

行政院國家科學委員會專題研究計畫 成果報告

不同居住模式對智障者生活品質、家庭參與、工作者工作 滿意度影響研究 研究成果報告(精簡版)

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行政院國家科學委員會補助專題研究計畫 成果報告
 期中進度報告

不同居住模式對智障者生活品質、家庭參與、
工作者工作滿意度影響

(Effects on User's Quality of Life, Family Involvement, Staff's Job Satisfaction
Cross Small Community Homes, Group Homes and Institutions for Adults with
Intellectual Disabilities)

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執行單位：陽明大學衛生福利研究所

中 華 民 國 96 年 10 月 31 日

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壹、前言

本研究原為申請三年期之研究計畫，然只通過一年，目的包括：

1. 延續周月清、林麗嬋(2006)研究，繼續追蹤探討住在社區小型居住（6人以下）之成年智障者住民適應行為及主客觀生活品質是否因為居住時間長而有所提升。
2. 探討前述有參與周月清、林麗嬋(2006)研究住在社區小型居住（6人以下）、團體家庭（50人以下）及教養院（100人以上）成年智障者的家庭對該居住服務的態度、參與、對智障家人生活品質重視度及其生活品質是否會受其智障家人安置時間長短而改變，並比較前述三種居住服務模式成年智障者的家庭對該居住服務的態度、參與、對智障家人生活品質重視度及其生活品質是否有顯著差異。
3. 探討比較前述有參與周月清、林麗嬋(2006)研究住在社區小型居住（6人以下）、團體家庭（50人以下）及教養院（100人以上）成年智障者的三種服務模式之工作者基本特質、工作滿意度、生活品質、心理健康及其對智障者生活品質的重視度是否有所差異；以及檢視前述工作者工作滿意度、生活品質、心理健康及其對智障者生活品質的重視度的顯著預測因子。

依據前述三個研究目的，本研究分別以三個子研究進行資料收集及分析，此三個子研究之精簡成果報告以中英文摘要方式分述如下。

貳、精簡成果報告內容

一、子研究一

題目：台灣智能障礙者小型居住服務：新的居住服務方案追蹤評估研究

（一）中文摘要

關鍵字：智能障礙者、小型居住服務方案、結果、台灣

背景：台灣政府在2004年11月創辦了一個新的小型心智障礙者居住服務方案

(六人以下)——支持 12 個社區居住與獨立生活的服務計畫，提供成年心智障礙者的居服務。與西方社會不同的，新方案的主要使用者是從他們的原生家庭搬入，少數來自大型教養院。本文旨在評估此新的居住方案的相關成果以及比較從大型教養院搬出及從原生家庭搬出的成果差異。

方法： 本研究採單組重複測量研究設計以評量新方案和比較兩個族群（從大型教養院及原生家庭遷入者）內成果變化。此研究即在評估智能障礙住民在遷入新環境後，兩年的追蹤重複測量。資料收集時間為 2005 年一月至 2007 年四月間，研究之初共有 49 位住民參與，測量工具包含有適應性行為、非適應性行為、生活品質、自我選擇、社區參與及家庭照顧。本研究案每半年進行一次訪問，訪問對象為前述 12 個提供小型居住服務單位的智能障礙者住民。截至研究案結束為止，共訪問五次(T1 到 T5)；每次面訪都在住民使用居住服務的房舍中進行。

結果： T1 到 T5 的住民在生活品質和社區參與有顯著改善，反之，住民非適應性行為的降低、適應性行為的改進及自我選擇，未見有顯著改善。比較來自原生家庭的住民及來自大型教養院，發現住民 T5 在適應性行為及自我選擇有顯著差異；而比較兩年追蹤改變(T5-T1)，除家人接觸頻率有顯著差異外，其他面向的差異則未達統計顯著。

結論： 不論住民來自大型教養院或者來自原生家庭，研究結果都顯示此一方案有效促進住民的生活品質及社區參與。相較之下，新的方案並未有效影響住民的適應性行為、非適應性為及自我選擇。此研究結果可提供台灣未來發展居住服務模式在政策決定上的參考。

(二) 英文摘要

Outcomes at Small Residential Homes for Adults with Intellectual Disabilities: A follow-up study of a New Residential Scheme in Taiwan

Abstract

Key Words: intellectual disability, small residential home, outcome, Taiwan

Background Taiwanese government launched a new program in November, 2004 supporting 12 community settings that supported adults with intellectual disabilities

living in smaller facilities (six or fewer persons). Unlike in Western societies, the majority of users of the new scheme moved there from their own families, not from a large scale care unit. This paper aims to evaluate the relative outcomes of the new residential scheme as well as to compare the outcomes between those residents who did move from a large scale care unit and those who moved from their own families.

Methods One group repeated measures was used to measure the extent of changes in outcomes within the new scheme and between the two resident groups. This involved a follow-up study over two years after entering the new environment. Data were collected between January 2005 and April 2007. Forty nine adults were initially studied using a variety of measures including adaptive behaviour, maladaptive behaviour, quality of life, choice making, community inclusion and family contact. Repeated tests were conducted every half a year and 29 adults who remained in the homes until the end of the study completed interviews at all five points (T1 to T5). All interviews were carried out at the participants' residential settings.

Results We measured significant improvements between T1 to T5 in the residents' quality of life and community inclusion. However, these changes did not lead to a decrease in maladaptive behavior, or to any increase in the resident's adaptive behavior and choice making. Adaptive behaviour and choice making at T5, and

contact with families at T2 and T4 showed a significant differences between the residents moving from institution and from family. Except the frequency of family contact, the outcomes between the two resident groups did not show any significant differences after two years follow up (T5-T1).

Conclusion No matter whether the residents moved from a large scale care unit or from their own families, results revealed that living in the residences of this new scheme was associated with increased quality of life and community inclusion. In contrast, the new scheme did not lead to a positive impact on the residents' adaptive behavior and maladaptive behavior, and choice making. The study has implications both for current policy and the future development of the small home residential model for adults with ID in Taiwan.

二、子研究二

題目：不同居住模式智障者家庭生活品質與家庭參與

(一)中文摘要

關鍵詞：智障者、家庭生活品質、家庭參與、居住模式

背景：本研究目的評量家庭參與、家庭接觸、家庭對住宿單位的態度、住宿服務的影響、家庭主要照顧者生活品質及家人對智障者生活品質的「重視度」與「有用性」是否因為智障家人不同居住模式及戶外居住時間長短而有不同影響；並檢視前述依變項的顯著預測因子。

方法：受邀之研究參與者為有參與周月清、林麗嬋(2006) 研究住在社區小型居住(6人以下)、團體家庭(50人以下)及教養院(100人以上)有家人之成年

智障者的 216 位家庭主要照顧者，扣除拒絕受訪 74 位（佔樣本架構 216 位之 34.3%）、失聯及沒有接電話 36 位（16.7%），最後完成 106 份，佔 216 位之 49.1%。訪問時間為 2006 年 2 月到 2007 年 5 月，由 14 位訪員分別以六份標準化量表親自到受訪者家中（分佈在 19 個縣市）進行面對面訪問調查。

結果： 106 位受訪者以住在新竹市最多（10.4%），次為台北市、台北縣；住宿單位以位於桃園縣最多；智障者平均住 7.7 年；受訪家人有四成參與家長團體，九成為「一般戶」；有 74.5% 回應會繼續住在此住宿單位。三種服務模式顯著差異的比較發現，六人以下及團體家庭其家庭主要照顧者為「父母親」者，顯著高於教養院；而「一般戶」則六人以下者比例高於團體家庭及教養院。以非母群 Kruskal-Wallis Test 比較統計分析三種服務模式之智障者家庭主要照顧者顯著差異及事後以 Man-Whitney U test 比較分析發現，對智障者生活品質「有用性」團體家庭顯著高於六人以下 ($p < .05$) 及教養院 ($p < .01$)；對「未來智障者居住安排」、對智障者生活品質「重視度」，受訪之家庭主要照顧者本人生活品質、對住宿單位態度、家庭接觸、家庭參與、使用住宿服務的影響，皆未達顯著差異。前述之依變項與智障者使用住宿服務長短皆未達顯著相關。這些使用住宿服務之家庭主要照顧者的生活品質的四個面向（生理、心理、關係、環境）皆比過去研究(Chou et al., 2007a; 周月清等, 2007) 那些智障者與家人同住之家庭主要照顧者的生活品質高。以逐步回歸分析發現，有參加家長團體會正向顯著影響對智障者生活品質的「有用性」及家庭參與；照顧者性別及婚姻會影響其生活品質、家庭接觸及住宿服務的影響。最有顯著預測因子為家庭收入，即受訪者家庭收入會正面顯著影響照顧者的生活品質、家庭接觸、對住宿單位態度、住宿服務的影響及對智障者生活品質的重視度。

結論：三種服務模式只有在對智障者生活品質的「有用性」有顯著差異；智障者住在住宿單位時間的長短對七個依變項都沒有顯著影響；家庭主要照顧者的社會人口資料會顯著影響其對智障者生活品質的「重視度」與「有用性」、家庭參與、家庭接觸、住宿服務影響及其生活品質，尤其是其家庭收入。

（二）英文摘要

Quality of Life and Family involvement in Residential Settings of Adults with an Intellectual Disability

Abstract

Key words: intellectual disability, residential service, quality of life, family involvement

Background This study aims to assess the impact of out-of-home placement on residents' families across three residential settings (small residential home, group home and institution); in addition, the factors associated with family carers' quality of life (QOL), involvement, family contact, family attitudes, impact of using the residential service, and their concerns about family members' QOL (with ID) were explored.

Methods An interview survey was conducted from February 2006 to May 2007. Data were collected using the WHOQOL-BREF Taiwan version (Yao et al., 2004), Cross-Cultural QOL Indicators (CCQOLI; Verdugo & Schalock 2003; Chou et al., 2007b), and four scales (e. g., family involvement, family contact, family attitudes, impact of using the residential service) developed by the research team together with socio-demographic data. Out of the 264 residents who participated in Chou and Lin's study (2006), 216 still had a family and lived in the residential units (26 had moved, 17 had no family, 3 had their parents in residential care, 2 had their family members in jail). In the end, 106 (49.1% of 216) residents' primary family carers participated and completed the interview at their homes, 74 (34.3%) declined to take part in the study and 36 (16.7%) could not be contacted. Of the 106 primary family carers, 10.4% lived in Hsin-Chu City. The average length of the out-of-home placement for their family members with ID was 7.7 years. 40.6% of the participants were involved in parental organization and 89.6% of their families were not officially recognized by the government as poor or nearly poor. With regard to the question "Whether you will continue to use current residential service", 74.5% replied they would continue to use it. Based on a Cross Tab Analysis, those adults who lived in a small residential home or in a group home, had more often a parent as the primary family carer, compared to those adults who lived in an institution. The economic status of those family carers whose family member lived in a small residential home was stronger, family carers whose family member lived in a group home or an institution were more often poor or

nearly poor.

Results Using Kruskal-Wallis Test showed that there were significant differences between the groups in terms of the level of “use” of adult’s QOL, perceived by the family carer ($p < .05$). *Post hoc* tests (Man-Whitney U test) showed that the family carers whose adults with ID living in group homes had significantly higher level of “use” of adult’s QOL than the family carers whose adults living in small homes ($p < .05$) and institutions ($p < .01$). However, statistical comparison (Kruskal-Wallis Test) revealed no significant differences between the groups in terms of level of family carers’ QOL, family contact, family involvement, family attitudes, impact of using the residential service, and the level of “importance” of adult’s QOL, perceived by the family carer. Comparing with the findings conducted by Chou et al. (2007b) and Chou et al. (2007c), the family carers of current study whose adults with ID using residential services had higher level of quality of life than those family carers whose adults with ID living with families. To assess the predictors for the seven dependent variables, we conducted stepwise regressions using the following variables: (1) the family carers’ background data, namely gender, age, education level, marital status, kinship with adults with ID, and whether they have been involved in parental groups; (2) data about the adults with ID, namely how long the adult has used residential services; (3) data about the families, namely monthly family income; and (4) the residential model (small residential home, group home, institution) where the adult lived while the data of the current study collected. Three variables significantly predicted the degree of the family carer’s overall QOL and these were: family income ($p < .001$), the carer’s gender ($p < .05$), and marital status ($p < .05$). One variable predicted the degree of family involvement significantly: whether the carer has joined parental groups ($p < .05$). The most significant predictor was family income and it was significantly associated with the level of the carer’s QOL, family contact, family

attitude, impact of using the residential service, as well as with their concern about family members' QOL (with ID).

Conclusion To conclude, we did not find significantly different impact of using three different residential models on residents' families, such as the level of the carer's QOL, family involvement, family contact, family attitude, impact of using the residential service and the level of "importance" of adult's QOL. The results also indicated the carer's QOL, family contact, family attitude, impact of using the residential service, and their concern about family members' QOL (with ID) are not significantly related to the length of the adults with ID using the residential services; they are mostly associated with the carers' sociodemographic background, particularly level of carer's family income.

三、子研究三

題目：智障者不同居住模式工作者工作滿意度研究

(一)中文摘要

關鍵詞：智障者、工作者、工作滿意度、生活品質、憂鬱程度、社區居住與生活、團體家庭、教養院

背景：本研究目的在評估比較有參與周月清、林麗嬋(2006)研究住在社區小型居住(6人以下)、團體家庭(50人以下)及教養院(100人以上)成年智障者的三種服務模式之工作者的基本特質、工作滿意度、生活品質、憂鬱程度及其對智障者生活品質重視度與實際運作(稱「有用性」)是否有所差異;並檢視前述工作者工作滿意度、生活品質、心理健康及其對智障者生活品質「重視度」與「有用性」的顯著預測因子。

方法：研究對象為前述三種服務模式之工作者，包括行政人員、督導、社會工作人員、教保員、生活服務員、醫護人員、復健人員、職訓人員、(不含廚工及外籍看護工)等進行普查，以橫斷式研究到工作者職場發放問卷(含基本資料、四份標準化量表)方式收集 1,940 位工作者的資料，最後有效問卷(含當場收回及

以回郵信封寄回) 為 1,301 (67.1%)。

結果： 研究結果發現：(1) 女性工作者佔八成三，平均年齡 40 歲，六成已婚，高中教育程度居多，非專業及非人類服務相關背景者有四成二，來自私立機構佔六成，九成以上者表示「喜歡」及「非常喜歡」此工作，平均服務心智障礙工作年資近七年。(2) 服務於 a.6 人以下之工作者，相較於團體家庭及教養院—女性較多，OT/PT/ST、負責日間工作者、主修教育和人文社會者及「喜歡」此工作者比例較高。b.團體家庭工作者，相較於 6 人以下及教養院—男性、非已婚、基督信仰、平均教育程度、獨居者比較多，保育人員/輔導老師/教保員比例較高，私立單位者比例也較高。c.教養院工作者相較於 6 人以下及團體家庭者—女性、已婚、民間信仰、監護工或夜間支持性工作者、非專業相關者、家中子女數及年資比例較多；而「喜歡」此工作者比例較低。(3) 服務 6 人以下模式工作者在工作滿意度、生活品質「社會關係」及「環境」面向，及其對智障者生活品質「重視度」顯著高於任職團體家庭和教養院的工作者；而在生活品質總分及憂鬱程度三種模式的工作者沒有顯著差異。(4) 以逐步回歸分析發現，工作者任職單位的屬性（公立、私立、公設民營）、服務模式（6 人以下、團體家庭、教養院）對工作者的工作滿意度、生活品質、憂鬱程度及其對智障者生活品質「重視度」與「有用性」都有顯著預測力；另工作者個人在任職單位的職稱（第一線工作者、非第一線工作者、管理者）及家中子女數、對其工作滿意度有顯著預測力；另，工作者家中子女數、學歷對生活品質有顯著預測力；學歷、性別、子女數、服務心智障礙年資對智障者生活品質有顯著預測力；年齡、性別、服務心智障礙年資及學歷對憂鬱程度有顯著預測力；其中工作者對工作喜歡程度顯著影響前述五個依變項 ($p < 0.001$)。

結論： 服務 6 人以下模式工作者的工作滿意度、生活品質「社會關係」及「環境」面向，及其對智障者生活品質「重視度」顯著高於任職團體家庭和教養院的工作者；就工作者及服務使用者而言，相較於團體家庭和教養院，6 人以下服務模式是比較好的選擇；而工作者是否喜歡智障者住宿服務這項工作，是其工作滿意度、生活品質、憂鬱程度及其是否關心智障者生活品質之關鍵影響因素。

(二) 英文摘要

Job Satisfaction of Staff in Residential Settings for Persons with an Intellectual Disability

ABSTRACT

Key words: intellectual disability, staff, community living, small community home, group home, institution, quality of life, job satisfaction, mental health

Background This study aims to assess and compare the staff's job satisfaction, quality of life (QOL), mental health, and their concern about the users' quality of life. It is a cross-sectional study focusing on staff working in three residential models (small residential home, group home and institution) for adults with intellectual disabilities (ID). The study explores the variables (the residential model, work organization and personal characteristics of the staff) that are significantly associated with the staff's job satisfaction, QOL, mental health, and their perception about the "importance" and "use" of their residents' QOL.

Methods A survey with a standardized self-administered questionnaire that included four scales (Job Satisfaction Survey, Spector, 1985; WHOQOL-BREF Taiwan version, Yao et al., 2004; CES-D10, Andresen et al., 1994; Cross-Cultural QOL Indicators, Verdugo & Schalock, 2003; Chou et al., 2007a) and demographic questions was delivered to 1,940 staff members working in these residential settings. The survey was conducted between April 2007 and June 2007. Finally, 1,301 (67.1%) of these staff members completed the questionnaire: 214 (16.4% of the participants) working at the small residential homes, 110 (8.5%) from group homes, and 977 (75.1%) from the institutions. Most of the participants were female (82.5%). The average age of participants was 39.4 years (SD=9.8); their average length of education was 13.6 (SD=2.5) and the average length of their experience in working with people with ID was 6.6 years (SD=6.0). More than half of the participants (58.7%) were working in private units; and 92.7% of them responded that they "like" or "very much like" their current work.

Results Using one way Anova analysis showed that there were significant differences between the groups in terms of job satisfaction, "social relationships" and "environment" of WHOQOL, and the "importance" of residents' QOL perceived by the participants. *Post hoc* tests showed that the staff working at small homes had

significantly higher level of job satisfaction than the staff from the other two models ($p < .01$ and $p < .001$). As well, the staff working at small homes had significantly higher level of perception of the “importance” of resident’s QOL and higher level of “social relationships” than the staff from group homes ($p < .05$ & $p < .01$); and higher level of “environment” than the staff from institutions ($p < .05$). However there were no significant differences between the groups in the level of participants’ overall QOL, depression, and the “use” of residents’ QOL.

To assess the predictors for staff’s job satisfaction, overall QOL, level of depression, their concern about the users’ QOL, stepwise regressions were conducted and the following variables were used: residential model (small home, group home, institution), organization management (public, private, commission), age, year of education, marital status, length of experience in working with people with ID, working duty (manager, frontline care worker, not frontline care worker), number of children, and the degree they like their current work. Five variables significantly predicted the degree of the staff’s job satisfaction and these were: the degree of liking current work ($p < .001$), organization management ($p < .001$), residential model ($p < .01$), number of children ($p < .01$) and working duty ($p < .01$). The staff’s level of liking current work ($p < .001$), number of children ($p < .001$), year of education ($p < .01$), and residential model ($p < .05$) were significant predictors for the staff’s overall QOL. Six variables significantly predicted the degree of the staff’s depression and these were: level of liking current work ($p < .001$), age ($p < .001$), length of work experience with people with ID ($p < .001$), year of education ($p < .01$), gender ($p < .01$) and residential model ($p < .01$). Organization management ($p < .001$), level of liking current work ($p < .001$), and year of education ($p < .001$) were significant predictors for the “importance” of residents’ QOL that the staff perceived. Finally, the level of liking current work ($p < .001$), length of working with people with ID ($p < .01$), organization

management ($p<.05$), and gender ($p<.05$) were significant predictors for the “use” of residents’ QOL that the staff perceived.

Conclusion In conclusion, the results of this study highlight that the residential model as well as both the organization and the staff’s characteristics, particularly the degree they like their current work, are important predictors of the staff’s job satisfaction, quality of life, mental health and whether they are concerned about the residents’ quality of life.

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肆、計畫成果自評

原計畫申請三年，但僅通過一年；本研究符合第一年的預期目標。目前有關智障者追蹤的研究報告（子研究一）撰寫完成，預期十一月投稿，另至少會寫兩篇英文文章（子研究二、子研究三），共計至少可以完成三篇文章投西文期刊。本研究為國內首次針對智障者住到社區生活以兩年期追蹤研究、首次針對這些住民家庭參與及生活品質、提供服務之工作者的工作滿意度與生活品質，予以探討，不僅與國外時正研究可以對話，累積國內相關學術資料，同時可以提供相關政策及實務工作之參考；另也延續及拓展研究主持人在智障者、家庭、與社區生活的研究領域。