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• 中文摘要	許多研究指出中風的病患通常都會是長期照護的主要使用者,基本上居家護理還是被大部分的病人及家屬所接受,可是對於那些生理功能狀況嚴重退化的病人來說,機構式照護之使用是不可避免的。有研究者強調家屬對長期照護服務型態之態度,對於實際上服務的使用之影響是值得重視的。但國內相關之研究,大多偏向以橫斷面去瞭解社區中之健康老人、與一般民眾長期照護服務型態之可能性的選擇態度,鮮少有人探討態度與實際服務使用間之一致性,亦甚少論及那些已迫在眉捷需要長期照護之病人的家屬之態度和服務實際使用情形間的關係、與可能影響因子。 本研究以縱向追蹤第一次中風、且從未使用過長期照護服務的病患家庭中的主要決策者,在他們出院時瞭解他們所偏好的長期照護型態,然後在他們出院後第一、二、三個月以電話訪談他們使用長期照護服務之情形。因此,態度及利用長期照護服務型態間的一致性是本研究主要的依變項,可能影響一致性之變項爲病人之年齡、性別及日常生活之依賴程度,及受訪家庭照顧者之年齡、性別、教育程度、和家庭中的月收入,家庭照顧人力,心理壓力、與長期照護服務之可近性等。此研究設計希望達成以下目的:了解那些已迫在眉捷需要長期照護之中風病人之家屬對服務型態的態度和服務實際使用情形,以及爲什麼態度上希望使用機構式(居家式)照護的家屬,實際上並未使用機構式(居家式)照護。這些資料顯示本研究結果指出,態度上偏向使用護理之家且實際也使用者,其多爲照顧嚴重失態之病人,其居家附近即有護理之家,家中較缺照顧人力。邏輯式迴歸分析結果也顯示,護理之家的可近性是影響是否實際使用護理之家的顯著因素;而實際選用居家護理者相比較,未選用居家護理者大多偏向照顧重度生理失態之病人,難以在居家附近找到提供居家護理的機構,並家中無多餘人力協助照顧工作。在邏輯式迴歸分析中,家中是否有多餘之人力協助照顧病人對於是否選用居家照顧服務有顯著影響。如何提供足夠之支持幫助偏好居家照護者真能使用居家照護;及如何提昇護理之家的可近性使意欲使用者後以如願以償,是值是重視之兩大課題。
• 英文摘要	Stroke-related disability substantially increases the need for long-term care. Home-based long-term care is almost preferred by patients and families; however,

institutional care is inevitable with the deterioration of functional status of patients. Attitude of the healthy elderly and people in community toward long-term care have been examined with many efforts. Little efforts have been devoted to study consistency between attitude and real utilization of long-term care, especial for patients and their families who need long-term care. This study is designed to interview the family, who is the decision-maker among families, of hospitalized first-ever stroke patients at the discharged date and to follow they by phone visiting at the first, second, and third months after being discharged from hospitals trace their preference of long-term care type (attitude) and real utilization. Therefore, consistency between attitude and utilization is the dependent variable in this study. Independent variables included in this study will be age and sex of patient, age, sex, education, and psychological stress of respondent, monthly family income, family manpower available for caregiving and accessibility of long-term care. This study aims to assess the attitude and utilization of families of stroke survivors toward long-term care, and to explore why inconsistency exists. Results indicated that the consistency rate for those with nursing home preference was 8.3% while the consistency rate for those with home care preference was 94.2%. Accessibility of nursing home facilities near family residences was significantly associated with whether those preferring nursing home services actually utilized them, and the odds ratio was 20.8. The family manpower available for caregiving at home was tremendously associated with whether families utilized home care when home care was preferred; the odds ratio was 33.3. The preference for the type of long-term care was a strong predictor of the utilization when home care was preferred, yet not when a nursing home was preferred. The low consistency between preference and utilization for nursing homes preferred is due to the low accessibility of nursing home facilities in Taiwan. How to provide sufficient support to families for caregiving at home, and how to deal with the barrier of accessibility to nursing home services should be two major concerns for those who are planning and operating the long-term care system and for those trying to design institutional services and non-institutional services as alternatives.