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## PROBLEMS OF THE EFFECTIVENESS OF REGULATORY LEGAL ACTS IN THE HEALTHCARE SYSTEM FOR MAINTAINING THE QUALITY OF ACTIVE LONGEVITY IN THE REPUBLIC OF KAZAKHSTAN

The article analyzes the institute of active longevity in the Republic of Kazakhstan, which has been called “antiaging” in science from the point of view of legal regulation of basic socio-economic directions. This covers, first of all, the health care system, social security, social services, etc. The article examines the socio-legal policy of the state on issues of ensuring a fruitful human life expectancy. The authors draw attention to the priority, from their point of view, directions of state policy in the field of regulation of healthy lifestyle issues and ensuring human life expectancy. Special attention is paid to the lack of legal regulation of the conceptual category of active longevity and its definitions in Kazakhstan. Attention is drawn to the fact that today in Kazakhstan there is no full-fledged, multidimensional legal framework, in addition, there is a clear need for a clear definition of the object of regulation in the sphere of these legal relations and the differentiation of hierarchy, that is, the levels of regulatory legal regulation. The article notes the need to conduct special research on increasing human life expectancy. The lack of organizational and legislative measures create the main difficulties in the practical implementation of the achievements of medical science in the practical life of the country. The scientific achievements available to medicine to prolong human life and maintain its quality are based primarily on the fight against diseases caused by aging, rather than on intervention in the aging process itself. The author emphasizes the latest achievements of scientists that genetically a person has a complex program to counteract aging. And without a theoretical understanding of the aging process and the identification of technologies to overcome the limit of human life expectancy, the whole complex of biomedical sciences, from the point of view of practice, may not be so effective without direct interaction with other branches of science and, above all, right-wing science.

**Key words:** The Constitution of the Republic of Kazakhstan, active longevity, effectiveness of regulatory legal acts, standard of living, life expectancy, pension provision, health care system, current legislation.

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### Қазақстан Республикасында Белсенді ұзақ өмір сүру сапасын қолдау тұрғысынан Денсаулық сақтау жүйесіндегі нормативтік құқықтық актілердің тиімділігі мәселелері

Мақалада негізгі әлеуметтік-экономикалық бағыттарды құқықтық реттеу тұрғысынан ғылымда «антиэйджинг» деп аталатын Қазақстан Республикасындағы белсенді ұзақ өмір сүру институты талданады. Бұл, ең алдымен, денсаулық сақтау, әлеуметтік қамсыздандыру, әлеуметтік қызмет көрсету және т.б. Адамның жемісті өмір сүру ұзақтығын қамтамасыз ету бойынша мемлекеттің әлеуметтік-құқықтық саясаты зерттеледі. Авторлар салауатты өмір салты мәселелерін реттеу және адам өмірінің ұзақтығын қамтамасыз ету саласындағы мемлекеттік саясаттың басым бағыттарына өз көзқарасы бойынша назар аударады. Қазақстанда белсенді ұзақ өмір сүрудің концептуалды категориясын және оның анықтамаларын құқықтық реттеудің жоқтығына ерекше назар аударылады. Бүгінгі таңда Қазақстанда толыққанды, көп өлшемді құқықтық базаның жоқтығына назар аударылады, сонымен қатар, осы құқықтық қатынастар саласындағы реттеу объектісін нақты анықтау және иерархияны, яғни нормативтік құқықтық реттеу деңгейлерін ажырату.

Мақалада адамның өмір сүру ұзақтығын арттыру бойынша арнайы зерттеулер жүргізу қажеттігі атап өтілген. Ұйымдастырушылық және заңнамалық шаралардың болмауы медицина ғылымының жетістіктерін еліміздің практикалық өміріне іс жүзінде жүзеге асыруда негізгі

ғылыми жетістіктері қартаю процесіне араласуға емес, ең алдымен қартаюдан туындаған аурулармен күресуге негізделген. Автор ғалымдардың адамда генетикалық тұрғыдан қартаюға қарсы кешенді бағдарлама бар деген соңғы жетістіктерін атап көрсетеді. Ал қартаю процестерін теориялық түсінбестен және адам өмірінің ұзақтығының шегін еңсеру технологияларын анықтамайынша – медициналық және биологиялық ғылымдардың бүкіл кешені тәжірибе тұрғысынан ғылымның басқа салаларымен тікелей өзара әрекеттесусіз тиімді болмауы мүмкін. және ең алдымен оңшыл ғылым.

**Түйін сөздер:** Қазақстан Республикасының Конституциясы, Белсенді ұзақ өмір сүру, нормативтік құқықтық актілердің тиімділігі, өмір сүру деңгейі, өмір сүру ұзақтығы, зейнетақымен қамсыздандыру, денсаулық сақтау жүйесі, қолданыстағы заңнама.

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### **Проблемы эффективности нормативных правовых актов в системе здравоохранения на предмет поддержания качества активного долголетия в Республике Казахстан**

В статье анализируется институт активного долголетия в Республике Казахстан, получивший в науке название «антиэйджинг» с точки зрения правовой регламентации базовых социально-экономических направлений. Это охватывает, прежде всего, систему здравоохранения, социального обеспечения, социального обслуживания и др. Исследуется социально-правовая политика государства по вопросам обеспечения плодотворной продолжительности жизни человека. Авторы обращают внимание на приоритетные, с их точки зрения, направления государственной политики в сфере регулирования вопросов здорового образа жизни и обеспечения продолжительности человеческой жизни. Особое внимание обращается на отсутствие в Казахстане правового регулирования понятийной категории активного долголетия и ее дефиниций. Обращено внимание на то, что сегодня в Казахстане отсутствует полноценная, полиаспектная правовая база, кроме того, существует явная необходимость четкого определения объекта регулирования в сфере указанных правоотношений и разграничения иерархии, то есть уровней нормативного правового регулирования.

В статье отмечается о необходимости проводить специальные исследования по вопросам увеличения продолжительности жизни человека. Отсутствие организационных и законодательных мер создают основные затруднения по практической реализации достижений медицинской науки в практическую жизнь страны. Имеющиеся в распоряжении медицины научные достижения по продлению жизни человека и поддержания её качества основаны преимущественно на борьбе с болезнями, вызываемыми старением, а не на вмешательстве в сам процесс старения. Авторы подчеркивают последние достижения ученых о том, что генетически в человеке заложена сложная программа по противодействию старению. И без теоретического понимания процессов старения и выявления технологий преодоления предела продолжительности человеческой жизни – весь комплекс медико-биологических наук, с точки зрения практики, может оказаться не столь эффективным без непосредственного взаимодействия с другими отраслями науки и прежде всего правой науки.

**Ключевые слова:** Конституция Республики Казахстан, активное долголетие, эффективность нормативных правовых актов, жизненный уровень, продолжительность жизни, пенсионное обеспечение, система здравоохранения, действующее законодательство.

## **Introduction**

Today, one of the most pressing issues in the Republic of Kazakhstan is the creation of conditions for maintaining active longevity and healthy productive aging. New approaches to understanding the socio-economic policy of the state and the implementation of the Constitution, further modernization of the economy, raising the standard of living of the population and much more are impos-

sible without active intervention of the state (Karayev 2017: 397).

According to various studies, residents of developed countries live an average of 70-80 years with a tendency to increase. According to official statistics, the list of countries with the leading population in terms of average life expectancy is headed by Andorra (82.75 years) and, traditionally, Japan (more than 82 years) ([http://ostranah.ru/\\_lists/life\\_expectancy.php](http://ostranah.ru/_lists/life_expectancy.php)).

According to the Bureau of National Statistics of Kazakhstan, “Life expectancy at birth of the population for 2023 was 75.09 years and thus became the highest record in the last 25 years. In urban areas, life expectancy is higher than in rural areas – 75.73 and 74.02 years, respectively. In terms of gender, life expectancy for women also showed an increase and amounted to 79.06 years (2022 – 78.4), among men, the figure was 70.99 years (2022 – 70.2 years).

The highest life expectancy at birth of the population in the city of Almaty is 78.28 years, and the lowest in the Ulytau region is 72.41 years” (<https://stat.gov.kz/ru/news/ozhidaemaya-prodolzhitelnost-zhizni-kazakhstansev-vy82>).

Given the high level of modern medicine and the state policy to improve the quality of human life, which, in our opinion, should be recognized as not so successful, there are grounds for defining and implementing specific measures of various directions aimed at maintaining an active long-term human life.

According to paragraph 1 of Article 1 of the Constitution, the Republic of Kazakhstan asserts itself as a democratic, secular, legal and social state, the highest values of which are a person, his life, rights and freedoms. The inclusion of this norm, like all other norms of direct action, in the text of the Basic Law of the country indicates the priority of human life for the Republic of Kazakhstan ([https://online.zakon.kz/document/?doc\\_id=1005029](https://online.zakon.kz/document/?doc_id=1005029)).

The state, ensuring active longevity of a person, must create such conditions that would serve as the basis for high-quality longevity of a person.

### Methods and materials

In the context of studying the identified aspects, we consider it necessary to rely on scientific provisions regarding objectivity, scientific nature, comparative research, taking into account foreign experience. Studying the current legislation of the Republic of Kazakhstan from the standpoint of objectivity and scientificity, it is determined that the concept of active longevity in the health care system is not distinguished from other groups of the population, with the exception of children and young people, and is not allocated to a separate category for persons to whom the concept of active longevity applies. Based on a comparative analysis of the dynamics of human life development and its legislative support in Kazakhstan and foreign countries, common state approaches aimed at increasing human life expectancy are identified. At the same time,

the article distinguishes between human life expectancy due to the socio-economic policy of the state, and life expectancy based on a special interdisciplinary approach. When analyzing the international legal obligations of Kazakhstan, it was revealed that the socio-economic policy of the state does not fully comply with the definition of Article 11 of the Covenant on Economic, Social and Cultural Rights of December 16, 1966, “the right of everyone to an adequate standard of living.” In this regard, the authors of the article propose to consider the concept of an adequate standard of living in the Constitutional Court of the Republic of Kazakhstan.

The theoretical basis for writing the article was the materials of scientific and educational literature on labor law, social security law, constitutional and international law, materials of scientific conferences reflecting the issues of active longevity in the legislative process in the Republic of Kazakhstan.

### Results and discussion

According to Art. 11 of the International Covenant on Economic, Social and Cultural Rights of December 16, 1966, the States Parties recognize the right of everyone to an adequate standard of living for himself and his family, including adequate food, clothing and housing, and to the continuous improvement of living conditions. States Parties will take appropriate measures to ensure the implementation of this right .... (<http://adilet.zan.kz/rus/docs/Z050000087>).

With regard to Kazakhstan, this norm, in addition to the current internal norms, obliges all authorized bodies of the country, management and organizational structures, to adhere to a unified policy on compliance and creation of the necessary conditions for the fulfillment of the country’s international legal obligation for those persons who have such rights (Salimgerey 2023). However, not all structures in the management system in their activities are fully guided by the normative definition of Art. 11 “the right of everyone to an adequate standard of living” (<http://adilet.zan.kz/rus/docs/Z050000087>). In many ways, this fact is explained not only by the failure to fulfill, incomplete understanding of the subject of the country’s international obligation, but also by the lack of political will on the part of authorized bodies to revise not only low pensions, but also the unfairly established wage system ([https://online.zakon.kz/Document/?doc\\_id=33557568&pos=6;-108#pos=6;-108](https://online.zakon.kz/Document/?doc_id=33557568&pos=6;-108#pos=6;-108)). The numerous holdings, quasi-state enterprises created in

Kazakhstan, are practically state property, with the payment of incomparable wages to their employees, incomparable with the remuneration of labor in other state enterprises, institutions, educational institutions. Thus, the constitutional principle of equality is violated. Or, for example, the level of pensions of teachers, doctors, whose salaries throughout their lives were extremely low, despite the heavy workload. The average pension in economically developed European countries is, for example, from 1632 euros in Finland, up to 1290 euros in Germany. In these countries, people over 60 account for almost a third of the purchasing power of the population. As active consumers, Western pensioners intensively stimulate the economy of their countries. And most importantly, they are recognized by the state and young people as full members of society. Pensions are high in Iceland, the Netherlands, Luxembourg, Denmark, they range from 3903 to 4724 US dollars. In total, pensions and income from personal savings for citizens of developed countries reach 60-80% of their income during their working life (<https://legalacts.egov.kz/application/downloadconceptfile?id=3972490>).

In this regard, the question arises – What quality of active longevity and more can we talk about in Kazakhstan, when the level of pensions does not correspond to the real standard of living. Will a pension of 130-140 thousand tenge provide for adequate food, accommodation, inevitable medical, transport, household and other expenses?

Within the framework of the legal regulation of pension provision in the Republic of Kazakhstan, we consider it necessary to dwell on the following negative fact, as a result of the pension reform of 1998, pensions for length of service and old-age pensions on preferential terms were significantly reduced in the country, or rather almost completely abolished. At the same time, the factors of industrial and biological (physiological) risks of work in the abolished areas of activity were completely ignored. This state of affairs affected not only the factor of labor safety, but also the life expectancy of persons working in harmful and especially harmful, dangerous and especially dangerous industries, jobs, industries and areas associated with the loss of professional (special) working capacity by workers. Today in the Republic of Kazakhstan the retirement age for men and women is set at 63 years, although for women this age limit is being introduced in stages. The standard of living in Kazakhstan is not fully defined in a substantive and normative manner, despite the various criteria

with an attempt to clarify the concept of “standard of living” in regulatory legal acts. Of course, the wages of workers in Kazakhstan are the main indicator of assessing an adequate standard of living, since sufficient food, quality clothing, normal living conditions and much more largely depend on wages. We believe that today’s Constitutional Court of Kazakhstan could accept for its appeal the question regarding the concept of “adequate standard of living” and its compliance with the socio-economic policy of Kazakhstan.

We consider it possible to note that the issue of the sufficiency of the minimum consumer basket was the subject of consideration of the first Constitutional Court of the Republic of Kazakhstan. This was the first case considered within the framework of constitutional proceedings in 1992. However, today the text of this resolution cannot be found in any informational legal source, despite the fact that it has not lost its legal force, it was also removed from the general Internet information space. In addition, the Constitutional Court of the Republic of Kazakhstan, which is currently in force, is not the legal successor of the first similar Kazakhstani court and, accordingly, there are no primary sources of this body in its archives and records.

The main provisions of the state policy regarding the elderly are enshrined in the Constitution of the Republic of Kazakhstan, the codes “On Public Health and the Healthcare System”, “On Marriage (Matrimony) and Family”, the Labor and Social Codes, as well as the law “On Pension Provision in the Republic of Kazakhstan” (<https://adilet.zan.kz>) and some others. Until recently, the laws “On State Social Benefits for Disability, Loss of a Breadwinner and Old Age in the Republic of Kazakhstan”, “On Special State Benefits in the Republic of Kazakhstan”, “On Social Protection of Disabled Persons in the Republic of Kazakhstan”, “On Special Social Services”, “On Employment of the Population”, “On Public Associations”, “On Benefits and Social Protection of Participants, Disabled Veterans of the Great Patriotic War and Persons Equivalent to Them” and some others were in force. Today, all of them are combined into a single codified act “Social Code of the Republic of Kazakhstan”, adopted on April 20, 2023 (<https://adilet.zan.kz>).

In accordance with the Code of the Republic of Kazakhstan on Public Health, medical care for WWII veterans is provided free of charge within the guaranteed volume of free medical care, both at the republican and regional levels. However, according to the Ministry of Labor and Social Protection

of the Population, as of April 2024, there are 274 veterans of the Great Patriotic War living in Kazakhstan ([https://tengrinews.kz/kazakhstan\\_news/skolko-veteranov-velikoy-otechestvennoy-voyni-ostalos-533812/](https://tengrinews.kz/kazakhstan_news/skolko-veteranov-velikoy-otechestvennoy-voyni-ostalos-533812/)). Every year their number is decreasing, the more important and valuable is the assistance provided to them by the state to maintain a decent standard and extend their life.

In subparagraph 74 of Article 1 of the Code of the Republic of Kazakhstan “On Public Health and the Healthcare System” (<https://adilet.zan.kz/rus/docs/K2000000360>), healthcare is defined as a system of measures of a political, economic, legal, social, cultural, medical nature aimed at preventing and treating diseases, maintaining public hygiene and sanitation, preserving and strengthening the physical and mental health of each person, maintaining his active long-term life, providing him with medical care in case of loss of health. In the above definition, the phrase “on supporting an active long-term life of a person” is one of the goals of the system of measures aimed at a person in the context of the implementation of a political, economic, legal, social, cultural, medical nature. That is, the provisions of the Code “On Public Health and the Healthcare System” do not distinguish between age differentiation of the population, with the exception of children and young people, and do not single out a separate category of persons to whom the concept of active longevity applies. Thus, Article 128 of the Code “On Public Health and the Healthcare System” regulates an integrated model of medical care, which consists of providing a set of medical and social services throughout a person’s life to prevent, timely detect, treat and reduce the risk of developing complications of the disease in order to increase life expectancy. Or, defining priority areas of public health protection (Article 74) no conditions are established in the form of a separate subparagraph for the elderly, long-livers. In particular, the following areas are defined:

- 1) health promotion through the formation of medical and social activity and attitudes towards a healthy lifestyle among the population;
- 2) raising the level of public awareness of the main aspects of health and risk factors;
- 3) epidemiological surveillance of infectious and priority non-communicable diseases;
- 4) organization of interaction between all interested government agencies, organizations and departments, public associations, business communities and other individuals and legal entities (<https://adilet.zan.kz/rus/docs/K2000000360>).

For persons of retirement age, who may be “pensioners” at the age of 43 (military personnel) or from 59 to 63 years old, the provisions of the Code establish certain requirements, taking into account age characteristics. A system of measures and guarantees is provided for pensioners that take into account the rights and characteristics established for pensioners. For example, Article 227 of the Code, paragraph 6 provides: “For the following categories of persons, biomedical research is carried out only in cases where it cannot be carried out on other persons and there are scientific grounds to expect that participation in such biomedical research will bring them direct benefits that outweigh the risks and inconveniences associated with biomedical research” – established in subparagraph 5 of paragraph 6 of Article 227 of the Code “5) old-age pensioners in need of outside assistance” (<https://adilet.zan.kz/rus/docs/K2000000360>).

Thus, the cited Code does not single out a separate category of persons who are considered long-livers ([apps.who.int/gb/ebwha/pdf\\_files/WHA73/A73\\_INF2-ru.pdf](https://apps.who.int/gb/ebwha/pdf_files/WHA73/A73_INF2-ru.pdf)). The entire system of measures according to the norms of the Code provides for the provision of medical services in the treatment of a person in case of his illness, medical examinations, mandatory preventive measures, some of which require coordination with the World Health Organization. Consequently, the Code applies the concept of “active long-term human life” not to a separate category of people and regardless of age, but directly to each person who is an object of the healthcare system. This is confirmed by the established provisions of the Code. There are no exceptions in other provisions of the Code. At the same time, in accordance with subparagraph 32) of Article 7 of the Code of the Republic of Kazakhstan dated July 7, 2020 “On Public Health and the Healthcare System”, the Standard for the Organization of Geriatric and Gerontological Care in the Republic of Kazakhstan was approved on June 23, 2021 (<https://adilet.zan.kz/rus/docs/V2100023329>). An important feature of the Standard is the establishment of requirements and procedures for the processes of organizing the provision of geriatric and gerontological care to patients of older age groups with signs of premature aging in outpatient, inpatient replacement, inpatient settings and at home.

The Standard includes special terms and definitions related to the process of providing geriatric and gerontological care:

- geriatric syndrome – a set of various symptoms characteristic of older age groups, taking into ac-

count age characteristics; – a geriatrician is a specialist whose area of activity includes providing medical care to elderly and old people, which consists of diagnosis, treatment and prevention of diseases taking into account the characteristics of old age;

- gerontological care is a set of medical, social, psychological measures aimed at ensuring healthy aging;

- older age groups are a generalized concept for three age structures of the population – 60-74 (elderly people), 75-90 (old age), after 90 years (centenarians), established by the World Health Organization;

- geriatric care for the population is a system of measures to provide long-term medical and social services in order to preserve or restore the ability to self-care, partially or completely lost due to chronic diseases, facilitating the reintegration of elderly patients into society, as well as ensuring an independent existence.

It should be noted that the Standard is medical care for older people and those with signs of premature aging, which is provided at all levels of medical care and has three levels officially enshrined in law.

1) primary level – the level of medical care provided by primary health care specialists in outpatient, inpatient and home settings;

2) secondary level – the level of medical care provided by specialized specialists providing specialized medical care in outpatient, inpatient and inpatient settings, including by referral from specialists providing medical care at the primary level;

3) tertiary level – the level of medical care provided by specialized specialists providing specialized medical care using high-tech medical services, in outpatient, inpatient and inpatient settings, including by referral from primary and secondary level specialists (<https://adilet.zan.kz/rus/docs/V2100023329>).

This Standard, for the first time in the healthcare system, made it possible to specifically differentiate the process of organizing the provision of geriatric and gerontological care to patients of older age groups with signs of premature aging in outpatient, inpatient replacement, inpatient settings and at home.

In addition, the Action Plan to Improve the Situation of Senior Citizens “Active Longevity” until 2025 was approved (Order of the Minister of Labor and Social Protection of the Republic of Kazakhstan dated February 22, 2021 No. 47) (<http://adilet.zan.kz/rus/docs/V2100023329>), which provides for 38 measures of a social, medical, and managerial na-

ture, we will name some of them: the creation of an Interdepartmental Commission on Issues of Senior Citizens; consideration of the issue of amending and supplementing certain legislative acts of the Republic of Kazakhstan on issues of improving the situation of older persons; provision of free legal assistance to senior citizens as part of events dedicated to the celebration of the International Day of Older Persons; monitoring of vacancies for older persons; conducting information campaigns on combating and preventing abuse and violence against older citizens; congratulating senior citizens who have reached the age of 90, 95, 100 years and older; opening of geriatric offices at polyclinics, improvement of continuous training of medical workers in gerontology and geriatrics courses; organization of events to maintain a healthy lifestyle, involvement of older citizens in physical education and sports, including events that cause sustainable motivation for active longevity; creation of Active Longevity Centers, registration of citizens, compilation of a map of needs, formation of interest groups, social clubs for leisure and education; holding training seminars on improving the activities and improving the quality of services provided in Active Longevity Centers, ensuring accessibility of use by older people of sports and health facilities for sports; formation of a positive image of older people in society, allowing them to be perceived as bearers of cultural traditions, professional and life experience, capable of taking an active part in the socio-economic development of the country and the upbringing of the younger generation, placement of publications and articles in the media, appearances on TV channels; ensuring the participation of older persons in consultative and advisory bodies, Public Councils, as well as in bodies created to develop legislative initiatives and state programs affecting their interests; participation of older persons in the education of the younger generation in schools, colleges and universities, extracurricular activities, clubs, sections, yard clubs; holding campaigns to provide assistance to lonely and lonely elderly citizens, with the participation of students, volunteers, representatives of public organizations; creation of hotlines for counseling and providing psychological support to elderly people in isolation; conducting prompt assessments of the needs of older persons to clarify the necessary protective measures and support measures (<http://adilet.zan.kz/rus/docs/V2100023329>).

The National Action Plan for Improving the Situation of Senior Citizens “Active Ageing” (not approved) uses the following key concepts:

- active ageing is a state of social, economic, physical and psychological well-being of senior citizens that provides them with the opportunity to meet their needs, engage in various areas of society and is achieved with their active participation;

- quality of life is the satisfaction of human needs determined by culture and a system of values. "This is a broad concept that reflects a person's physical health, psychological state, level of autonomy, social relationships, personal beliefs and connection with the characteristic features of the environment" (World Health Organization, 1994). In older ages, it is largely determined by the ability to maintain independence and autonomy in meeting needs and fully participating in society (<http://adilet.zan.kz/rus/docs/V2100023329>); The above analysis shows that the normative legal acts governing the rights of citizens in Kazakhstan do not contain discriminatory norms against elderly citizens, but government agencies are extremely slow and not so effective in trying to create conditions for the real implementation of productive development in the country of active longevity (Salimgerey 2020b). Domestic legislation does not always take into account scientific developments and messages. At the same time, it is science that is the basis for the real implementation of the principles of longevity. Today, the largest number of scientific developments on anti-aging issues are focused on medical industry areas. As for the law, a significant number of developments are presented by foreign scientific schools in the format of medical law and international medical law.

The leading direction in this aspect is the Russian Federation. Thus, of considerable interest are the dissertations of E.V. Lazareva "Legal regulation of medical activity in the Russian Federation: Certain aspects of theory and practice" (Lazareva 2006), A.A. Roericht "Juridization of medical law: development of public-law principles" (Roericht 2006), N.K. Elina "Legal problems of rendering medical services" (Elina 2006). and others. Unfortunately, there are no Kazakh legal scholars in this scientific direction. The existing dissertations, even if they concern legal aspects, are defended in medical specialties (Auezova 2014).

## Conclusions

The Strategic Development Plan of the Republic of Kazakhstan until 2025 provides for the creation of conditions for increasing human life expectancy, which is consistent with the Strategy "Kazakhstan

– 2050" ([https://online.zakon.kz/Document/?doc\\_id=38490966](https://online.zakon.kz/Document/?doc_id=38490966)).

The tasks set oblige, within the framework of science, to conduct special research to solve the above-mentioned problems, that is, to increase human life expectancy.

It is the lack of organizational and legislative measures that create the main difficulties in the practical implementation of the achievements of medical science in the practical life of the country. The scientific achievements available to medicine in prolonging human life and maintaining its quality are based primarily on the fight against diseases caused by aging, and not on intervention in the aging process itself. However, without significant success in slowing down aging associated with age-related diseases, it is possible to extend the average life expectancy only within relatively small limits.

Thus, without a theoretical understanding of the aging process and the identification of technologies for overcoming the limit of human life expectancy, the entire complex of medical and biological sciences, from a practical point of view, may not be so effective without direct interaction with other branches of science, and above all, legal science (Salimgerey 2020b). Today, more than 300 theories can be identified to explain the aging process, but so far none of them is generally accepted. Traditional theories of aging claim that aging is not a strictly adaptive process or a genetically programmed process (Champaneria 2006: 394).

Currently, scientists distinguish 3 theories of aging:

- Increased probability of death due to biological causes.

- Implementation of a self-destruction program.

- Violation of homeostasis at various levels of the organization of a living system as a result of an age-dependent decrease in the functionality of systems maintaining the constancy of the internal environment (Sharman 2011: 2).

Modern research by scientists substantiates the conclusions about the identification of a factor limiting the maximum life expectancy of a person – programmed cell death leading to aging of the body, i.e. a complex program to counteract aging is genetically embedded in a person.

The right to life and health refers to the classifier of natural human and citizen rights. Art. 12 of the International Covenant on Economic, Social and Cultural Rights of December 16, 1966 proclaims the right of everyone to the highest attainable standard of physical and mental health,

enshrines a wide range of measures taken by the state to fully ensure this right ([http://adilet.zan.kz/rus/docs/Z050000087\\_](http://adilet.zan.kz/rus/docs/Z050000087_)).

The global coronavirus pandemic that has recently engulfed the entire world poses new challenges for humanity. In such a difficult period, only a nation capable of resilience, ahead of its time, and in search of advanced scientific developments can survive.

On September 1, 2020, the President of the Republic of Kazakhstan Kassym-Jomart Tokayev, at a joint session of the chambers of Parliament, in the Address to the people of Kazakhstan “Kazakhstan in a new reality: time for action”, noted that today our society is at such a stage of development when the human factor objectively becomes dominant, paramount, fundamental, but, at the same time, the development of public life itself leads to the fact that a person begins to act as a factor that has no price (<https://kazpravda.kz/>).

National legislation should take into account the special status of older people, their specific needs and interests. The implementation of the principles of active longevity should be based on the inalienable human rights of older people, the inclusion in

the current legislation of norms concerning older citizens as a special, special group of people. Currently, the existing system of medical care practically does not take into account the characteristics and needs of elderly people susceptible to various diseases and ailments. The level of pension payments does not allow most of the older generation to live with dignity. In some government documents adopted, there is a subtext about humanity’s disrespectful attitude towards itself: “an increase in the population due to an increase in life expectancy creates problems for society and also requires additional costs in the area of health care and social security.” Social services, like pension payments, other social guarantees for age, in the event of loss of ability to work, loss of a breadwinner, disability, the need to receive high-quality medical, work and career guidance assistance, etc., from our point of view, do not allow for high-quality longevity for older people.

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#### Литература

Караев А.А. Конституционная безопасность Республики Казахстан: состояние, проблемы и механизм обеспечения: монография. – Алматы, 2017. 602 с. С. 397

Средняя продолжительность жизни в странах мира // Интернет-ресурс: [http://ostranah.ru/\\_lists/life\\_expectancy.php](http://ostranah.ru/_lists/life_expectancy.php)

Ожидаемая продолжительность жизни казахстанцев выросла // <https://stat.gov.kz/ru/news/ozhidaemaya-prodolzhitelnost-zhizni-kazakhstanstev-vy82>).

Конституция Республики Казахстан (принята на республиканском референдуме 30 августа 1995 года) (с изменениями и дополнениями по состоянию на 30.05.24 г.) // Интернет-ресурс: [https://online.zakon.kz/document/?doc\\_id=1005029](https://online.zakon.kz/document/?doc_id=1005029)

Республика Казахстан ратифицировала Международный пакт об экономических, социальных и культурных правах Законом Республики Казахстан 21 ноября 2005 года № 87-III // Интернет-ресурс: <http://adilet.zan.kz/rus/docs/Z050000087>

Национальный план действий по улучшению положения граждан старшего поколения «Активное долголетие» в Республике Казахстан до 2025 года (не утвержден) // <https://legalacts.egov.kz/application/downloadconceptfile?id=3972490>

[Электрон. ресурс] Информационно-правовая система нормативных правовых актов Республики Казахстан · Институт законодательства и правовой информации Министерство юстиции URL: <https://adilet.zan.kz>

Социальный кодекс Республики Казахстан от 20.04.2023 г. [Электрон. ресурс] / Информационно-правовая система нормативных правовых актов Республики Казахстан · Институт законодательства и правовой информации Министерство юстиции URL: <https://adilet.zan.kz>

Сколько ветеранов Великой Отечественной войны осталось в Казахстане // [https://tengrinews.kz/kazakhstan\\_news/skolko-veteranov-velikoy-otechestvennoy-voynyi-ostalos-533812/](https://tengrinews.kz/kazakhstan_news/skolko-veteranov-velikoy-otechestvennoy-voynyi-ostalos-533812/)

По данным Всемирной организации здравоохранения возраст свыше 90 лет относится к долгожителям. ВОЗ определяет здоровое старение как «процесс развития и поддержания функциональной способности, обеспечивающей благополучие в пожилом возрасте» // Десятилетие здорового старения [https://apps.who.int/gb/ebwha/pdf\\_files/WHA73/A73\\_INF2-ru.pdf](https://apps.who.int/gb/ebwha/pdf_files/WHA73/A73_INF2-ru.pdf)

Об утверждении Стандарта организации оказания гериатрической и геронтологической помощи в Республике Казахстан // Приказ Министра здравоохранения РК от 23 июня 2021 года № КР ДСМ -55 // <https://adilet.zan.kz/rus/docs/V2100023329>

Лазарева Е.В. «Правовое регулирование медицинской деятельности в Российской Федерации: Отдельные аспекты теории и практики»: автореф. дис ...канд. юрид. наук: 12.00.01 Саратов: 2006. – 32 с.

Рёрихт А.А. «Юридизация медицинского права: развитие публично-правовых начал»: автореф. дис ...канд. юрид. наук: 12.00.03 Москва: 2006. – 29 с.

Елина Н.К. «Правовые проблемы оказания медицинских услуг»: автореф. дис ...канд. юрид. наук: 12.00.03 Волгоград: 2006. – 24 с.



Ауезова А.М. Диссертация на соискание ученой степени доктора философии (PhD) «Научное обоснование совершенствования механизма обеспечения защиты конституционных прав медицинских работников в Республике Казахстан»: специальность 6D110200 – Общественное здравоохранение. Алматы 2014.

Указ Президента Республики Казахстан от 15 февраля 2018 года № 636 «Об утверждении Стратегического плана развития Республики Казахстан до 2025 года» (с изменениями от 10.09.2019 г.) // Интернет-ресурс: [https://online.zakon.kz/Document/?doc\\_id=38490966](https://online.zakon.kz/Document/?doc_id=38490966)

Champaneria M.C., Modlin I.M., Kidd M., Eick G.N. Friedrich Feyrter: a precise intellect in a diffuse system. *Neuroendocrinology*. 2006;83(5–6):394–404.

«Научные основы качественного долголетия и антистарения», под редакцией А. Шарман, Ж. Жумадилов. Нью-Йорк-2011-184 С. С 12.

Международный пакт об экономических, социальных и культурных правах от 16 декабря 1966 г. Ратифицирован Законом Республики Казахстан от 21 ноября 2005г. № 87. // Интернет-ресурс: [http://adilet.zan.kz/rus/docs/Z050000087\\_](http://adilet.zan.kz/rus/docs/Z050000087_)

Казахстанская правда. 2 Сентября 2020 г. С. 1, 2–5. <https://kazpravda.kz/>

## References

Auezova A.M. Dissertaciya na soiskanie uchenoj stepeni doktora filosofii (PhD) «Nauchnoe obosnovanie sovershenstvovaniya mehanizma obespecheniya zashity konstitucionnyh prav medicinskih rabotnikov v Respublike Kazahstan»: specialnost 6D110200 – Obshestvennoe zdavoohranenie [Dissertation for the degree of Doctor of Philosophy (PhD) “Scientific substantiation of improvement of the mechanism of ensuring protection of constitutional rights of medical workers in the Republic of Kazakhstan”: specialty 6D110200 – Public Health]. -Almaty 2014.

Champaneria M.C., Modlin I.M., Kidd M., Eick G.N. Friedrich Feyrter: a precise intellect in a diffuse system. *Neuroendocrinology*. 2006;83(5–6):394–404.

Elina N.K. «Pravovye problemy okazaniya medicinskih uslug»: avtoref. dis ...kand. jurid. nauk: 12.00.03 [“Legal problems of rendering medical services”: author’s abstract. diss. candidate of legal sciences: 12.00.03]. – Volgograd: 2006. – 24 s.

Informacionno-pravovaya sistema normativnyh pravovyh aktov Respubliki Kazahstan · Institut zakonodatelstva i pravovoj informacii Ministerstvo yusticii [Information and legal system of regulatory legal acts of the Republic of Kazakhstan Institute of Legislation and Legal Information Ministry of Justice] URL: <https://adilet.zan.kz>

Karaev A.A. (2017) Konstitucionnaya bezopasnost Respubliki Kazahstan: sostoyanie, problemy i mehanizm obespecheniya: monografiya [Constitutional security of the Republic of Kazakhstan: status, problems and mechanism of provision: monograph].-Almaty. – 602 s.

Kazahstanskaya pravda. 2 Sentyabrya 2020 g. [Kazakhstan Pravda. September 2, 2020.] S. 1, 2–5. <https://kazpravda.kz/>

Konstituciya Respubliki Kazahstan (prinyata na respublikanskom referendume 30 avgusta 1995 goda) (s izmeneniyami i dopolneniyami po sostoyaniyu na 30.05.24 g.) [Constitution of the Republic of Kazakhstan (adopted at the republican referendum on August 30, 1995) (with amendments and additions as of May 30, 24)] // Internet-resurs: [https://online.zakon.kz/document/?doc\\_id=1005029Srednyaya](https://online.zakon.kz/document/?doc_id=1005029Srednyaya) prodolzhitel'nost zhizni v stranah mira [Average life expectancy in the countries of the world] //Internet-resurs: [http://ostranah.ru/\\_lists/life\\_expectancy.php](http://ostranah.ru/_lists/life_expectancy.php)

Lazareva E.V. «Pravovoe regulirovanie medicinskoj deyatel'nosti v Rossijskoj Federacii: Otdelnye aspekty teorii i praktik»: avtoref. dis ...kand. jurid. nauk: 12.00.01 [“Legal regulation of medical activity in the Russian Federation: Certain aspects of theory and practice”: author’s abstract. diss ... candidate of legal sciences: 12.00.01]. – Saratov: 2006. – 32 s.

Mezhdunarodnyj pakt ob ekonomicheskikh, socialnyh i kulturnyh pravah ot 16 dekabrya 1966 g. Ratificirovan Zakonom Respubliki Kazahstan ot 21 noyabrya 2005g. № 87 [International Covenant on Economic, Social and Cultural Rights of December 16, 1966. Ratified by the Law of the Republic of Kazakhstan of November 21, 2005 No. 87.] // Internet-resurs: [http://adilet.zan.kz/rus/docs/Z050000087\\_](http://adilet.zan.kz/rus/docs/Z050000087_)

Nacionalnyj plan dejstvij po uluchsheniyu polozheniya grazhdan starshego pokoleniya «Aktivnoe dolgoletie» v Respublike Kazahstan do 2025 goda (ne utverzhen) [National Action Plan to Improve the Situation of Senior Citizens “Active Longevity” in the Republic of Kazakhstan until 2025 (not approved)] // <https://legalacts.egov.kz/application/downloadconceptfile?id=3972490Ozhi> daemaya prodolzhitel'nost zhizni kazahstancsev vyrosla [Life expectancy of Kazakhstanis has increased] // <https://stat.gov.kz/ru/news/ozhidaemaya-prodolzhitel'nost-zhizni-kazahstancsev-vy82>).

«Nauchnye osnovy kachestvennogo dolgoletiya i antistareniya», pod redakciej A. Sharman, Zh. Zhumadilov [“Scientific basis for high-quality longevity and anti-aging”, edited by A. Sharman, Zh. Zhumadilov]. New-York-2011-184 S. S 12.

Ob utverzhenii Standarta organizacii okazaniya geriatricheskoj i gerontologicheskoj pomoshi v Respublike Kazahstan//Prikaz Ministra zdavoohraneniya RK ot 23 iyunya 2021 goda № KR DSM -55 [On approval of the Standard for the organization of geriatric and gerontological care in the Republic of Kazakhstan // Order of the Minister of Health of the Republic of Kazakhstan dated June 23, 2021 No. KR DSM-55] // <https://adilet.zan.kz/rus/docs/V2100023329>

Po dannym Vsemirnoj organizacii zdavoohraneniya vozrast svyshe 90 let odnositsya k dolgozhitelyam. VOZ opredelyaet zdorovoe starenie kak «process razvitiya i podderzhaniya funkcionalnoj sposobnosti, obespechivayushej blagopoluchie v pozhilom vozraste» [According to the World Health Organization, the age over 90 years is considered long-livers. WHO defines healthy ageing as “the process of developing and maintaining functional ability that ensures well-being in old age”] // Desyatiletie zdorovogo stareniya [https://apps.who.int/gb/ebwha/pdf\\_files/WHA73/A73\\_INF2-ru.pdf](https://apps.who.int/gb/ebwha/pdf_files/WHA73/A73_INF2-ru.pdf)

Respublika Kazahstan ratificirovala Mezhdunarodnyj pakt ob ekonomicheskikh, socialnyh i kulturnyh pravah Zakonom Respubliki Kazahstan 21 noyabrya 2005 goda № 87-III [The Republic of Kazakhstan ratified the International Covenant on Economic,

Social and Cultural Rights by the Law of the Republic of Kazakhstan dated November 21, 2005 No. 87-III] // Internet-resurs: <http://adilet.zan.kz/rus/docs/Z050000087>

Socialnyj kodeks Respubliki Kazahstan ot 20.04.2023 g. [Social Code of the Republic of Kazakhstan dated 04/20/2023] [Elektron. resurs] /Informacionno-pravovaya sistema normativnyh pravovyh aktov Respubliki Kazahstan · Institut zakonodatelstva i pravovoj informacii Ministerstvo yusticii URL: <https://adilet.zan.kz>

Skolko veteranov Velikoj Otechestvennoj vojny ostalos v Kazahstane [How many veterans of the Great Patriotic War are left in Kazakhstan] // [https://tengrinews.kz/kazahstan\\_news/skolko-veteranov-velikoy-otechestvennoy-voynyi-ostalos-533812/](https://tengrinews.kz/kazahstan_news/skolko-veteranov-velikoy-otechestvennoy-voynyi-ostalos-533812/)

Ryoriht A.A. «Yuridizaciya medicinskogo prava: razvitie publichno-pravovyh nachal»: avtoref. dis ...kand. jurid. nauk: 12.00.03 [Juridization of medical law: development of public-law principles]: author's abstract. diss. candidate of legal sciences: 12.00.03]. – Moskva: 2006. – 29 s.

Ukaz Prezidenta Respubliki Kazahstan ot 15 fevralya 2018 goda № 636 «Ob utverzhdenii Strategicheskogo plana razvitiya Respubliki Kazahstan do 2025 goda» (s izmeneniyami ot 10.09.2019 g.) [Decree of the President of the Republic of Kazakhstan dated February 15, 2018 No. 636 “On approval of the Strategic Development Plan of the Republic of Kazakhstan until 2025” (as amended on September 10, 2019)] // Internet-resurs: [https://online.zakon.kz/Document/?doc\\_id=38490966](https://online.zakon.kz/Document/?doc_id=38490966)

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