services and the provision of them are for ensuring subjective well-being. Co-participation and empowerment in the provision of services should be considered in a methodological way and perceived as some of the most significant examples of the manifestation of modern genuine democracy.

**Key words:** democracy, empowerment, co-participation, co-production, social services, social care.
INTRODUCTION
The central issue of democracy is whether the authorities take into consideration the interests of the communities and residents, whether they listen to them and align their decisions accordingly, primarily by sharing all the information that is necessary for taking decisions, or whether, vice versa, the authorities try to hide the information due to their negligence or because they seek direct benefits either for themselves or concrete groups of enterprises (rather than the majority of residents). This problem of asymmetric public information of the authorities is an essential problem of governance and democracy. The pathos of the anticommunist revolutions of 1989-1991, which was conditioned by the very clearly expressed democratic initiatives of that time, removal of alienation and moral aspirations, in Eastern Europe were very quickly yielded by disappointment due to the rise of economic and especially social problems and disappointment with the authorities when dealing with the problems. It should be noted though that the ratings of public institutions would show an especially low level in all citizens’ opinion polls in Lithuania. However, the citizens’ attitude towards the fourth estate, i.e. mass media, would, contrary to the first three authorities, be exceptionally well evaluated in Lithuania, which would put it among the first places in ratings and sometimes even into the first place. It was only about 2010 that the ratings of mass media slightly decreased in Lithuania. Meanwhile, the ratings of other estates remained as low as those 20 years ago. There was often a lack of mutual trust not only in central, but also in decentralized local government (which contradicts the elementary logic of the relations of the government and citizens) (Bileišis, Guogis, Šilinskiytė, 2014). Decreasing trust along with corruption scandals decreased the democratic legitimacy in Lithuania and by no means contributed to the implementation of the principles of ‘New Democratic Governance’. In fact, the New Democratic Governance marks essential principles of openness, transparency, democracy, pluralism, social responsibility, social justice, absence of corruption and active nongovernmental activities. New Democratic Governance concentrates upon newly founded various, grounded from the bottom, communitarian or separate organizations based forms, which emphasize pluralism, intended to be the most protected value in Europe and other Western countries. On the other hand, New Public Governance perceives social care, health care, community development as social services based on the promise to be delivered (Osborne et al, 2013).

The article discusses the changes in residential care taking into account development tendencies related to democracy, especially New Democratic Governance where mutual trust, social responsibility and participation is analysed at the micro level from a perspective of interaction between social workers as professionals and residents as service users. In order to achieve the objective of the article, the authors will explore concepts of democracy, co-operation, co-governance, co-management and empowerment from the theoretical perspective as well as from the empirical perspective. The authors emphasise the empirical approach and data, since concepts such as mutual trust and participation have different meaning in the different regimes, and therefore the Lithuanian experience could provide additional input for further analysis of mutual trust in the countries which have gone through complex reforms.

The problem of co-participation and empowerment in the context of Lithuani-
an institutional social care is analyzed by using a data array, which is collected by carrying out a research of the factors of subjective life quality of the socially protected elderly persons living in long-term social care institutions (Orlova, 2014). Semi-structured profound interviews in 2011-2014 with 28 elderly participants who were socially protected (21 socially protected person over the age of 60 and 7 female social workers) were analyzed on the basis of the methodology of constructive theory (Charmaz, 2006). Life stories are analyzed referring to the analytical categories arising from the text analysis (coding). The real life cases would allow framing of the social interaction between professionals and service users by the level of trust as well as by the type of cooperation.

Subjective life quality of long-term residential care receivers has not been widely discussed in Lithuanian academic literature. However, it is precisely the research of subjective life quality, reflecting the significance of ‘co-participation culture’ in the context of vulnerable and therefore socially protected social groups getting social care that is also relevant for the development of the society and democracy. Co-participation culture means empowerment culture for enabling pluralistic democracy, as it deepens and enriches life construction both from the sides of democratic participation and personal well-being.

THE FRAMEWORK OF CO-PRODUCTION AND CO-GOVERNANCE IN LITHUANIA

One of the main principles of a modern state is the social and political equality and solidarity of its members of society. It is a prerequisite to ensure the formation of a political nation of a state, which would take responsibility for the state. Only this kind of a political and conscious nation seeks to create the rules which would be equal to all and which would guarantee a harmonious co-existence of its members. This relationship of subordination between the government and the subordinate is voluntary, based on the corresponding motives, and the motives determine the fact that the subordinate behaves as a citizen and not a subordinate. In this kind of relationship, there is mutual trust and support. However, in Central and Eastern Europe, these assumptions become more confusing.

According to W. Sullivan, trust, goodwill and idealism are democratic imperatives. Without those imperatives societies lose the capacity to attain their goals. Trust and goodwill strengthen civic bonds so that future cooperation is made more likely and effective (Sullivan, 2002). Democracy is impossible without a great deal of altruism and idealism. Generally, it is possible to say that moral maturity is essential for democracy. Unfortunately, idealism today has acquired a bad name in former Soviet Union countries (Kohák, 1995).

At the same time, democratic governance may be analysed from the two perspectives. The macro level of democratic governance deals with policy defined to ensure and to promote citizen participation into policy process, while the micro level of democratic governance emphasises user-involvement and participation as a key issue in welfare services (Pestoff, 2009). However, the concept and common understanding of governance has expanded over last 10 years as well. Osborne (2010) has defined five key elements for the New Public Governance - socio-political governance, administrative governance, public policy governance, network governance and contract governance. According to Osborne (2010), contract governance includes the contractual relationships in the public ser-
vice delivery, while network governance is concerned with organisational networks and their interaction for delivery of public services. The contract governance might also include some contractual relationships between professionals and service-users in non-written form like mutual trust. Whatever meaning of governance is applied to public services, the common point among all those understandings is a need to rethink the current accountability framework offered by democracy and to find the new approaches for supervising and reorganising the service delivery process. In this process, relations between professionals and service users become crucial.

The Soviet system was basically a totalitarian one, where existence of a civic society was merely impossible, since it was always suppressed, oppressed and deformed, and no fully functioning political society could develop from it. Thus, the state was unable to ensure minimum of usual social care functions that a welfare state undertakes. However, some path-dependency from the Soviet times can be observed even now, especially regarding a low level of trust to public bodies. During the economic meltdown of 2008, the gap between the rich and the poor increased and reached 7.3, and a fifth of the Lithuanian population owns 43 per cent of total incomes (Rutkauskaitė, 2011). In this way, the principle of social and civic equality of the citizens, underlying the foundation of a modern state, is denied too.

Asymmetric information\(^1\) is noticeable everywhere in Lithuania: in the relationships between the supreme authorities and the residents, between the lower levels of authority and the residents, between the supreme and the lower levels of authorities, etc. In 2007-2008, during a research on the interaction of the municipalities and NGOs in Vilnius and Ukmergė region, it was found that the municipality of Ukmergė region would sometimes provide a limited amount of information for the undesirable NGOs (Guogis, Kacevičius, Stasiukynas, 2010). In this way, e.g. the information about project tenders would be more accessible only to those NGOs which were favourable for the municipality. Out of a number of resonance and corruption scandals it is becoming apparent that the system of collective decisions and consensus, when the interests of various groups are aligned, does not function fully in Lithuania. The relation between democracy and the expectations of the clients of the public services should be discussed as a separate issue, and first of all, in the cases of the potentially marginalized clients of social services. The authors of the article presume that in the society of the 21st century, it is essential to look for new forms of expression of democracy to increase the involvement of the society that would satisfy them and that would not necessarily conform to the traditional party policy and party representation.

Democracy delivers goods and services in the direct meaning and it acknowledges human rights as an essential part of democratic procedures. But there is the empirical ground to state that democratic regime also provides goods indirectly – by the policy programmes output and the results. If compared with other regime types, democracies pay more attention to social programmes (Lane, Ersson 1990). Democracy simply requires more social equity and

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\(^1\) Asymmetric information means a situation when the available information meant for making it public is presented only in the case and only to those interest groups that the authorities have decided to disseminated this information to. This distorts the field of information, impedes natural competition between the organizations and precludes from the opportunities for activities and financing.
equality because of the necessity of counterbalancing different interests. However, a service dominant approach emphasising equality tends to be complicated in spheres where many stakeholders are identified like in the social sphere (Osborne et al, 2013).

THE PROBLEM OF LACK OF EMPATHY FOR WEAKER ONES AND DEVELOPMENT IN LITHUANIA

After regaining independence in 1990, new social policies were created in a formal way similar to the ones in developed western European countries. Generally, social security system in Lithuania consists of three big parts – social insurance, social assistance and supplementary merit-based benefits. Social insurance system was established on the pay-as-you-go principle. Coverage by the insurance systems is limited to persons participating in the labour market. Supplementary, additional benefits are not paid according to insurance principle, but to merit-based principle. Persons not insured by social insurance are usually entitled to means-tested benefits through social assistance system. However, these are very small, since their size is linked to the poverty line. Another part of social assistance is formed of social services which are divided into stationary and non-stationary social services. Stationary services are provided to older, disabled and other persons in care houses, nursing homes etc., and non-stationary services resemble more modern services, like e.g. services at home.

Although the system of social security has developed since the 1990, the first legal framework was designed in 1996 when the “Law on Social Services” was approved. Later on, the necessary secondary legislation was created to regulate the qualification of social services and defining requirements for social care agencies, to certify the social workers and to regulate residential care. In general, social services were designed, managed and provided based on a set of principles, including cooperation, participation, complexity, accessibility, social justice, relevance, efficiency and comprehensiveness (Lukamskiene et al, 2014).

The principles of cooperation and participation are especially relevant since both principles foresee the mutual assistance between the person, family, community and social service agencies. Thus, mutual assistance can provide the added value only when all stakeholders involved in the process of social care trust each other and are well informed of their rights and liabilities. Even through the government and the Ministry of Social Security and Labour are the main stakeholders responsible for designing legal framework, the everyday communication and service delivery depends on local municipalities and their social service agencies.

The increasing social inequality precludes the entrenchment of the genuine rather than formal democracy in Lithuania. The level of social inequality especially increases if the need for social care and ward ship is ignored. Effective social protection of the weaker members of the society is a great victory of democracy and one of its conditions since the solidarity of the society consolidates democracy. Scandinavian countries which have a well-developed monetary social protection system and widely provided social services, are also well known for their high indicators of democracy and a rich history of democracy. Whereas social insurance and monetary social benefits are often seen as stigmatizing and oriented towards ‘a passive social protection’, social services, especially services at home, are seen as ‘active social protection’, which increases empower-
ment. However, not only under the home conditions can one achieve ‘more active social protection’, but also in residential social care if various means of activating are applied in residential social care. As recent sociological research in Lithuania shows, not only objective factors on the state level (or on the municipality level) or direct activities of the administration of the organization and the personnel with the view to the clients of social services are significant for the effectiveness of services and development of democracy, but also the factors of ‘subjective welfare’, which are known in the theory of public services as ‘empowerment’ and ‘co-production’. To the authors, according to a definition, empowerment means active participation of a person when making influence on one’s own destiny. Co-participation means a common participation of the clients of the services and the organizers in the discussion about the decisions and, later on, in taking them.

The term “empowerment” is a relatively new one for Eastern and Central Europe, but it already has different perceptions and meaning from state to state. For the working groups and teams, empowerment is mostly being perceived as a type of power - “power-from-within”, meaning that the working groups is capable enough to see resource at its disposal for achieving changes in its social conditions (Starhawk, 2011). At the same time, “power-over” is the most common form of power in any kind of hierarchies like bureaucracy and public service delivery to weaker ones (Starhawk, 2011). In the context of the article, the concept of empowerment becomes crucial, since democratic system and system of governance should create such conditions for weaker social groups whose civic rights are deprived.

The system of social assistance in the societies of Western cultures, as well as in Lithuania, is seen as a way to meet a concrete need which is so important that the financial resources are concentrated, and institutions of medical care and social care are established. The assistance system is a matter of public interest: vulnerable persons (small ones, young ones, old ones, physically or mentally handicapped ones) are taken care of.

The search for the indicators of co-participation and empowerment culture in residential social care institutions which are meant for older people, is a difficult challenge due to the fact that the institute of social care is stereotypically considered to be stigmatizing, due to the radical restriction of personal freedom that is associated with residential social care institutions, as well as with poverty, insanity and crime. In the context of the Lithuanian society, where old age is seen as a stigma (Rapolienė, 2012), the fact of becoming a socially protected person is seen as shame (‘the shame to be socially supported’), even if along with this stigmatizing status one acquires some advantages (for example, the problem of homelessness of the old person is solved) (Orlova, 2014). The so-called ‘rest home’, ‘boarding houses’, ‘nursing homes’ or merely ‘slums’ are seen in many ways: they compensate old people’s inability to perform their every day functions unassisted: to feed themselves, to get dressed, to move around in the surroundings, etc. However, these kinds of institutions are also understood as very institutionally closed ones that restrict personal freedom and as the systems related to social isolation (Payne, 2005).

The researchers who have analyzed the issues of social dependency of vulnerable persons define it in two ways: as a primitive and as a mature dependency. The form of primitive social dependency is recognized in social interaction when one of the agents consciously or unconsciously forwards the
power, the decision-making right to another one, and develops infant dependency on the former one (Menzie Lyth, 1960; Dartington, 2010). Meanwhile, mature interdependency defines a totally different social interaction: in this kind of interaction even a person with objective dependence is able to be open for communication, to participate in social interaction on an equal footing by realistically acknowledging one’s vulnerability, limits and opportunities of social activity. Even though the status of a socially protected person is often associated with a social problem, dependency of an old person on the persons protecting him/her is not a problem per se, the problem is the fear of dependency or even hatred for this kind of state (Menzie Lyth, 1960; Dartington, 2010).

**DISCUSSION AND ANALYSIS**

The main characteristics of the interaction ‘social worker – socially protected elderly person’ is based on ‘mutual trust’, which can be analyzed in two different ways: (a) the level of trust between the persons acting; (b) the understanding of the life situation of the protected elderly person of ‘here and now’ as stable (i.e. stable physical and mental health, well-known relationship of the client with the surrounding persons). According to the research data, one can state that these two main factors, i.e. trust and the stability of the situation, determine either a successful (involving) or unsuccessful (not involving) social interaction between the social worker and the socially protected older person (scheme 1).

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2 Vulnerability in this context may be understood as a mature value principle: understanding of personal limits and real opportunities to act, as well as realizing that ‘a person is not an island, hence he is not self-sufficient’ and therefore the ability of vulnerable people to, for example, receive support (Dartington, 2010).
Mutual trust

The formation of mutual trust is a lengthy, however, not necessarily successful process. If mutual trust is subjectively seen as high, then both the social worker, and the socially protected person communicate freely, their interaction is not restricted by numerous rules and norms. Otherwise, there are an increasing number of norms, rules or even sanctions for improper behaviour in their interaction.

The social interaction of the service users and the social workers changes depending on the subjectively realized stability of the ‘here and now’ situation. A high level of stability of the situation would appear in the situation when the social worker knows quite a lot about his client and his life story, there are no hidden, shadow topics, e. g. those related to health, the relations with the family members, financial obligations, and their past experience. A low level of the stability of the situation would appear when there are a lot of unknown aspects in the interaction between the social worker and the client: e. g. the client is not open and he is consciously hiding some important details of his life.

Among social workers working with older people and their clients the following typical situations are possible: smooth interaction, chaotic interaction and dynamically changing interaction. The situation of a smooth interaction is characterized by a high level of mutual trust and a high level of situation stability. In these cases, which are very rare, the interaction is open, free and it happens following some precisely defined minimum rules. A great example of this kind of interaction is one of the participants of the research, a resident of the nursing home, Kostas [the name has been changed]. This 82-year-old man is one of the most visible figures in the rest home: holding an important position in the board of residents, he is convinced that his responsibility and duty is to communicate with the administration and the residents of the nursing home, including those ones living in ‘another one, workers’ housing’.

Kostas is not only a receiver of social services, but also an active provider of them: he assumes responsibility for the difficult, conflicting residents of the nursing home when communicating with them and educating them:

Kostas: “I find it easy to communicate with people. Here, too, I manage to communicate with the capricious persons who are not afraid of anything. So, I have already talked to him four times. Once he wanted to initiate a revolution in the canteen, to remove the director. So, you know, I talked to him for the fourth time, for forty minutes…Once there was a scandal here. In the meeting, the director was panned, everyone was panned. You know, some of them take this in one way, some in another. So, when leaving through the door [after the fourth conversation] he said: ‘It’s the first time I’ve talked to a person like this. Now,

3 In some cases, research participants would choose a position allowing to understand that he would not discuss certain issues. This way ‘the secret zone’ would be achieved. The motive of secrecy is very significant: it is powerful merely due to the fact that a secret cannot be questioned and it (and the power within) is ruled by someone who knows it (Dartington, 2010). Some kind of mystification, preterition when one wants to show preterition and unwillingness to continue talking is usually taken in an emotional way, in socially sensitive situations (Levitt, 2001). A common tendency uniting all the interview participants is the fact that one of the periods of the Lithuanian history was not mentioned: i.e. the post-war period and the problems of the Lithuanian society during it. Research participants are the real generation of the post-war period, however, elderly respondents do not show interest to discuss their choices of that time and their value related choices, they discuss those only when clearly asked about them.
you'll see how I'm going to change.' / And he did become quite a different person. He was elected to be a member of the Board. I managed to prove he should be elected as the member of the Board, nobody wanted to do this. I told him, 'as a member of the Board, you'll have to be different.' And so he behaves in a completely different way. / And now I teach him, and I want him to be the chair of the Board. Instead of me.”

This precise example of active co-participation is an interesting one not because of its expression, but also because of its status of exposed interaction since Kostas is presented to most of the guests of the nursing home, his life in the nursing home is visible and in a way public.

However, success stories are rare. Cases of infantile dependency are more common, when fear and lack of self-confidence determine suspense of personal power or even complete refusal of it, personal isolation, delegating one’s decision-taking power to others, and in radical cases, even refusal to physically move in the place of residence.

A situation of chaotic interaction appears where the mutual trust is minimum, and the stability of the situation is seen as low. In such a case, it is difficult to retrace the established models of behaviour of the actors participating in the interaction or the rules of communication. They are created on the spot, they merely ‘happen’ in a difficult situation. A social worker Anna described this: “There is a strike of residents and dissatisfaction with the fact that we, social workers, that is, have put off the Easter. And here we are solving the issue”.

**Social interaction**

In the case of chaotic (often conflict like) interaction older people do not focus on the participation in the process of providing assistance, common duties and responsibility, but they introspectively focus on themselves. This is understandable since the tempo that was established when living in the rest home, the usual rhythm of life changes: one has to adjust oneself to the strict calendar, they get to know new people who may become their new friends, they meet new neighbors that they have to adjust to since they have to live in the same room and hence share their intimate, personal space. Their life becomes very visible – it is observed by a huge number of professional assistance providing specialists, including neighbors. In this kind of situation the role of a passive person and an active one becomes obvious. The participants of the research that have been active all their lives, remain so, they are provided with more room for their activity (e.g. they become members of boards, participate in poetry readings). Conversely, older people who have taken a passive position become reserved and often even more passive. This can be seen in their lack of will to communicate with the people surrounding them, refusal to participate in various events, critical and sceptical attitude towards the professionals providing assistance. In such a situation, what helps them are their expectations that it would be better to be elsewhere, things would be different there even if they (the collocutors) themselves were not to change, i.e. if their attitude, behaviour and the models of communication did not change. Social workers and their assistants, who they seldom refer to during the interview, may be seen as invisible professionals: some of the research participants do not notice their functions and field of work, they do not clearly state so, they might only briefly mention some of the aspects of their professional work or as a social worker Alma told: “the girl came in to talk”.

In this situation, the asymmetry of the social interaction is clearly visible, when
the service users participating in the interaction and the professionals taking care of them see their role in the assistance process in different ways. As it has already been mentioned, in most of the cases the socially protected older persons do not notice the professionals taking care of them and do not see themselves as active agents. However, the social workers participating in the research have emphasized that the life quality of the older clients changes a lot when they help them. They participate in many of the walks of life – by helping to solve insignificant household issues (hairdresser’s services, purchases), by organizing the processes of life of the client (visits to doctors, arrangement of documents), by solving the difficulties in communication of their client with his/her family members, which often last for decades in the lives of clients. Furthermore, social workers claim that in their work they deal with older people not merely as professionals.

Social workers characterize their communication with their clients as an interaction between two persons whose relationships are friendly, full of respect: ‘I learn a lot from them, they [older persons] are like grandparents to me, I learn something new from them every day’ (social worker Beata). According to the research data, one can find a very important layer: the values and the motivation of the people participating in the interaction. Social workers acknowledge that the quality of life in older age largely depends on the much protected person, and the professionals can only help and they do help in ‘emergency’ situations. The established life habits, values and attitudes of the older people are the natural limits due to which the process of provision of assistance is limited. As Liuda, a social worker described ‘if they don’t want to celebrate with everyone, we don’t try to talk them into doing it. If they want, they’ll come’.

The dynamically changing space of social interactions is situated among the two previously mentioned poles of tension. In this area, both social workers and their clients search for an interaction model. The client is adapted to the status and lifestyle of a socially protected person, whereas a social worker carefully examines the life story of the client and looks for ways to maintain contact. Alma, a social worker said: “We talk for a very long time, and continuously try to figure out what the person liked doing in his lifetime, the things he liked, and then I suggest these activities, no matter if this activity is significant for us or not, what matters is that the older person enjoys it and that it makes him happy, even though he is calculating, as he did his entire life”. Most of the research participants do not contemplate (or at least they do not talk about it) on how, in their opinion, the provision of social services is possible in general, and how exactly they were considered to be acknowledged to be eligible to be considered socially protected persons.

According to the research data, one can state that the financial issues (for example, the monthly price of services), in the view of the older participants of the research, are not to be taken into consideration, and it is not acceptable to discuss them. On the other hand, some of the research participants do not even raise questions how the very social care system works. The older do not see themselves as clients receiving a service which has a price. Instead, they focus on their personal income which remains to them after the deduction from their pension of the fee for residing in the nursing home.

Jadvyga, a service user: “So I get a pension of LTL 120 so once they deduct 80 % of it, not that much is left for me”. Naturally, in this kind of situation the participants of the research feel poor, and they realize the system of assistance as partly
coercive towards them, even though simultaneously providing them with some exceptional ‘royal’ privileges. One of the participants of the research, Adelė, service user, mentions them and states that there, in the nursing home, she lives ‘like a queen’, i.e. all the ‘washing and cooking’ is done for her. Even though it looks as if she is participating in the process of assistance, her story reveals an important aspect of her single-sided dependence. Adelė was brought to the nursing home unexpectedly for her and all of a sudden – from a nursing home, to which she had got after an illness. She had half a day to make a decision – and it seems that her decision was merely a formality. The decision was taken for her by social workers and the nursing staff. She was crying on her way to the rest home. And then she was seated on her bed, so she has been sitting on it for three years. She never returned home afterwards.

Adelė, a service user: “And when I was told that there was a vacant bed, I had to decide – whether to go or not. And so you tell me this. I was told about this in the morning, and in the evening, maybe several hours were left until the departure... and so you are recommended, maybe the elder will help you. And so I decided. And what's to be done? / And so I came here. And so I was seated on this bed. Among the people I don't know. It seems that nobody likes me, me as a rara avis. And so the director told me: 'You shouldn't be crying like this. If you want, you can stay for a month or so. I'll take you home, you'll look around, it's summer time...' And what will I find there? Who's waiting for me there? Nobody needs me.”

Dependency

It takes long for single-sided dependency of older people from others to develop, and usually the initial reasons are the dissolution of the family, negligence or partner’s death (Jack, 1998). This phenomenon can be explained by an analysis of dysfunction as a social process, which states that the habit to be dependent develops long before one starts residing in a social care institution. Some of the indicators of dysfunction are boredom, lack of activities and permanent sitting in the same place. However, research results show that the proportion of the people who are bored is the same, irrespective of the fact whether they live independently in their homes, or reside in a social care institution. The regime of the permanent residential care institutions is not the reason for boredom, as the habit develops long before the person becomes socially protected. The stereotypic thinking that the lifestyle and the relationship radically change after moving to a social care institution can be formed because of the dualistic approach, differentiating between ‘here’ and ‘there’, which, however, fails to take into consideration the social processes, the outcome of which are social care institutions (Tobin, Lieberman, 1976; Willcocks et al, 1987).

So one can make a conclusion that there are few elements of mature interdependency in long-term social care institutions (Dartington, 2003), when the protected person, as a person who is vulnerable, realizes his or her personal limits and opportunities, the acceptance of aid and one’s role in it. Usually, this kind of mature acceptance of aid is demonstrated by those older people who have personally taken a decision to live in social care institutions, who are educated and often feel to have a higher social status. They are not afraid to demonstrate their right to decision and the power arising from it, they often take part of the duties of the social workers and nursing staff or even imitate the functions of the administrative staff.
Service users’ involvement in the process of reception of social care is not equally intensive – their communication with the social workers range from a passive, consumerist position, by restricting oneself to the minimum satisfaction of one’s needs, to a less obvious position of an active person, when the communication with social workers is active or (in specific cases) even a part of their functions is taken (especially in the area of communication).

The process of socialization of the older persons residing in social care institutions is a permanent one – both due to the changing individual life circumstances (e. g. at first a research participant could walk independently, and now he cannot because of an illness), and due to the constantly changing circle of circumstances (good friends die, and new ones emerge). The outcome of this process – i. e. either successful or unsuccessful socialization – is difficult to define. A proof of this is the type of evaluation of subjective life quality: the persons who accept the status of socially protected person and the changes related to it not as a given thing, but as a personal decision, find it easier to socialize and are more active in the process of receiving aid and therefore they appreciate their life quality more than others. The power to make important personal decisions and take responsibility, according to the results of this research, usually belongs to well-educated persons with a high status. Persons who have experienced poverty and poorly educated persons are more likely to realize themselves as passive persons, completely dependent on external circumstances.

To conclude, one can say that even in the context of long-term institutional care, interdependence and trust are vital factors of subjective life quality, revealing themselves via a person’s equality, which should be entrenched not only by one’s rights, but also by duties, via which a person acquires a right to mutual responsibility for his personal life, the content of social interaction and overall quality of life.

CONCLUSIONS

After restoring independence at the beginning of the 1990-ties, Lithuania invested considerable efforts to establish its social policy. At the same time, problems related to democratic process still existed, when the weaker members of the society were not adequately represented, and the opinions of the governed ones, as well as their interests, were often not taken into account. However, it should also be recognised that weaker members of society might not be able to participate in the classical ways of political participation to influence the policy process. However, since the weaker members of society are in the interaction with social care institutions, the issues of empowerment, mutual trust and social interaction become crucial. Co-participation culture includes empowerment culture which is so necessary for pluralistic democracy. At the same time, co-participation culture deepens and enriches life construction both from the sides of democratic participation and personal well-being.

The analysis of the results of the empirical research of social care institutions in Lithuania has revealed that a real rather than assumed co-participation and empowerment in the organization of social services has significant influence on the subjective life quality of service users.

The persons accepting the status of being a socially protected and the changes related to this as their personal decision, are more successful in the process of socialization in long-term social care institutions, and are more proactive in the process of aid provision.
Service users who have themselves taken a decision to live in social care institutions, who are well educated and often feel they have a higher social status participate in the aid provision-receiving process dignifiedly and actively. In fact, those persons are empowered to be a part of the social system and they are empowered to co-produce the benefits of the social system. At the same time, persons having experience of living in poverty, or being less educated are more likely to see themselves as passive, totally dependent on the social care professionals and on the external circumstances.

However, the model of mature interdependency and trust, where a protected person co-participates in the aid provision process by understanding their own, responsibility, limits and opportunities related to the status of being vulnerable, is rare in Lithuanian social care institutions.

Research data allow singling out several models of interaction of service users and the professionals. The main characteristics of the interaction ‘social worker – socially protected elderly person’ is an analytical category ‘mutual trust’, which can be analyzed on two different layers: (a) the level of trust between the persons acting; (b) when a socially protected elderly person perceives his personal life situation that of ‘here and now’ as a stable one (i.e. stable physical and mental health, well-known client’s relations with the people surrounding him). These two main factors, i.e. trust and the stability of the situation, determine either a successful (involving) or unsuccessful (not involving) social interaction between the social worker and the service user.

**LITERATURE**


Sažetak

DEMOKRACIJA I VLADAVINA U JAVNIM SLUŽBAMA: SLUČAJ REZIDENCIJALNE SKRBI U LITVI

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Prijelaz u 21. stoljeće obilježio je uspon formalne demokracije u Litvi. Klasična demokracija koju se uglavnom poima putem izbora i sudjelovanja građana u političkim procesima proširila se na više instrumenata i na više razina. Građani sada aktivno sudjeluju u odlučivanju na svim razinama: na makro razini kao dio izbornog tijela, kao i na mikro razini kao korisnici javnih usluga. Cilj je ovog rada analizirati proces demokratizacije u Litvi iz perspektive rezidencijalne skrbi i sudjelovanja njezinih korisnika. Empirijski dio rada donosi analizu rezultata sociološkog istraživanja o institucijama rezidencijalne skrbi koja pokazuje koliki je značaj sudjelovanja i osnaživanja u organiziranju socijalnih usluga i njihovom pružanju za osiguranje subjektivne dobrobiti. Sudjelovanje i osnaživanje u pružanju usluga trebalo bi razmotriti na metodološki način i smatrati jednim od najznačajnijih primjera manifestacije prave moderne demokracije.

Ključne riječi: demokracija, osnaživanje, sudjelovanje, koprodukcija, socijalne usluge, socijalna skrb.