

影響北市社區健康營造志工推行健康促進活動成效相關因素之探討

Factors affecting the accomplishment of health promoting activities among healthy communities volunteers in Taipei

中文摘要

自 1974 年 Marc Lalonde 指出個人生活方式對健康影響的重要性後，世界各國紛紛將健康促進活動列為最主要的衛生政策，但目前多針對醫療專業團體或政府組織機關主導推行該活動方面的探討，唯對以社區志工為主導推行該活動之成效尚未探究。因此，本研究將針對培訓之社區健康營造志工，以（1）瞭解志工推行健康促進活動的知識、態度、意願及成效；（2）探討志工基本特質與推行健康促進活動知識、態度、意願之相關性；（3）探討影響志工推行健康促進活動成效之相關因素。

本研究為相關性研究設計，採方便取樣方式，篩選有提供定點健康篩檢服務及家戶訪視之台北市信義區、石牌地區健康營造社區，並經由保健志工課程培訓完成之志工共 65 名。研究調查工具共有兩份：第一份自擬問卷乃依研究目的、架構並參考國內外相關文獻自擬而成，採志工當場填寫回收及郵寄方式收集。第二份問卷乃沿用衛生署於評值社區健康營造計劃成效中使用之家戶三大健康議題行為追蹤量表，前測由志工第一次接觸家戶或社區個案時，評值其三大健康議題之行為現況，並依據衛生署製作的健康 DIY 教材給予行為衛教，後測則由研究者以電話訪談方式評值家戶或社區個案健康行為改善程度。

本研究發現參與推行社區健康促進活動的志工，以女性、中年、高中（職）、有配偶、家庭主婦、佛教信仰、目前仍為全職工作者、全家每月平均收入介於 15001 元至 65000 間者為多，且家人對其擔任志工多數表贊同意、擔任志工經驗比率將近 1：1。參與原因依序為「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。在參與程度部份，定點執行健康篩檢服務 1.56 次/月，至社區中進行家戶訪視 0.58 次/月，目前家戶訪視個案累計數平均為 1.07 戶，已接受自助式健康教材平均共計 1.25 戶。其參與服務後的滿意度及未來持續參與意願方面，整體而言皆達到滿意程度以上，並願意繼續參與推行健康促進活動。但對繼續推動家戶訪視及發放自助式健康教材的意願程度則較低。在推動家戶或社區個案執行三大健康議題行為之改善程度方面，僅健康飲食及運動行為執行頻率之前、後測達顯著提昇。由結果中並得知，志工年齡越輕其健康促進活動知識得分越高。教育程度在大專（含）以上、參與原因以「他人」及「情境」導向者，對推行社區健康促進活動的看法較為正向。推行健康促進活動意願方面，與全職工作者、家人對擔任志工的看法及以「自我」及「他人」導向為參與原因者，達統計上顯著差異。有關影響志工推行健康促進活動成效之因素方面，以志工基本特質中的工作內容、以「他人導向」為參與原因者，與定點值動之次數有相關性存在；全職工作者的滿意度高於兼職者；家人對其擔任志工持反

對看法者未來持續參與意願高於贊成及無意見者。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；但與家戶健康訪視戶數及分發自助式健康教材戶數成負相關。

由研究得知，社區護理人員應充份運用其專業學識與技巧，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。

關鍵詞：社區健康營造志工、健康促進活動、成效

英文摘要

Since Marc Lalonde pointed out that the life-style had significant influence on individual's health, every country in the world had reformed its policy to promote its citizens' health. However, most of health promoting projects had been led by the health professionals and the governmental organizations, accomplishment of this type of activities that were leading by healthy communities' volunteers had not yet been studied. Therefore, this research will focus on the effects of trained healthy communities' volunteers in Taipei. The major objectives were as following: (1) to describe community volunteers' knowledge, attitude, willingness and efforts toward health promoting activities, (2) to explore the relationship between volunteers' personal characteristics and their knowledge, attitude and willingness toward health promoting activities, and (3) to explore related factors that influence the volunteers' effects of health-promoting activities.

The correlational design was used. The convenient was utilized to select two health communities in Taipei (Hsin-Yi district and Shih-pai district) that provide health check up duty and home visiting. A total of 65 volunteers trained with health promotion related courses were recruited. There were two instruments used in this study. The self-developed questionnaire was filled in on the spot and send by mail to evaluate volunteers' knowledge, attitude, willingness and effects. The second instrument was developed by the Department of health to evaluated the effects of volunteers in changing community residents' health behaviors. The scale was pre-tested when the volunteers first approached the residents. Then, volunteers would utilize the health DIY brochures to educate residents to implement the health promotion behaviors. Three months later, researcher would use the same scale to call the residents to evaluate their health behaviors.

Study results identified that the volunteers who participate at this project were mostly women, the middle age, married, housewives, Buddhists, with high school education and with full-time job. Their monthly family income was mostly between 15,001 and 65,000. Most of their families support their participation at such volunteer works. The ratio of the volunteer with and without experience was 1:1. The reasons for their

participation were respectively "self-directed" as for learning health related knowledge and technique, self achievement from providing services; "other-directed" as for social contributions and helping more people; and "situation-directed" as for making more new acquaintances. In level of participation, the mean serve for health check up was 1.56 times/month, and the average home visit was 0.58times/month. Each volunteer had visited 1.07 home in average; the number of families that accept health DIY brochures was 1.25 in average. In evaluating volunteers' satisfaction and their willingness to participate the relevant activities in the future were great in deed. However, volunteers' willingness to conduct home visit and dispensing health DIY brochures were much reluctant. As for the effects of promoting the individual family and community to change their healthy behaviors, healthy diet and regular exercise were all significantly improved. The younger volunteers, the better their knowledge regarding health-promoting activities. The highly educated and "other-directed" or "situation-directed" participants held positive attitude toward the community's health promotion project. Volunteers with high participation willingness were those with fulltime job, with their family's support and as the "self-directed" and "other-directed" participants. In evaluating factors related to volunteer's effects on promoting health activities, volunteer's job status and as "other-oriented" participate were relate to the frequency of on-duty. Full-timers were more satisfied with their work than the part-timers. Those who did not earn much family member's support were more willing to participate such activities in the future than others. Those who positively expect the public's attendance were more satisfied and were more willing to participate the relevant activities in the future; however, This type of attitude was negatively relate to level of participation in home visit and brochures distribution. Based on results of this study, the community health nurses have to apply their professional knowledge and technique on promote the relevant activities. We must also pay attention to the latest health promotion strategies in order to propose proper training courses for the volunteers to help them to serve the community to further achieve the goal of establishing a healthy community.

Key words: healthy communities volunteers, health promoting activities, effect