



Taiwan Dementia Policy

A Framework for Prevention and Care

Ministry of Health and Welfare
Taiwan

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Taiwan Dementia Policy: A Framework for Prevention and Care

The speed of population aging is accelerated in Taiwan. The proportion of aged people reached 11.08% in 2012. It is estimated that in 2018, Taiwan will enter the Era of “aged Society”, and become a “Super-aged Society” defined by the WHO when aged people reaches 20% of total population in 2025.

With population aging, the number of people with dementia will increase prominently. According to the report of Alzheimer's Disease International (ADI) In 2005, the population of people with dementia is 13,700,000 in Asia-Pacific Region and will increase to 64,600,000 in 2050. Based on the data revealed from Ministry of Interior and the latest epidemiological study of dementia published in 2014, the estimated population of dementia in people aged 65 and more in Taiwan is around 130,000 people suffering from mild to severe dementia with CDR¹ scored 1 or more, and 90,000 people with CDR scored 0.5. The rapid increase of dementia population is due to the effect of population aging, but other factors such as urbanization, change of family structure, and increased in number of elders living alone, etc. will cost social and economic impact. The influence of dementia is not only due to the effects of aging, but also being one of the most serious chronic disease that will lead to the loss of function.

There are several types of dementia, the characteristics are loss of short-term memory , cognitive function and ability of daily living. “Burden of disease” is measured by the lost of years of healthy life due to diseases, and the sum of “burden of mortality” (lost of life years due to premature death) and “burden of disability” (lost of years of healthy life due to disability). (Dementia in Asia-Pacific Region: The Epidemic is here, 2006)

According to WHO, neuropsychological disease is only behind infectious disease and parasite disease as a major burden of disability. For burden of disease, dementia exceeds malaria, tetanus, breast cancer, drug addictor and war. Predicting the future 25 years, disease burden of dementia will increase more than 76%.

Researches in our country also point out that the total medical expense of people with dementia should surpass the expense of those without dementia. Some researches estimated that the expense of dementia reached 8.9% of the total

¹ CDR : Clinical Dementia Rating

expense. Obviously the yearly escalation of expense of medical treatment and care of dementia is a serious impact on social economics of our country, and a major issue to face without delay.

The medical and social care services of dementia in Taiwan are mainly regulated under health and social welfare legislations : including: Physically and Mentally Disabled Citizens Protection Act, Mental Health Act, Nursing Personnel Act, Senior Citizens Welfare Act, etc.

Since 2007, Taiwan government has adapted many policies and projects, including cooperated with non-government organizations (NGO) to establish national dementia social supporting centers, dementia helpline service, dementia information websites and on-line counseling, and community early intervention services for people with dementia. Another goal is to support the non-government sectors to set up day care center in each county or city.

Starting in 2008, the care of people with dementia has included in the “10-year Long-term Care Plan ”. Through needs assessment, people with dementia can be categorized into different level of disability and severity, and access to home care, respite care services, daycare or home nursing care.

Other strategies included the production of education videos and Q&A manuals, documentary films, and production and broadcast of dementia screening films to the public to raise awareness of dementia.

A project of “Study of Dementia Epidemiology and Care” was started in 2011, and will be finished in the end of 2013.

Furthermore, in 2013, the “Long-term Care Service Network” has planned to develop a dementia multi-care service network and to establish dementia care resources including “School of Wisdom” 、 dementia daycare services and family carers support service network, dementia special care units.

In addition, government will support the set up of daycare centers and home-base care units in order to overcome the difficulties of their establishment.

Responding to the increase in aged and dementia population, to lessen and reduce the impact of dementia on society and families, and to provide medical management

and care to people of dementia and their families, a “ Taiwan Dementia Policy: A Framework for Prevention and Care” was developed. It will become a guideline on integrative planning and policy implementation for the Ministry of Health and Welfare.

The composition of the National policy strategy has referred to many other sources including the “Dementia: a public health priority” by WHO in 2012, the “Kyoto Declaration” by the Alzheimer Disease International (ADI) in 2004, dementia policies and plannings developed in other countries, and considered the development and present practice of the Taiwan healthcare system. The policy strategy also comply with the notion of prevention better than treatment, community and home care as main service supported by institutional care, and further extension with the total population protection as the center.

This national policy strategy of dementia outlines key purposes and contents which covers the promotion of public cognition of dementia prevention and care, complete community care networks, the enhancement of prevention, treatment and care services in primary care, developing human resources for better care competence, strengthening cross-department co-operation and integration of resources, encouraging dementia related researches and international cooperation, and protecting human rights.

Main Objectives

1. Timely diagnosis and early intervention to reduce the impact of dementia.
2. Good quality services to meet the need, maintain the dignity and improve the quality of life of people with dementia and their family.

Purposes and Scope of the Taiwan Strategies for Dementia Care

- I. To improve public awareness and understanding of dementia.
 1. Enhancing people’s knowledge and awareness about dementia, to facilitate timely referral and assessment of those at early stage of cognitive impairment or suspected of having dementia.
 2. Advocating educational activities related to dementia, to increase public understanding and to reduce the stigma of dementia, in order to develop a community friendly to people with dementia.

3. Implementing multi-dimensional educational programs through school and community activities, to promote public awareness, understanding, and care about dementia.
4. Integrating the public health and social services delivering systems to assist the public in understanding and coping effectively with dementia.
5. Promoting evidence-based healthy life styles and social participation to lower the risk of dementia.

II. To establish a comprehensive community care network.

1. Identifying early dementia symptoms for timely diagnosis and comprehensive medical care.
2. Integrating community organizations such as health care services, social welfare organizations, local activity centers, local government offices, etc., to provide information about service resources and appropriate referral.
3. Developing a multi-dimensional, accessible community network for prevention and care while encouraging non-government organizations to join and provide services.
4. Providing multi-dimensional care to people with dementia according to their needs in different disease stages.
5. Establishing a community network to provide counseling and support for caregivers to reduce their burden. Providing caregivers with education and skill training to care for individuals with dementia.
6. Encouraging collaboration between local authorities and non-government organizations to facilitate early intervention programs and to provide social interaction for people with early dementia, therefore delay their functional deterioration.

III. To strengthen primary prevention and healthcare services.

1. Raising the awareness of dementia as an important part of primary healthcare; increasing primary healthcare worker's competence in evaluating dementia.
2. Enhancing primary healthcare workers' understanding of the need of dementia care and to provide appropriate referral.
3. Integrating services within the healthcare system to implement accessible network for evaluation and treatment of dementia in rural and urban areas.
4. Assisting individuals with dementia to receive early intervention and appropriate treatment based on their stage of dementia.

IV. To expand human resources and enhance professional competence.

1. Providing education and training for personnel and volunteers at government departments, community organizations, schools, and job settings, etc., to promote their understanding and involvement of dementia.
2. Connecting local government and non-government organizations to educate the seed trainers and to provide community education about dementia to enhance people's understanding and involvement.
3. Incorporating knowledge and skill of prevention, treatment and care of dementia into the professional training of medical staff, social workers, and nursing aides.

V. To strengthen inter-departmental cooperation and resource integration.

1. Promoting cooperation between departments to advocate prevention, treatment, and early diagnosis of dementia.
2. Integrating dementia related agenda across departments to develop effective strategies.
3. Establishing mechanisms to integrate resources across departments to develop multi-dimensional services for individuals with dementia and their family.
4. Enhancing cooperation between the government and NGOs to provide services for individuals with dementia and advocate relevant policies.
5. Establishing unified service window for integrated evaluation, care plan and referral for individuals with dementia.

VI. To encourage dementia research and international cooperation

1. Encouraging cross-disciplinary and cross-institutional integrated researches and evidence-based researches in dementia prevention and management, and to develop appropriate policy according to the evidence obtained in the researches.
2. Regular survey of dementia prevalence at national and community level, as well as long term follow-up, for policy making and advocacy.
3. Encouraging researches on medical care and human rights protection for individuals with dementia, including prevention, screening instrument, etiology, clinical course, prognosis, medical and non-medical interventions, etc.
4. Encouraging people in related disciplines to conduct or participate in international researches or conferences about prevention and medical care of dementia.

VII. To protect human rights of individuals with dementia and their family

1. Providing services for dementia prevention and care to all individuals, regardless of age, gender, and race, with equal opportunity to access related information, support and adequate care.
2. Reviewing current law to ensure rights of individuals with dementia and their caregivers.
3. Developing quality indices of dementia care and building a supervision/ appraisal system for services.
4. Engaging non-government organizations in discussions on dementia related issues, such as ethics, law, human rights protection and promotion.
5. Consulting individuals with dementia and their family while making related policy.