Dementia care in Hong Kong
by Professor Timothy Kwok

Hong Kong has an ageing population who enjoys one of the longest average life expectancies in the world. It is therefore not surprising that the prevalence of dementia has been rising and will continue to rise in the foreseeable future. With the advancement in scientific knowledge in dementia and the development of drugs for Alzheimer disease (a major cause of dementia) in recent years, the common phenomenon of cognitive impairment in old age has become a medical issue. While this has been a major step forward for dementia sufferers and the would-be sufferers worldwide, one must not lose sight of the major implications of dementia on their families and friends, and how the cognitively impaired older people are engaged in our society influences their cognitive decline and behavior. Dementia is therefore not just a medical condition but a major social issue in Hong Kong.

The care of people with dementia is different from the care of older people in general, both in terms of skills and attitudes. The social care and medical care sectors in Hong Kong have just started to feel the impact of the increasing proportions of their clients having dementia, but there are as yet little specific provisions for dementia. At the same time, family caregivers have limited access to information and caregiver training. The limited generic domiciliary and respite services for older people are not designed for the demented people and are therefore seldom used by family caregivers.

The result is the rising demand for old age home placement. Despite public outcry for more, Hong Kong already has more old age home beds per older person than most western countries. The problem lies in the quality of care. Old age home staffs are generally poorly trained in the care of the confused and the rate of use of physical restraints in Hong Kong is one of the highest in the world.

One third of community dwelling demented people are looked after by foreign domestic helpers in Hong Kong. Most family caregivers find them helpful. Nevertheless, there is evidence of caregiver stress among the domestic helpers and they do want to have dementia care training. Better trained domestic helpers may translate into better care and help to reduce behavioral problems in the demented people.

Cognitive stimulation activities have proven value in slowing cognitive decline and reducing behavioral problems. Family caregiver training programmes reduce caregiver stress and behavioral problems. Staff training and quality assurance can significantly reduce the use of physical restraints in nursing homes and hospitals. In the recent years, a handful of NGO’s have provided such services on a self-financed basis. But the scale is limited by the lack of public subsidy, professional manpower and space. Only when our publicly funded social and medical service providers truly
take on a dementia perspective and develop these evidence-based services, can the social impact of dementia be significantly lessened in Hong Kong. The recent extension of dementia care financial supplement from care and attention homes to day care centres is a small step in the right direction.