

影響北市社區健康營造中心志工推行健康促進活動成效探

討

Factors Related to the Accomplishment of Health

Promoting Activities among Healthy Communities

Volunteers in Taipei

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摘要

本研究立意選取提供定點健康篩檢及家戶訪視之北市信義、石牌區社區健康營造中心，培訓完成之 66 名志工為對象，以自擬問卷及衛生署研擬之家戶三大健康議題行為追蹤量表兩工具，探討影響志工推行健康促進活動成效之相關因素。研究發現志工以女性、中年、高中（職）、佛教信仰為主，家人對其擔任志工多表贊同。擔任志工作動機依序為「自我導向」之學習保健知識與技巧、從服務中獲得自我成長，以「他人導向」之貢獻社會幫助別人、深入社區服務使更多人受益及以「情境導向」之可以多結交朋友。平均參與程度：定點服務 1.56 次／月、家戶訪視 0.58 次／月、累計家戶訪視數 1.07 戶／月、分發 DIY 教材 1.25 戶／月。志工對參與後滿意度及未來持續參與意願皆達滿意與願意程度以上，但對繼續推動家訪及發放教材的意願則較低。經推動健康議題，社區民眾僅在健康飲食及運動行為執行頻率達顯著提昇。志工越年輕其健康促進知識得分越高。教育程度較高、參與動機為「他人」及「情境」導向，對推行活動的看法較為正向。推行活動意願與全職工作、家人的看法及以「自我」及「他人」導向動機者，達統計上顯著差異。志工的工作內容、以「他人」導向動機者與定點值勤之次數有顯著相關；全職者的滿意度高於兼職者；家人持反對看法者未來持續參與意願最高。預期民眾參與的看法越正向者，其參與後滿意度及未來持續參與意願越高；但與家訪戶數及分發教材戶數成負相關。綜此隨時注意最新相關健康促進策略，並依據志工服務需求來擬定適當的培訓計畫，讓志工能不斷有新的能源以服務社區民眾，以期能更有效率地達到社區健康營造目標。

Abstract

The purpose of this study was to explore factors related to volunteers' accomplishments in health-promoting activities. A correlational design was used. Two healthy community centers in Taipei that provide health check-up and home visiting services were selected through

convenience sampling, and 66 volunteers trained with health promotion related courses were recruited. Two instruments were used: a self-developed questionnaire was filled out on the spot; another, developed by the DOH was used by the researcher to telephone survey community residents to evaluate the effects of volunteers in changing community residents' health behaviors. Volunteers who participated in this project were mostly women, the middle-aged, married, Buddhists, with high school education and full-time jobs. The reasons for their participation were respectively "self-directed," "other-directed," and "situation-directed." The statistical means for health check up visits were 1.56 times per month and 0.58 times per month for home visits. Each volunteer had visited 1.07 household in average; the number of families that accept health DIY brochures was 1.25 in average. Volunteers' satisfaction and their willingness to participate in the future were great indeed, except for conducting home visit and dispensing brochures. The community residents had significantly improved their health diet and regular exercise. We also found that the younger the volunteers, the better their knowledge regarding health-promoting activities. The highly educated and "other-directed" or "situation-directed" participants held positive attitudes. Volunteers with higher willingness were those with full-time jobs, family support and were also "self-directed" and "other-directed" participants. Job status and motivation as "other-oriented" were related to the frequency of service. Those who positively expected the public's attendance were more satisfied and willing to participate in the future; however, this positive expectation was negatively related to level of participation in home visits and distributing brochures.