

109 年度失智友善資源整合計畫 5 月份文獻摘譯

文章	Dementia Friendly Communities in England: A scoping study 英國失智友善社區：範圍研究
目標	描述整體英國地區失智友善社區 (DFCs) 的特徵，以進行全國性評估失智友善社區對失智者生活的影響。
前言	近年來，人們越來越認識到失智症是一個急迫的全球健康問題，這促成了失智友善社區(DFCs)的增加。在英國，2012 年的首相挑戰將失智友善社區提上了國會的議程使英國成為為數不多的幾個將失智友善社區納入政策的國家之一，制定了失智友善社區的目標，並建立與標準相聯繫的認可體系。由於失智友善社區現在得到國家政策的支持，因此有必要瞭解失智友善社區的配置和特點，以及如何確定活動的優先次序。
方法	透過關鍵字搜尋和英國阿茲海默症學會的紀錄中找出英國的失智友善社區。根據線上搜尋以及必要時的追蹤電話，有目的地選擇子樣本 (n=100) 進行深入研究。數據收集和分析是參考試點評估工具，以評估失智友善社區如何組織和提供資源，以及評估其影響。除了一些描述性的量化分析外，證據主要是質性的訊息。
結果	<p>經過收集和分析，284 個失智友善社區中，有 251 個是基於地理位置的失智友善社區，而 33 個是共同利益的組織，像是教會、連鎖超市和學校等等。其中在 100 個採樣的失智友善社區中，在 2012 年友善社區的政策認可之後，有 89 個失智友善社區已經建立或開始了相關的活動，在失智友善社區活動中，最常被提及的是提高意識，像是舉辦「失智者友善好友」(Dementia Friends)，讓社區民眾對失智者的生活有更多的理解。</p> <p>在失智友善社區的資源配置中，法定機構和慈善機構發揮了重要作用，不管是對工作人員的薪水或是設施的補貼都有些幫助。有證據表明失智者不斷參與失智友善社區服務組織中的諮詢及執行業務，然而民眾的參與在文獻中就沒有很清楚。失智友善社區對失智者生活影響的證據由於評估方法不同，仍未發現有效的改變。</p>
討論	<p>本報告對失智友善社區的範圍進行了第一次全國性的概述，介紹了失智友善社區的主要特點，包括它們的組織方式、如何讓失智者參與其中、工作重點是什麼以及如何衡量影響。</p> <p>此報告的調查結果與日本的經驗類相似，有日本政府的認可加上通過運動和政策支持，使失智友善社區擴散。法定機構，特別是理事會/地方政府，與不同機構合作，並通過地方協作，如失智症行動聯盟，在建立、管理和提供資源方面發揮了核心作用。</p>
結論	失智友善社區的特徵在於類型、資源和活動的變化。英國擁有失智友善社區認可的制度。這些可以是失智友善社區萌芽和成長的重要催化劑。系統性的評估方法是目前所缺乏的。此方法可使失智友善社區呈現如何保持進步以及如何使失智者的生活變得更好。

Study	Dementia Friendly Communities in England: A scoping study
Author	Buckner, S., Darlington, N., Woodward, M., Buswell, M., Mathie, E., Arthur, A., ... & Goodman, C. (2019). Dementia friendly communities in England: A scoping study. <i>International journal of geriatric psychiatry</i> , 34(8), 1235-1243.
Objectives	To describe the characteristics of Dementia Friendly Communities (DFCs) across England in order to inform a national evaluation of their impact on the lives of those affected by dementia.
Introduction	Growing recognition in recent years of dementia as an urgent global health issue has led to an increase in Dementia Friendly Communities (DFCs). In the United Kingdom, it was the Prime Minister's Challenge in 2012 that put DFCs on the agenda. England is one of the few countries that has incorporated the creation of DFCs into policy, with targets for the creation of DFCs and a system of recognition linked to standards. With DFCs now supported by national policy, there is a need to know how they are configured and characterised and how they prioritise activities.
Methods	DFCs in England were identified through online searches and Alzheimer's Society records. A subsample (n = 100) were purposively selected for in-depth study based on online searches and, where necessary, follow-up telephone calls. Data collection and analysis were guided by a pilot evaluation tool for DFCs that addressed how DFCs are organised and resourced and how their impact is assessed. The evidence was predominantly qualitative, in addition to some descriptive quantitative information.
Results	Of 284 DFCs identified, 251 were defined by geographical location, while 33 were communities of interest. Among 100 sampled DFCs, 89 had been set up or started activities following policy endorsement of DFCs in 2012. In the resourcing of DFCs, statutory agencies and charities played an important role. Among DFC activities, awareness raising was cited most commonly. There was some evidence of involvement of people living with dementia in organisational and operational aspects of DFCs. Approaches to evaluation varied, with little evidence of findings having effected change.
Discussion	This scoping of DFCs has provided the first national overview of DFCs in terms of their key characteristics—how they are organised, how they involve people affected by dementia, what the focus of their work is, and how they measure impact. The findings reported here are similar to those presenting the experience of Japan, where government endorsement coupled with support for implementation through campaigns and policies resulted in a proliferation of DFCs. Statutory agencies, and especially councils/local government, working in partnership with different bodies and through local collaborations such as Dementia Action Alliances have played a central role in the setting up, managing, and resourcing of the DFCs reviewed.

<p>Conclusions</p>	<p>DFCs are characterised by variation in type, resourcing, and activities. England has policy endorsement and a recognition system for DFCs. These can be important catalysts for initiation and growth. A systematic approach to evaluation is lacking. This would enable DFCs to be consistent in how they demonstrate progress and how they enable people living with dementia to live well.</p>
---------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

附件

圖 1

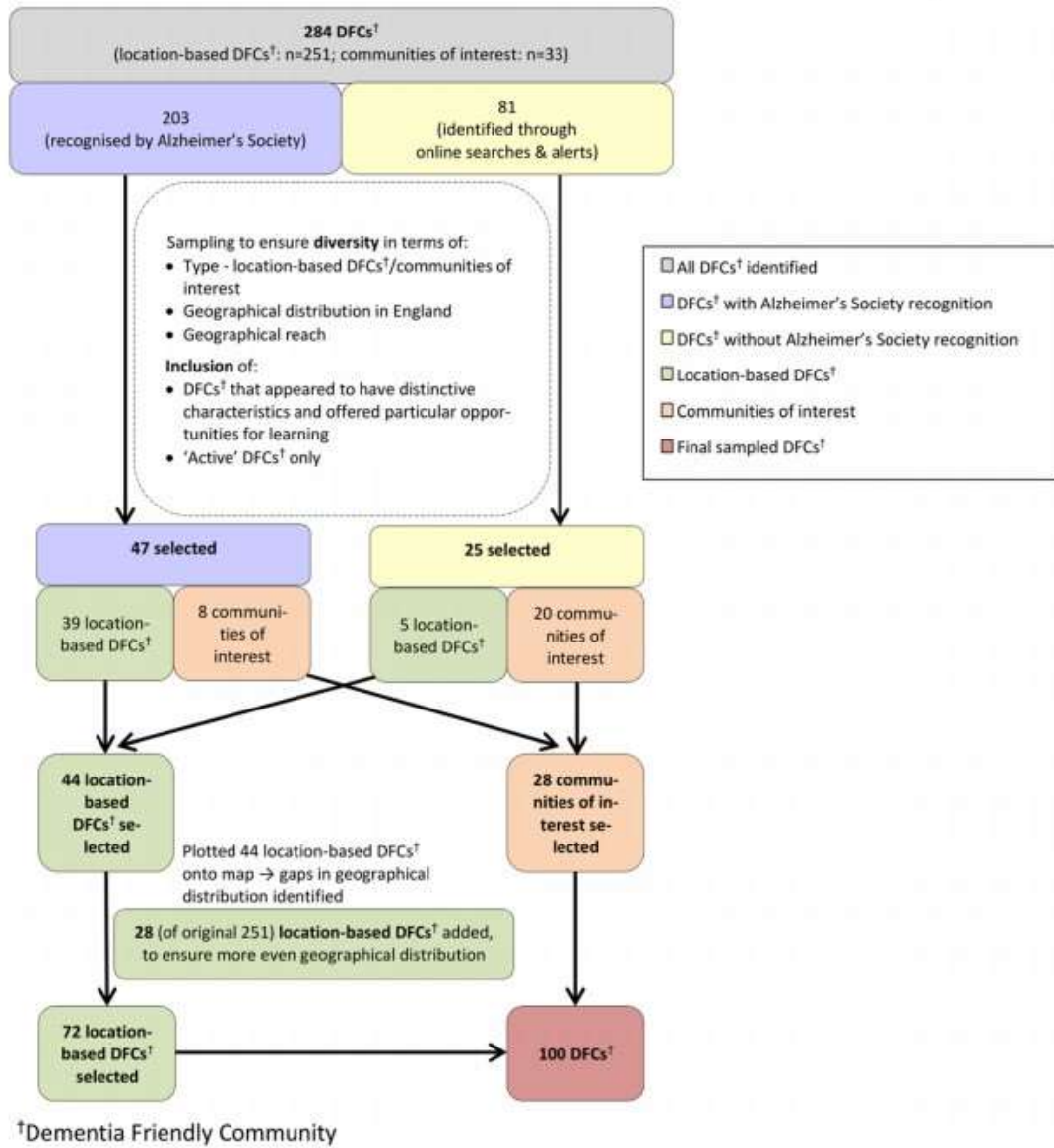


FIGURE 1 Selection process for 100 sampled Dementia Friendly Communities (DFCs) in England [Colour figure can be viewed at wileyonlinelibrary.com]

圖 2

FIGURE 2 Data extraction form for sampled Dementia Friendly Communities (DFCs)

表 1

TABLE 1 Overview of number of DFCs in England (n = 284) and sampled DFCs (n = 100) according to sampling criteria

Sampling Criteria			n out of 284 DFCs in England	n out of 100 Sampled DFCs
Type of DFC	Location-based		251	72
	Communities of interest		33	28
Location in England	South West		49	14
	South East		47	11
	London		14	7
	East of England		40	13
	West Midlands		22	10
	East Midlands		14	4
	Yorkshire & Humber		28	10
	North West		34	15
	North East		25	7
	National or N/A		11	9
Geographical reach	DFCs that clearly define their geographical reach	County	15	8
		City	30	18
		Town	123	27
		Village	14	3
	DFCs that have less clear boundaries/ align with local administration areas	Unitary Authority	5	5
		Borough	19	4
		District	24	3
		Parish	12	1
	Other (including communities of interest)	42	31	
Additional features	Data indicate concern with human rights of people living with dementia	8	8	
	Data indicate attention to particular groups (Black and Minority Ethnic; Lesbian Gay Bisexual Transgender)	7	7	
	No additional features	269	85	
Active status	Yes	204	100	
	No	26	0	
	Missing data	54	0	

Abbreviation: DFC, Dementia Friendly Community.