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Does the planned long-term care policy in Taiwan meet the needs of people with disabilities?



Chia-Feng Yen^{a,*}, Tzu-Ying Chiu^b, Tsan-Hon Liou^{c,d}, Hua-Fang Liao^e,
Yi-Shing Li^f, Chung-Chao Liang^{g,h}, Sue-Wen Tengⁱ

^a Department of Public Health, Tzu Chi University, Hualien, Taiwan

^b Institute of Medical Sciences, Tzu Chi University, Hualien, Taiwan

^c Department of Physical Medicine and Rehabilitation, Shuang Ho Hospital, Taipei Medical University, Taipei, Taiwan

^d Graduate Institute of Injury Prevention, Taipei Medical University, Taipei, Taiwan

^e Chinese Association of Early Intervention Profession for Children with Developmental Delays, Hualien, Taiwan

^f Department of Social Work, Tzu Chi University, Hualien, Taiwan

^g Department of Medicine, Tzu Chi University, Hualien, Taiwan

^h Department of Physical Medicine and Rehabilitation, Buddhist Tzu Chi General Hospital, Hualien, Taiwan

ⁱ Department of Nursing and Health Care, Ministry of Health and Welfare, Taipei, Taiwan

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ABSTRACT

The long-term care (LTC) insurance policy will be enacted in Taiwan. Under the proposed policy, people with disabilities will have priority in receiving insurance. The aim of this study was to compare the functional statuses of 3 disability groups and to investigate the coverage provided by the planned LTC insurance in Taiwan.

A cross-sectional study was conducted in this study to fulfill this research goal. There were 3239 subjects with physical, sensory, or intellectual disabilities from the Disability Eligibility System during September 2011 and July 2012. The World Health Organization Disability Assessment Schedule 2.0 – 36-item version (WHODAS 2.0) – traditional Chinese version was used to assess their functional statuses.

Significant differences in all of the domain scores and summary scores of the WHODAS 2.0 were determined after adjusting for age among the 3 groups. People with physical or sensory disabilities exhibited the most drastic differences in the domain of daily living, and people with intellectual disabilities exhibited major differences in the cognition domain. After matching the planned coverage services, we determined that the planned LTC insurance does not meet the diverse needs of people with disabilities. In particular, social participation and a sense of security and satisfaction regarding the psychological aspects of having a disability must be considered in LTC insurance policies.

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1. Introduction

As the global population ages, problems related to long-term care (LTC) present a formidable challenge to public

health and social welfare policy, and global aging substantially influences disability rates and trends. According to the most recent World Health Survey and Global Burden of Disease reports, approximately 15.6% to 19.4% of people aged 15 years or older live with a disability, and 15.3% of them have moderate or severe disabilities [1]. According to the Census and Statistics Department of the Ministry of the Interior in Taiwan, by the end of March 2012, the disabled population was approximately 1.10 million, which

* Corresponding author at: Department of Public Health, Tzu-Chi University, Taiwan. Tel.: +886 3 856 5301x2300; fax: +886 3 856 4041.

E-mail address: mapleyeng@gmail.com (C.-F. Yen).

accounted for 4.74% of the total population. Among people with disabilities, 39% were over 65 years old. Since 2002, the disabled population in Taiwan has increased by a rate of 23.25 per thousand, while the total population has grown by only 3.17 per thousand [2]. Because people with disabilities exhibit high comorbidity with other disorders or diseases, require frequent medication, and incur high costs of receiving social care, they require LTC more than other groups do [3–7]. In Taiwan, people under the age of 50 with disabilities who need LTC services are mostly with the qualifications of low-income households and receive limited health care services mainly through the National Health Insurance. Therefore, their needs for LTC services are usually not satisfied. So the caring responsibilities of the above population are borne by their family members. The disabled population in Taiwan is substantially increasing as aging and reduced morbidity increases because of the advances in medical science and public health. Therefore, the goal of Ten Year Long-Term Care Program covering the years 2007 through 2016 is to offer services to people over the age of 65 with limitations on daily living, people over the age of 50 who possess disability identification, or aboriginal people over the age of 55 [8]. In the future, LTC in Taiwan will be conducted by a social insurance program that was planned in 2005 and discussed in the “Laws of Long-term Care Insurance” and “Long-term Care Services” by the Taiwanese government. According to the Taiwan Long-Term Care Services Draft Law implemented in 2011, LTC provides physically and mentally disabled people who require LTC with community-based, home, and institutional care services, regardless of age, identity, or type of disability. This policy states that the recipients of LTC services will be selected based on LTC needs rather than on the preconditions of being elderly or from a low-income household. Currently, proposed needs assessment tools that can be used in the LTC insurance are scales related to the activities of daily living (ADL) and the instrumental activities of daily living (IADL). Although both scales are the most common measures used for evaluating disabilities worldwide, numerous studies have noted that disorder and disability measurement tools are unable to provide comprehensive assessment [9–21]. Consequently, using case-by-case evaluations of characteristics and other cognitive or dementia assessment scales is required. Therefore, the assessment tool used by the statutory LTC system in Taiwan does not yield conclusive results. Under the LTC policy, in addition to the elderly, the most important group is people with disabilities.

The “Ten Year Long-Term Care Program” is a government-funded initiative that implements LTC policy and provides coverage for the aforementioned groups. “LTC Insurance” is a type of social insurance that is funded by policyholders who would represent all citizens or people aged over 40 years.

According to the People with Disabilities Rights Protection Act, prior to July 11, 2012,¹ the categories

of disabilities were visual impairment, hearing impairment, speech dysfunction, balance dysfunction, motor dysfunction, intellectual impairment, autism, vital organ impairment, facial damage, dementia, autism, chronic mental disease, refractory epilepsy, multiple disabilities, rare diseases, vegetative status, chromosomal abnormalities, and congenital metabolic disorders. People were evaluated by physicians for the Taiwan Disability Eligibility System. People with disabilities can receive a pension or social welfare services if they are qualified. After July 11, 2012, the tools assessment of new Disability Eligibility System has increased functioning evaluation [22]. If they require LTC services, people with disabilities over 50 years old must be assessed by applying other evaluation tools used in the Ten Year Long-Term Care Program.

Based on the spirit and conception of the LTC services law draft, future LTC service users will be representative of the vast majority of disabilities. In 2011, among all people with disabilities in Taiwan, the highest proportion of them was people with physical disability (35.1% of all them). Furthermore, auditory and visual impairments belong to the category of sensory function based on the International Classification of Functioning, Disability, and Health (ICF) established by the World Health Organization (WHO), which also states that the elderly population is the most susceptible to the degradation of sensory functions. The aging population and low birth rates in Taiwan will cause people with disabilities to influence the entire LTC system drastically. Therefore, the efficient use of LTC service resources will be a major focus of future policy evaluation, and whether the proposed service provisions are able to meet the needs of the service recipients is one of the indicators used to assess the efficiency of these services. The objectives of this study were to compare the functional statuses among groups of people with physical disabilities, sensory (visual and hearing) disabilities, and intellectual disabilities by using the 36-item version of the World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0), and to estimate the service needs of these people based on specific domain scores established by the WHODAS 2.0 to provide valuable information that serves as an LTC service design reference. We also investigated the effectiveness of the planned LTC insurance services and it could be able to respond the functional statuses of the three disability groups.

2. Materials and methods

The current study used a cross-sectional survey to examine the daily life of people with physical, sensory, or intellectual disabilities. We used documentary analysis to describe the services of the planned LTC insurance and then discussed whether the planned services will be able to respond to the functional properties of the three categories of disability.

2.1. Subjects and data collection

Because the WHODAS 2.0 must be applied to adults only [9–21], we excluded 636 children and adolescents between 0 and 17.9 years old from this study. The Disability

¹ After July 11, 2012, the classification of disabilities was based on Body Function and Structure from the International Classification of Functioning, Disability, and Health (ICF) [22].

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