

# A STUDY TO ASSESS THE IMPACT OF ORGANIZATIONAL STRATEGIES AND HUMAN RESOURCE MANAGEMENT FOR THE IMPROVEMENT OF THE QUALITY OF LIFE ON DEMENTIA PATIENTS IN THE CHINESE

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## ABSTRACT

The aim of this research was to investigate the association between depression and Parkinson's disease (PD) as possible risk factors for dementia. Methods. From January 2001 to December 2008, Parkinson's disease patients with recent diagnoses and healthy controls were chosen from the Taiwan National Health Insurance Research Center database. This cohort was split into three groups: those without Parkinson's disease (PD), those who had PD, and those who also had depression. The hazard ratio (HR) for each group and the rate of dementia incidence were determined using Cox's regression analysis.

*Keywords: Community supports; HRM; Dementia; Equity; Telehealth.*

## 1 INTRODUCTION

A resource that generates money and is alive and well is a human resource; production resources are not used to create it. Keeping up with technological changes is essential. To improve the overall effectiveness of the organisation, it is critical for workers to develop their abilities. The complexity of modern administration has led to the incorporation of new elements. The human resource development process includes a number of subsystems, such as performance assessment, training, organisational growth, potential development, job rotation, welfare and reward. Every one of the many programmes is always attempting to help folks acquire new abilities (Ragini, 2015). China, the country with the largest population, will have significant challenges in adapting to an ageing population that will include a growing number of dementia sufferers. For successful policy and care plans in the short and medium term, it is crucial to identify the prevalence of dementia throughout the nation and the distribution of cases in different areas. The effects of methodological concerns on the results of a large-scale Chinese data synthesis on dementia have not yet been examined in any research. In China and the developing western Pacific, the prevalence of dementia in those over 60 years old was 4%, according to a global Lancet inquiry from seven years ago (the Delphi research). 3.2% of individuals 60 and older and 4.98 percent after age and sex standardisation to the demographic structure of Western Europe were found to be affected by dementia, according to a more recent meta-analysis by the World Health Organization for its global study on dementia (Edvardsson, D.,2014).

Alzheimer's Disease International has recommended that each nation develop a national plan to address this massive public health issue (ADI). An earlier study found that as people's knowledge of dementia rose, so did their capacity to recognise behaviours associated with the disease. Lack of knowledge might cause the development of symptoms and the delivery of

healthcare to be delayed. As part of the As stated in the World Health Organization's Global Action Plan on Dementia, all countries should make an effort to increase public and professional awareness of dementia and create a culture that embraces persons with dementia. In order to maximise the impact of limited educational resources, it is important to first assess the public's present level of understanding. (Liu, 2019).

Strategy is a broad concept that encompasses much more than straightforward competitive plans. Strategies are mission statements for businesses. A well-thought-out strategy is created with input from the institution's stakeholders and is made up of a number of goals and objectives that can be assessed and achieved. Each of these statements of intent to take action is linked to a specific person or group of persons who are in charge of and have the power to achieve the desired results by the specified deadline. They are the established procedures, decisions, and regulations that support a group in achieving its goals. An approach to HR called strategic human resource management enables firms to prioritise employee happiness while simultaneously achieving their own goals. The management of human resources includes all issues related to the workplace, including hiring and firing, benefits, and training. Human resources may be used to provide rewards for working properly, instruction on new safety measures, and paid time off for vacation or sickness. Strategically managing people requires being proactive. To make sure that the arrangement benefits the company and its employees, careful planning is required. This might alter how an organisation runs, having an effect on anything from hiring practises to training plans to performance evaluations and disciplinary measures. In today's HR and management circles, the concept of strategic human resource management is hotly debated, and bookstore shelves are lined with expensive tomes on the subject. But what exactly is Strategic Human Resource Management (SHRM) and how does it differ from HRM methods that are more traditional? A branch of human resource management (HRM) is strategic human resource management, or SHRM. It's a specialty that emerged from HRM and is rather new. The idea of strategy was largely glossed over in the early, or so-called conventional, HRM literature in favour of presenting it as a purely operational issue whose effects cascade down through the organisation. At least in the views of many executives, human resources, with its concentration on people, and business, with its emphasis on statistics, inhabited distinct domains. Professionals in human resources were uncomfortable with the "war cabinet" atmosphere at the organisation (Wu, Y.; Fratiglioni, L. and Matthews, 2016).

## 2 PROBLEM STATEMENT

"In recent years, there has been an increase in the awareness of risk variables' potential significance and the therapeutic emphasis on dementia patients. Additionally, nothing is known about the advancement of the quality of life assessment of dementia patients. " As the mortality rate for those under 65 continues to decline, older people, particularly those with dementia, are becoming increasingly prevalent. Perhaps as a result of improved healthcare and education, dementia incidence among the elderly has decreased in several countries. Nine modifiable risk factors for dementia were identified by the Lancet Commission on Dementia Prevention, Intervention, and Care; they include low levels of education, hypertension, hearing loss, smoking, obesity, depression, physical inactivity, diabetes, and a lack of social contact. Research is emerging in favour of these nine risk factors. There are currently three more indicators that may be considered reliable predictors of dementia. Factors that increase vulnerability include exposure to hazardous air pollutants, sustaining a head injury, and

drinking excessively. In order to revise our previous 12-factor life-course model for preventing dementia, we performed fresh reviews and meta-analyses. Nearly half of all occurrences of dementia may be attributed to these 12 modifiable risk factors. Prevention has a lot of promise, especially in low- and middle-income countries (LMICs), where dementia rates are higher (Livingston, 2020). Anyone interested in dementia in China should read the China Alzheimer Report 2022, which is a thorough collection of socioeconomic and healthcare facts about China. This study offers a more thorough picture of ADRD in China than the annual World Alzheimer Study, including epidemiological data and details on the diagnosis, care, and public resources available for the support of those with Alzheimer's disease. Some of China's top experts on Alzheimer's disease are among those who contributed to this study. 7 It functions as a crucial information source both in China and throughout the globe. It will be issued twice a year in the future (Ren, 2022).

### 3. BACKGROUND OF THE STUDY

Several studies have examined the prevalence of dementia in China during the last ten years. Dementia affects 46% of individuals surveyed in the 65+ age group, whereas Alzheimer's disease affects 299% of those surveyed. Alzheimer's disease prevalence was estimated to be 3-5 percent after a large-sample, population-based research in four regions (covering rural and urban areas) in 2005. (Zhang et al., 2005). Since then, there have been several studies on the prevalence of dementia, with results ranging from 5.0 to 7.7 percent for those 60 and older and from 2.0 to 13.1 percent for people 65 and older. The sample size for the research will be chosen. The prevalence of dementia among those 65 and older was 514 percent (95 percent confidence interval [CI] 471-557) in 2014 and 560 percent (350-760) in 2019. 530% (430–630) of Chinese people 60 and older were overall afflicted by dementia. Rural areas exhibited far higher rates of dementia and Alzheimer's disease than urban areas (6.05 percent against 4.40 percent for dementia and 4.25 percent versus 2.44 percent for Alzheimer's disease, respectively). The risk of developing dementia varies by age and gender. Between the ages of 55 and 99, the frequency of dementia doubled every five years, and the gender ratio was 1:65. Alzheimer's disease diagnoses were diagnosed 237 times more often in women than in men, perhaps due to hormonal changes and other factors that alter brain development (Yang et al., 2016). With 55% in northern China, 52% in central China, 48% in southern China, and 72% in western China, dementia incidence varies by area in that country. Regional differences in dementia prevalence also exist. China's dementia prevalence among patients 60 years of age or older is comparable to that of most other nations (between 50% and 70%), but it is higher than that of sub-Saharan Africa (57%), central Europe (58%), and Latin America (81%), and lower than that of Southeast Asia (76%), according to a 2015 World Alzheimer Report. Discrepancies in dementia survival rates, environmental risk factors, genetic factors, and mortality before the onset of dementia may all contribute to global disparities in prevalence. Furthermore, the variety of research methodologies, especially the use of diverse diagnostic criteria, may bias data on the prevalence of dementia. Therefore, further studies using a trustworthy method of diagnosing dementia are necessary to confirm the prevalence of the condition (Podcasy et al., 2016). There haven't been many extensive studies on the prevalence of mild cognitive impairment in China during the last ten years. The frequency of mild cognitive impairment in Chinese persons varied from 97% to 23% according to six research done between 2009 and 2015 using different diagnostic criteria. Since the investigation was restricted to a particular area, it was not able to analyse the prevalence of mild cognitive impairment throughout the whole nation. In both urban and rural regions, the prevalence of

moderate cognitive impairment was found to be 17-9 percent, 25-1 percent, and 20-8 percent, respectively, among those 65 years of age and older in all the sites evaluated. A total of 42% of mild cognitive impairment subtypes were caused by vascular disease, and 29% were brought on by prodromal Alzheimer's disease. In this article, patients with mild cognitive impairment were categorised according to the cause of their disease. This made it possible for researchers to concentrate on vascular risk factor medications, which are essential for avoiding cognitive decline. According to two meta-analyses, modest cognitive impairment affected 12.7 percent of persons 60 and older and 14.5 percent of those 55 and older. The prevalence of mild cognitive impairment increased among women and in rural areas relative to urban areas as educational level declined (Jia, 2020).

#### 4. LITERATURE REVIEW

As more individuals live above the age of 85, dementia is becoming more common and more prevalent. Since there is presently no cure for Alzheimer's disease or other types of dementia, it is imperative that researchers find ways to enhance the lives of individuals who experience it. Activities at many dementia care homes encourage not just mental and physical activity but also deep relationships with people in an effort to enhance quality of life. Even while it's generally accepted that partaking in such activities is beneficial, little is known about the activities clients are most likely to like or how they could influence their quality of life. These kinds of activities may generate positive moods and social connections, which may improve dementia patients' quality of life. The researcher will analyse how people with dementia rate their own quality of life. Reacher will discuss how it has been assessed in previous research, and then examine the findings about the effects of various activities and social interactions on quality of life for people with dementia. According to the Alzheimer's Association in 2015. Value of a high quality of life is constant throughout life. Everyone, regardless of age, wants to be treated with respect and kindness, to have their basic needs addressed, and to feel like they belong somewhere. Although they agree on a broad definition of "quality of life" in dementia, the five researchers and family carers who were surveyed emphasised different components of QOL. For instance, in this group, several researchers have connected self-perception to quality of life. It's likely that individuals may lose touch with who they are as they become older and become unable to care for themselves. As a consequence, medical professionals could begin treating the patient as though their illness makes them less than who they actually are. However, family carers may see quality of life differently for the persons they support. The purpose of this qualitative research was to collect data from family carers on the quality of life of their loved ones with dementia who were residing in nursing facilities. Caregiving for a person with dementia often came up in discussions about life satisfaction. Caregivers thought that if they took an active interest in the client, got to know them, and encouraged them to take part in activities, the client's quality of life would improve (Lepore, M., 2019). Even while older adults may not be able to do such physical activities as effectively as they formerly did, the advantages of exercise highlight the necessity to include less rigorous physical activities on dementia care units. Although activity coordinators should push for this population to take part in adapted exercise programmes, they should be mindful that as the condition progresses, the limitations of their clients may change. Physical duties may be difficult for persons with early-stage dementia since they require decision-making on their part. Patients with dementia often experience a decline in their physical capabilities as they become unable to do daily duties or participate in regular physical exercise, particularly those who are in the latter stages of the

illness (Giebel, Sutcliffe, & Challis, 2015). There are now 46.8 million dementia sufferers worldwide, and by the year 2050, that figure is expected to have increased significantly to 131.5 million. When it comes to the care of dementia patients, neuropsychiatric symptoms, also known as NPS, are a major source of concern since they may be difficult to control and can lead to hospitalization. Although it is commonly recognized that psychotropic drugs may have unfavorable side effects, medical professionals may use psychiatric medications to treat or control NPS. It's likely that non-pharmaceutical methods are more successful in treating dementia sufferers. Patient-centered care, or PCC, is a sociopsychological treatment approach that recognizes the individuality of the patient in relation to the attitudes and care practices that are present around them. PCC is also known as patient-centered care.

5. METHODOLOGY

To address the research issue, mixed methods research incorporates aspects of qualitative and quantitative research. Due to the integration of the advantages of both approaches, mixed methods may aid in providing a more comprehensive picture than a solitary quantitative or qualitative research. Mixed methods research is often employed in the behavioural, health, and social sciences, especially in multidisciplinary contexts and when investigating complex situations or societies. The sample size of 13557 people was determined with the help of the Rao-soft computer software. There were a total of 14100 questionnaires sent, and 13928 responses were received. At the end of the day, 172 surveys had to be thrown out because they were missing important information. Therefore, there were a total of 13928 Chinese competitors. For the survey, every person who replied was contacted, and the sample was done at random. To determine the level of relevance in connection to qualitative and quantitative information that studies the dementia patient, the proposed research triangulates quantitative and qualitative data.

6. RESULTS

Table 1. KMO and Bartlett's Test

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Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.905
Bartlett's Test of Sphericity	Approx. Chi-Square	6998.867
	df	190
	Sig.	.000

The KMO value of the data used for this study is .905. Furthermore, Bartlett’s test of Sphericity derived the significance level as 0.00. Hence, the sample was proven suitable for

running factor analysis. After performing EFA, four factors were extracted and the eigenvalues of these factors were 19.39, 1.807, 1.372 and 1.119, respectively.

Table 2 : Reliability Statistics

Reliability Statistics		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.997	.997	20

Out of the 20 questions the Cronbach’s Alpha for all 20 questions was either .997 and overall Cronbach’s Alpha was found to be .997.

7. RESULTS

FACTOR ANALYSIS

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TEST FOR HYPOTHESIS

INTERNET ENVIRONMENTAL STREATEGY

Person-centered care includes recognizing dementia patients and their carers as individuals, seeing the world "through the eyes of people with dementia," and fostering a pleasant social atmosphere. Person-centered care modifies the traditional therapy expert patient relationship by shifting the emphasis from the care tasks to the person. Person-centered care enhances carers' capacity to resist from reading a person with dementia and his or her behavior from the standpoint of the disease. Patients with dementia are treated as people first and foremost, and their behavior is seen as a response to their environment and the things that are occurring to them. Caregivers extend their perspectives and acknowledge that they have a close connection with persons who are suffering from dementia. This necessitates an understanding of how dementia patients' treatment may influence their emotions, behavior, and quality of life in either a favorable or bad manner. Person-centered care aims to lessen problematic behavior while raising the quality of life and mood of dementia patients. As a consequence of their better ability to think about and understand a person with dementia, carers' quality of life, job satisfaction, and attitudes about ageing and dementia will all improve. Person-centered care may help reduce carer stress, burnout, and workload..

The following hypotheses explain the preceding subjects:  
H01: There is no significant relationship between Internet Environmental Stragaty and The Quality of Life for Dementia Patient.  
H1: There is significant relationship between Internet Environmental Strategy and The Quality of Life for Dementia Patient.

Table 3. ANOVA

ANOVA					
Sum					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	68416.107	14	4886.865	2180.686	.000
Within Groups	190.483	85	2.241		
Total	68606.590	99			

In this study, the result is significant. The value of F is 2180.686, which reaches significance with a p-value of .000 (which is less than the .05 alpha level). This means the “H1: There is significant relationship between Internet Environmental Strategy and The Quality Of Life for



Dementia Patient” is accepted and the null hypothesis is rejected.

## 8. CONCLUSION

The impact of HR Planning on employee happiness in Sri Lankan software development companies is the focus of this study, and the findings are based on an interpretation of primary data. The availability of HR Planning competences seems to be more important than the presence of an HR department in shaping the contours of employee work satisfaction, according to the association between the two. Furthermore, it has been shown that the HR planning factors cited by the HR management of software organisations are closely connected with greater levels of employee satisfaction in their professions. When asked about their experiences with training in areas including "knowledge sharing," "skill development," "communication skills," "team work," and "HR/orientation," the vast majority of software engineers reported being satisfied with the possibilities provided by their employer. However, not all workers are satisfied with the quality of in-house training opportunities. Some workers are resentful of productivity improvement programmes and resistant to learning new technologies. A large majority of employees believe that the working hours decided by the organisation are most convenient for them, as stated in regarding work type/workload planning in the software organizations.

## LIMITATIONS

Every study has limitations. The study will include only 13928 participants which is a small sample size. Again, the study will survey workers who have been exposed for a period longer or less than three years depending on their job duties. This survey will be conducted by a questionnaire method, hence if a survey participant is contacted by phone rather than online, their answers may change.

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