

社區慢性病老人及其主要照顧者自述其健康相關生活品質 差異之探討

Exploration into the variance in self-reported health-related quality of life between the chronically-ill elderly and their family caregivers.

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摘要

老人及家屬的健康生活品質上差異對長期照護服務的選擇有關鍵的影響，本研究目的在利用量化的方式來探討老人與照顧者健康相關生活品質差異及其影響因素。本研究由台灣七個縣市的護士訪問社區內 267 對老人及其主要照顧家屬，使用 28 題型的「台灣簡明版世界衛生組織生活品質問卷(WHOQOL-BREF, Taiwan version)」為研究工具。本研究使用標準回答平均值(Standardized Response Mean, SRM)，即平均差比差異的標準差(SD)，來比較老人與其主要照顧家屬間的健康相關生活品質分數。照顧家屬在所有四個健康相關生活品質範疇的分數均較高：在生理範疇，照顧者的分數較高，而在其他三項只是些微高於老人。除性別外，在生理、環境及心理範疇，日常生活活動(ADLs)依賴程度是造成兩者生活品質差異的主因。婚姻狀況和主要照顧者的身份則是社會關係範疇的預測因子。本研究發現：老人的 ADLs、性別、婚姻狀況、主要的照顧者的身份等，是老人與其照顧家屬在健康相關生活品質差異的預測因素。此結果可提供慢性病老人及其主要照顧者在長期照護的安排上之適當建議。據此提升老人的日常生活功能獨立程度，以及加強家人間的親密關係均能有效的提升老人的健康相關生活品質。

Abstract

Differences in perspective with regard to Health-Related Quality of Life (HRQOL) may significantly affect long-term care preferences. This study was developed to quantify the direction and magnitude of such differences and to explore factors accounting for HRQOL reporting differences between two groups, namely elderly individuals with chronic conditions and their primary family caregivers. Nurses in seven Taiwanese counties and

cities interviewed 267 matched pairs of elderly individuals and primary family caregivers using a 28-item version of the World Health Organization Quality of Life questionnaire (WHOQOL-BREF) adapted for use in Taiwan. Our study used the standardized response mean (SRM)-the ratio of the mean difference to the SD of that difference-to compare scores assigned by the two groups. Family caregivers assigned higher scores in all four HRQOL domains, with scores "moderately higher" in the physical domain and "slightly higher" in the other three. In addition to gender, several activities of daily livings (ADLs) in the physiological, environmental and psychological domains were identified as predictors of HRQOL differences. Marital status and presence of a primary caregiver were the two predictors in the social relationship domain. This study found elderly ADLs, gender, marital status, and the presence of a primary caregiver to be significant predictors of HRQOL differences. Study findings offer guidance to elderly individuals with chronic conditions and their family caregivers with regard to long-term care program arrangement in order to enhance elderly ADLs and family relationships and to achieve a better overall HRQOL for the elderly.