



Title	Introduction: Long-term care needs in Hong Kong
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Editorial

Special Issue on long term care needs in Hong Kong

Guest editor: Angela Yee Man Leung, Ph.D.

Hong Kong, one of the Special Administrative Regions of China, has its unique features in health care. For instance, Hong Kong spends small percentage of gross domestic product (GDP) on health care expenditure but achieves second highest life expectancy in the world. In 2010, Hong Kong spent 5.2% of GDP on health care which is only half of the OECD average (Goodman, 2011). The life expectancy at birth of male was 79.8 years while that of female was 86.1 years in 2009 (Census and Statistics Department of the Government of Hong Kong Special Administrative Region (HKSAR), 2010a) and the life expectancy at birth has been steadily increasing over the last 40 years (Centre for Health Promotion, 2009).

Like many other developed countries, Hong Kong is facing challenges posed by aging population and the challenges will continue to increase in the next decades. The proportion of aging population (those aged 65 or above) was 13% in 2009 and it is projected to be 25% in 2029 (Census and Statistic Department of the Government of HKSAR, 2010b). As the population is graying, the challenges instilling on long-term care services increase tremendously. The government has been financially supporting the long-term care services for many years. However, it placed lots of attention to residential care home service and heavily subsidizing this service. Home

and community care services has yet been well developed and its trial run, named as Enhanced Home and Community Care Service, was not started till 2001. In the last 10 years, the demand of long-term care services has ever been changing: more and more people are advocating for home and community care service. Unfortunately the supply of home care service is much lower than the demand, and the governmental subsidy to home and community care service is much lower than that of the residential care home service. Currently financial model and service model of long-term care services in Hong Kong is being actively debated. Hong Kong, with its unique features and massive demand on long-term care services due to rapid aging population, can provide some insights for our analysis of the role to play by home care service in the long-term care service sector.

This special issue aims to provide a platform for understanding and discussing the issues related to aged care in Hong Kong. Three papers successfully completed the review process and are contained in this special issue. These papers addressed issues in different perspectives, ranging from policy to practices, then from practice to research.

In the paper entitled “Long-term Care Policy in Hong Kong: Challenges and Future Directions”, Chiu critically evaluated the existing long-term care policy in Hong Kong and identified problems such as 1) high institutionalization rate (about 7%

of the aging population live in residential care homes), 2) over-reliance on subsidized institutional care services and under-development of home and community care services, 3) imbalance of public and private long-term care services provision due to over-reliance on public funding resources, and 4) unsatisfactory service quality in private residential care services. Home and community care services were not well funded by the government because of the assumption of filial piety in Chinese society and family members should not be paid for providing care to frail parents. However, we gradually note that many families are not able to support frail elders at home. Such phenomena can partially be explained by the change of family structures and living patterns in Hong Kong. On the other hand, the current funding model also affects the provision of different types of long-term care services and the quality of care in private residential care services. With the understanding of the current long-term care policy in Hong Kong, the author postulates some strategies for the future development of a sustainable long-term care policy, and these include the development of home- or community-based care service, alternative ways (including means testing, voucher system and long-term care insurance) to finance long-term care services, and establishing quality assurance mechanism in private residential care sector. This paper provides a comprehensive analysis of long-term care policy in Hong Kong and demonstrates how long-term care policy guides service provision and

hinders the development of home and community care service. The experience gained in Hong Kong may act as an example for other regions or countries which are encountering similar challenges in long-term care services.

The paper entitled “Psychological Distress among Chinese Adult-child Caregivers: The Effects of Behavioural and Cognitive Components of Care” addresses one of the key practical issues in aged care – distress among caregivers. The authors investigate the correlations between caregivers’ behaviors and psychological distress and the correlations between their cognitive appraisals of caregiving conditions and psychological distress. Tripartite model of attitude was used to guide the analyses and the known factors (demographical characteristics and health needs of frail older adults) were considered as covariates and were controlled in the regression analyses. The results of the study suggest that behavioral (such as providing IADL care, living with care recipient, providing greater intensity of care and providing emotional support) and cognitive components (not able to continue the provision of care and not satisfying the support received from relatives and friends) of the care arrangement have significant effects on caregivers’ psychological distress and these components contribute an additional 10% of the variance in the explanation of distress in care-giving. Filial piety which is deeply embedded in Chinese culture instills pressure on adult-children to care for frail parents at homes. With the change

of economy and social structure, Chinese adult-children are struggling with the demand of care, social expectation in caring and limited home and community care resources. This aspect of psychology has seldom been reported, but this paper highlights the significance of this cognitive thinking and behavior in aged care. This paper provides a good groundwork for future research toward caregivers' distress based on caregivers' behaviors and cognitive thinking.

The last paper of this special issue discusses the psychometric properties of a commonly used measure in aged care research, the Instrumental Activities of Daily Living (IADL) scales of the Minimum Data Set for Home Care (MDS-HC). The paper entitled "An Evaluation of Factor Structure of the Involvement and Capacity Scales of the Minimum Data Set for Home Care (MDS-HC) for Elderly Chinese Community Dwellers in Hong Kong" assesses the factor structure of the two scales, the IADL Involvement Scale and the IADL Capacity Scale. The two scales measures individuals' actual involvement in IADL activities and individuals' capacity to perform specific tasks in daily living respectively. This study uses confirmatory factor analyses to show one-factor model in each scale. It also concludes that both scales have good internal consistency and reliability in the sample of the Hong Kong community-dwelling older adults. At the moment, home and community care service is lagging behind, however it will soon be rapidly developed in Hong Kong

and possibly in other Chinese societies. Thus the urgency of adopting a valid assessment of IADL in home settings becomes obvious.

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