

FACTORS ASSOCIATED WITH NURSING HOME PLACEMENT FOR OLDER PERSONS WITH DEMENTIA IN HONG KONG: DOES USE OF COMMUNITY SERVICES MAKE A DIFFERENCE?

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BACKGROUND: “Aging in place” refers to “the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level.” (CDC, 2013). For older persons with dementia, the concept of “home” is particularly important as it provides them with a source of familiarity and autonomy (Aminzadeh, Dalziel, Molnar & Garcia, 2010). Research indicates that the idea of home remains salient even in patients at advanced stage of dementia (Frank, 2005). To facilitate aging in place for older adults with dementia, a large variety of services are provided to support them and their caregivers. Whether these services actually delay nursing home placement, however, is unknown. The goal of this study is to answer this question through examining the associations between caregiver and care-recipient characteristics, service use, and nursing home placement in community dwelling older Chinese with dementia in Hong Kong.

METHOD: This is a 24-month prospective study. One hundred and twenty two caregivers provided information on: 1) demographic characteristics including caregiver age, gender, and relationship with the care recipient; care recipient's age, gender, instrumental activities of daily living; 2) use of services including home help, day care, respites services, and assistance from domestic helpers; 3) caregiver's intention to continual community care at baseline. 108, 101, and 82 caregivers were successfully re-interviewed at 6, 12, and 24 months after initial contact and provided information on: 1) any major change in the caregiving situation such as caregiver chronic illness or care recipient hospitalization; 2) actual nursing home placement.

RESULTS: Attrition analysis revealed no major difference between participants who participated at the follow up and those dropped out. 24, 27 and 37 older adults were admitted to nursing homes at the three time points respectively. Results of Chi-square test indicate that intention to continual care at baseline and use of community services was not associated with actual nursing home placement ($p > .05$). Stepwise Logistic Regression analysis was conducted to identify factors associated with actual nursing home placement. Variables entered into the model included care recipient age, gender, IADL, number of hospitalizations over the follow up period, caregiver chronic illness, and assistance from a domestic helper. Results indicate that assistance from a domestic helper consistently lowers the risk of an older care recipient being admitted to a nursing home at both 6, 12 and 24 months follow up (ORs=.028, .085 .333 respectively; $p < .05$). Caregiver's chronic illness was associated with an elevated risk of the care recipient being admitted to a nursing home (ORs=2.960, $p < .05$) at 12 month follow up but not at the two other time points.

CONCLUSION: Our results indicate that existing services may not be effective in promoting aging in place for older persons with dementia in Hong Kong. Efforts to encourage continual care of older persons with dementia should be better tailored to suit individual needs and should preferably be delivered at the care recipient's own homes. Services should also address caregiver's own health and medical needs so as to improve their health conditions.