Proposal for Welfare Priorities and Agenda for 2009-10

A submission to the Labour and Welfare Bureau

STRENGTHENED FAMILIES STRONGER SOCIETY

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The Hong Kong Council of Social Service

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SUMMARY OF MAJOR RECOMMENDATIONS

Service Improvements

Family & Community Service

1. To provide Witness Support Service for victims of domestic and sexual violence

Elderly Service

- 1. To ensure sufficient service quota of day care centre and integrated home care service
- 2. With increase of frailty rate in Day Care Centre (DCC) for the Elderly:
 - To improve the Schedule of Accommodation of DCC
 - To improve day care service infrastructure and manpower planning
- 3. To target resources on expanding after-service hours programmes in DCC
- 4. To increase residential service quota for frail elders
 - i. Additional resources for purpose-built Care & Attention home conversion to severe level of care instead of moderate level
 - ii. Additional resources to newly converted home to extend the coverage of Community Geriatric Assessment Team Service
 - iii. Improve residential home infrastructure in order to counteract the shortage of nurse

Rehabilitation Services

- 1. To formulate a long term plan on the development of subvented residential services
- 2. To further increase the support to self-help organizations of people with disabilities
- 3. To further strengthen the support to carers and family members of People with Disabilities (PWD) such as examining the feasibility of introducing financial assistance to carers
- 4. To review the schedule of accommodation and resources provision for staffing support of Special Child Care Centre and Early Education Training Centre
- 5. To review the provision of allied health personnel especially speech therapists for alleviation of the shortage
- 6. To strengthen the cooperation of integrated schools and NGOs to ensure that proper services be provided to students with special needs
- 7. To support the development of alternative residential modes for PWDs including self-financed homes by provision of suitable sites and facilitating measures
- 8. To provide Government and subvented organizations' outsourced work to rehabilitation organizations or social enterprises by restricted tendering

Service Improvements

Service for Low Income Households

- 1. To monitor the rate of Comprehensive Social Security Assistance, Disability and Old Age Allowances more frequently at half yearly basis
- 2. To provide immediate additional rent subsidy to those whose actual rent payment exceeds the maximum rent allowance
- 3. To expand the Transport Support Scheme from 4 districts to cover all districts in Hong Kong
- 4. To conduct systematic training for workers working with unemployed CSSA recipients and other unemployed persons

New Initiatives

Family & Community Service

- 1. To provide Family Support Programme for cross-border family
- 2. To initiate Family Development Service
- 3. To provide Neighbourhood Service Team at Public Housing Estate

Elderly Service

- 1. To encourage running of self financed residential service
- 2. To engage caregivers as partners in provision of care service

Children & Youth Service

- 1. To provide Stationing Social Work (3 yrs pilot projects in five selected districts) to help early identification of hidden family problem in nurseries and kindergartens
- 2. To develop actions to tackle the rising children and youth mental health problem
 - i. Develop a district based one-stop specialized project to provide professional and all round support, including early detection and intervention to children with specific learning difficulties and their families
 - ii. Develop a specialized community mental health support team to outreach and collaborate with other social services, such as children and youth centres and school social work, to provide assistance to suspected children or young people with mental health difficulties
 - iii. Provide mental health training to workers other thatn medical and rehabilitation services and teachers
- 3. To develop a pilot career development and training centre for non-engaged youth

- 4. To form a Children Commission to coordinate and liaise with different parties in addressing the unique needs of children
- 5. To develop a comprehensive child friendly policy to oversee the development and caring needs of children

New Initiatives

Rehabilitation Services

- 1. To explore possible integration as well as enhancement of current mental health community support services
- 2. To establish a specialized employee assistance program to provide various support to autistic service users being employed in the open market
- 3. To implement the aging-in-place approach in hostel for people with Learning Disabilities

Service for Low Income Households

- 1. To add a lunch assistance scheme to primary and secondary school students
- 2. To provide rent allowance scheme to public housing waitlisters for at most one year
- 3. To give one-off child allowance of HK\$500 to the family / guardian of each child aged 3 or below through maternal and child health centres
- 4. To provide services to long-term CSSA recipients who are not successful in finding jobs through existing employment assistance programme
- 5. To implement one-stop shop service mode to serve those in need of employment assistance programmes

PREAMBLE

Our Honorable Chief Executive of the HKSAR Government, Mr. Donald TSANG had stated in the 2007-08 Policy Address that in welfare planning, service delivery modes were determined by the types of service recipients. The provision of social services had not been planned from a holistic family approach. Hong Kong was a predominantly Chinese community with the family as its core value. The Government should strengthen the family by formulating social policy and providing welfare services relating to the family that meet the needs of women, children, youngsters and the elderly. Supporting and consolidating the family would be the primary consideration of our social policy and social services planning, and the family would be promoted as a core social value.

We agree family as an intermediary system between individuals and the society, serves a lot of primary social functions in building up individuals and facilitating them to interact with the society. Family provides individuals with their basic personal identities, defining who they are and where they come from and assuring continuity across generations. Family provides the first line of support to meet their dependents' basic needs for shelter, food, clothing and other livelihood expenses. Family rears and nurtures the next generation to be productive members of society. Family is responsible for assuring children's safety, health, education, and general well being and teaching them values and appropriate social behavior. Family also provides most of the care and concern for members in the family who are too frail, sick or led to care for themselves. Last, family coordinates and mediates different services and resources for individuals in the family.

However, unprecedented changes are taking place in family in modern world. We have diversified forms of families, such as growing numbers of unmarried couples, single-parent, estranged or reconstituted families and etc.. The number of members in the family is decreasing. Many of the original social functions and roles of family are diminishing. Besides, social crises, such as domestic violence, sickness, ageing society, unemployment and inflation, weaken family's capacities in performing its functions and roles. The goals of welfare provision are preserving the family functions and roles, promoting the resilience in the family and supporting families in greatest economic and social needs, as well as those determined to be most vulnerable or at risk families to strengthen these functions and retrieve their roles.

In this year's welfare priorities and agenda setting exercise, we attempt to identify the most crucial concerns in different service groups that hinder the family to perform its functions and roles, and to develop measures that facilitate the family to resume its functions and roles.

Besides specific needs and difficulties of different service groups, the up-rising inflation rate has devastating impact on the family in this year. Special measures are suggested to relief the strain on family. With continuous efforts in helping the unemployed to become self reliant will be explored.

WELFARE PRIORITIES AND AGENDA 2009-10

1. Family and Community Services

- 1.1 Service Improvement
- 1.1.1 Provision of Witness Support Service for victims of domestic and sexual violence

In the first half-year of 2007, among the 2733 reported domestic violence cases, 381 cases were prosecuted (Security Bureau, 2008). Prosecution rate is at 14%. One of the considerations for Department of Justice to take forward a prosecution in domestic violence case is the victim's willingness to give evidence (LegCo Paper No. CB(2)2532/0607(01)). We believe this explains the low prosecution rate for domestic and sexual violence. Support to victims in going through the legal process is crucial and in empowering the victims. Our Council had submitted a proposal on Legal Support Service in February 2004 to SWD and LegCo (LegCo Paper No. CB(2)2810/06-07(07)) deliberated our idea on setting up Legal Support Service.

We found that victims of domestic and sexual violence lack of knowledge about the charging options and court proceedings. Most of them are afraid of authority, anxious about personal and children's safety and emotionally confused. Even though the Police filed charges, not many of the victims (witnesses) could be persistent and be emotionally strong enough in going through the court procedures.

Inadequate knowledge and understanding of court proceedings and personal rights may lessen the victims' determination in serving as witnesses in criminal procedures. Overseas experiences revealed that "legal advocates" could empower victims of domestic violence and sexual violence to go through legal and criminal proceedings.

Recommendation:

i. We propose provision of resource for enhancing safety and support to victims of domestic and sexual violence by setting up Witness Support Service. The service is to be provided by experienced social workers in working closely with the Police, Department of Justice and the Court, promoting interdisciplinary liaison, networking information, mobilizing community resources (including use of trained volunteers, child care service and specialist service, such as

language interpretation) and providing emotional support and promoting victims' understanding of the court process (by court visitation) and personal rights, for enhancing safety and support for victims in going through the legal process.

1.2 New Initiatives - Responding to emergent social challenges and starting with prevention efforts

Responding to emergent social challenges

1.2.1 Provision of Family Support Programme for cross-border families

Cross border marriage has been a characteristic of contemporary Hong Kong families. In 2006, cross border marriage constitutes 40% of the total number of marriages in Hong Kong. Mothers of 40% of the newborn in HK are coming from mainland China last year. Now, there are 6200 pupils on cross border schooling (Shenzhen – HK) daily, 90% of them are studying at North District (EDB, 2008). Moreover, the number of divorces in cross border marriages in Guangdong Province has increased by 100% in 2005 as compared with the figure of 2004. Sooner or later, these families will reside in HK for family reunion and bring up of children.

Recommendation:

i. In order to provide early support to the students and families, prepare them to integrate, participate in the labor force in HK and prevent social or family problems arising from the adjustment difficulties, we suggest to provide Family Support Programme and strengthen manpower at these kindergartens and primary schools with a critical mass of cross border pupils in working with these families. On the other hand, a team of cross border family workers is to provide more in-depth service to families with special needs and to network employment training for the parents.

Starting with prevention efforts

1.2.2 Initiating Family Development Service

Other than crisis and remedial services, preventive and developmental work is the foundation for building a healthy family and community. Proactive working approach in providing services to the couple planning to get married and/or have children is crucial. It is of paramount importance to revisit resource on pre-marital work and parent support services for prevention of family problems.

In the past three years, the caseload of NGO Integrated Family Service Centres (IFSCs) kept increasing. Total no. of cases handled by each centre has been increased by 25% from 2005 to 2008. In balancing the workload, the total number of group and programme conducted was cut by 9% and 20% respectively. Housing problem, emotional crisis and financial problem have consistently ranked as the top three case problems which have constituted to 40% of the work at NGO-IFSCs. Most resources are deployed to handle tangible and critical problems of the families. Efforts over prevention of family problem and development of family capacities become minimal.

Recommendation:

i. It is recommended to establish Family Development Service (家庭發展服務) to mark additional resource in strengthening family capacities and promoting their resilience in facing the challenges in different phases of family life. The services may include preventive efforts in strengthening family members' knowledge, skills and commitment in their marital and parental roles and responsibilities in different phases of family life and making referrals for necessary casework follow-ups if there are any early identified needs as appropriate. The service is suggested to work closely with several existing contact points of the potential users, such as the Marriage Registry, Maternity and Child Health Clinics, Out Patient Clinics of Obstetric service, and etc., in providing easily accessible service to the new couples and parents, may be with special focus on remarriage. In response to the need for preparation of and adaptation to retirement, such service may also work with corporates to provide service for their retiring employees.

1.2.3 Provision of Neighbourhood Service Team at Public Housing Estate

In recent years, there are a number of alarming family tragedies, which reflect weakening neighborhood support. We believe, early and timely support and intervention for families in stress is essential to prevent family relationship from deteriorating, which leading to family tragedies. The Housing Department has recently launched Housing Advisory and Service Team at Tin Shui Wai for new residents in helping them to adjust to the new community and assisting Estate Management Advisory Committees (EMACs) to incubate a stronger sense of belongings and foster community building.

Besides, this type of networking service can also facilitate active interaction among different community groups which create community synergy in bringing not only personal growth but also building stronger community capacity for sustainable community development.

Recommendation:

i. We strongly advise the development of Neighbourhood Service Team at targeted Public Housing Estates, without limiting to new estates, to enhance neighborhood mutual communication and build up support network for strengthening family and community resilience.

The service scope of these Teams includes:

- To reach out and work with the target groups in forming informal **support network** in the locality;
- To mobilize and network community resources in enhancing members' **self help and mutual help capabilities**;
- To **enhance community participation** of the target groups and interactive communication with various community groups; and
- To engage the target group in **socio-economic capital building activities** for prevention and alleviation of poverty.

The Neighbourhood Service Team can be set up by mobilizing resource from terminated NLCDPs or exploring new resource to support identified needy communities. Social Welfare Department is suggested to relate the concern of the sector on the issue to Home Affair Bureau for follow up.

Estates with high concentration of low-income households, CSSA recipients, families on compassionate re-housing and conditional tenancy scheme; and with high concentration of elderly, new arrivals and ethnic minorities; are suggested to be of high priority in providing the neighbourhood service. Such communities include Tung Chung, Tseung Kwan O, Kwun Tong, Kwai Tsing, etc.

2. Children and Youth Services

2.1 New Initiatives

2.1.1 Early prevention and intervention platform for hidden families and children at risk: Set up a 3-Year Pilot Project on Stationing Social Work Service in 20 Full-day Pre-primary schools for 5 Districts

From various recent studies and statistics, it is not difficult to identify a phenomenon that nowadays child care quality and family support network in our society are getting worse. Parents' long working hours added with complicated but hidden family problems, all drive most of the children and families suffer great turmoil in emotional and mental health problems, stressful parent-child relationship, marital relationship, situations even get poorer for those low-income families, first time parents and children with learning difficulties.

According to the Survey of Hidden Family at Risk in Kindergarten conducted by HKCSS and Council of Non-Profit Making Organizations for Pre-primary Education in Jan. 2008, among the 10,247 children from 100 Kindergartens and Child Care Centres, 1,875 children and families (18%) have at least one high risk problem in the past 6 months. There are 567 children (5.5%) having learning difficulties, while 675 families (6.6%) have parenting difficulties, and 323 parents (3.2%) have mental illness.

From the Statistical Profile of Low-income Households in Hong Kong collected by the HKCSS in 2008, there are 238,046 of 0-14 aged children living in low-income families, while 33,683 (14%) coming from divorced families.

According to the statistics on cases of child abuse captured by the Child Protection Registry (CPR), there are 944 child abuse cases in 2007. Compared with the statistics in 2005, the total number of child abuse cases has increased by 17%. Among the 944 cases, 53% is related to physical abuse, 12% is related to child neglect cases.

Nevertheless, the existing policy discussion on the issues of pre-school care is scattered and piecemeal under different Policy Bureaux and Departments, like Labor & Welfare Bureau (LWB) and Education Bureau (EDB). Children of 0-2 years old and children of 3-6 years old are taken care of differently under different policies

and management practices. Harmonization of pre-school services may help in handling some logistic issues, such as children's space requirement and child care workers' qualification, but not fully in policy and service level. In consideration of the risk factor, priorities should be given to help these preschool stage children with early screening for hidden family problem.

The existing Comprehensive Child Development Service (CCDS) could provide physical and emotion assessment for mothers and children, yet they are limited to the time the children go for vaccinations and there are limited social work support to the families. In our Survey of Hidden Family at Risk in Kindergarten revealed, families in difficulties tend to seek help from principals, teachers and other parents in their pre-primary schools.

Thus, policies and services in multiple dimensions are necessary to be formulated and developed to attain early identification and intervention of these at-risk families and to promote the healthy growth of these young children.

Recommendation:

i. In service level, a 3-Year Pilot Project on Stationing Social Work Service in 20 Full-day Pre-primary schools for 5 Districts, which costs around \$12 million for additional 10 ASWOs, is highly recommended as a comprehensive, one-stop and professional service. The projects may start with those districts in greater needs, for example, district with higher portion of low income families, young age population, single parents and cross-border families.

Besides, from the Survey of Hidden Family at Risk in Kindergarten, some pilot projects on stationing social worker in childcare centres and kindergartens, show great effectiveness and significant outcome in early identification and intervention for children and parents in needs. The service not only provides remedial counseling service, but also reaches out to those hidden families. At the same time, preventive services, e.g. early identification, mutual help groups, parental education and etc. can also be provided for all parents. It is no doubt that adequate and effective investment in the early years of children development would be the wisest and most important decision of a healthy and quality living society.

2.1.2 A District based Specialized Project on Prevention and Early Identification to cater the increasing demand of Children and Youth with Mental Health and Special Needs

Like physical health, mental health is important at every stage of life. Children and adolescent, like adult, can also have mental health problems that influence their lives. Without proper treatment, mental health problems can lead to failure in school, family conflicts, drug abuse and even suicide. They have great impact on one's functioning and may carry to one's adult life. It would become a great burden to families, communities and the health care system.

According to the Hospital Authority, the numbers of outpatients seen by specialists on child and adolescent psychiatry in the past six years, from 2001/2002 to 2006/2007, had obvious increment. The number of patients within the age group of 6 to 12 and 13 to 19 in 2006/07 are 4,840 and 4,673 respectively. In comparing with the figures in 2001/02, they had increased by 56% and 32% respectively in the past six years. As some young people and their parents are reluctant to receive any assessment and treatment, the actual number may be more.

Referring to the information reported by non-governmental organizations to the statistical information system of Social Welfare Department between 2002-03 and 2006-07, amongst the cases of secondary school students reported by school social workers, the number of cases involving emotional or psychological health problems was between 21,000 and 26,000 per year. The sector also notice that there is an increasing trend in the cases with mood disorders, such as anxiety disorder, panic disorder, phobia, autistic, and the cases with specific learning difficulties.

Figures on specific learning difficulties cases reported by the Education & Manpower Bureau (EMB) were 461 in 2000-01, 948 in 2001-02, 980 in 2002-03, 922 in 2003-04 and 1,065 in 2004-05 respectively. A total of 4,376 students with SLD problem in all primary and secondary schools were identified within these past five years. While these figures may reflect the workload presented to EMB, they can not actually reflect how serious the situation is.

Needless to say, a timely assessment and suitable follow up treatment can avoid the deterioration of those young people with mental health problems and specific learning difficulties of those identified young people. However, most of them have to wait for a long time before getting clinical assessment and thus receiving appropriate treatment.

Recommendations:

- i. Responding to the increasing number of children and young people with specific learning difficulties (SLD) in Hong Kong, a district-based one-stop specialized project is recommended to provide professional and all-round support to them. The objective of this project is to provide specialized social work intervention including early detection and early intervention to assist children with SLD and/or their family members to deal with problems arising from their special needs. This one-stop service can shorten the time from assessment to receiving service.
- ii. Concerning services for young people with mental health problem, cross-service and cross-sector collaboration within the same district must be promoted and encouraged. A specialized community support team is recommended. Services other than rehabilitation can approach them for support and referrals when they identify some suspected cases. Besides, workers of the team can outreach and collaborate with the referring service to help these suspected cases. They also make referrals of the cases for medical and rehabilitation services where necessary. The co-working approach can sustain the cases and their family members relationship with their referring workers that can facilitate the long-term community rehabilitation and integration of the cases and also reduce the labeling effect of service recipients.
- iii. The mental health problems and specific learning difficulties are more complicated than general developmental problem of children and youth. They require specific training of knowledge and skills. Training for the workers of other than medical and rehabilitation services and teachers is recommended to increase their sensitivity and awareness towards the issue and facilitate the identification of children and youth in need at the early stage.

2.1.3 Concern the issue of non-engaged youth (NEY) and the development of relevant service for NEY

Although more job vacancies are available for the youth after the economic rebounce in recent years, the youth unemployment rate (for age 15-19) still remains high at the level of around 18-20% for more than six months, especially much worse for the group of low motivated or in the state of social withdrawal. It reflects that the youth unemployment problem is not only rooted from the availability of current jobs but also the issues of the job matching and adaptation of the young people.

Besides, those unemployed youth tend to participate in various pre-employment trainings without vocational focus or refuse to join any trainings or related back to school programmes. How to make good use of the existing resources is another important issue.

For those persistently disengaged youth, most of them are male with the characteristics of low motivation, under-achieved, lack of work experiences, have learning difficulties, sometimes being discriminated as ethnic minorities, physically disabled, with mental health problems or in the state of social withdrawal. Existing programs could only help single or certain groups, but not all the vulnerable groups. Thus, specialized and one-stop team should be formed in enhancing the capability of such vulnerable groups.

According to the General Household Survey of Census and statistics Department, the number of young people aged 15 to 24, who were unemployed and unable to pursue further studies in the first quarter of 2007, were approximately 49,000, which is about 5.4% of the population. It is a wastage of human resources and the problem may worsen and more costly even disruptive if not addressed.

The report of Task Force on future initiatives and policies on training and employment programmes for the non-engaged youth has suggested setting up a Government-leaded working group to foster and monitor cross policy bureaux co-operation. To match with the recommendations of the task group, we would like to have the following suggestions.

- i. For the cross departmental collaboration, the report of Task Force on future initiatives and policies on training and employment programmes for the non-engaged youth has suggested that a cross sector and departmental (Social Welfare and Labour Department) working group should be set up. It monitors and follows up the cross-departmental issues as well as establishes a central database including information on all training, internship, and counseling records for effective managing and following up the service without overlapping and wastage of resources.
- ii. Those pilot projects proved to be effective should be provided with stable financial support in helping various kinds of non-engaged youth. A designated fund should be set up supporting these projects.

iii. Develop pilot Career Development and Training Centre for the Non-engaged Youth in different comparatively deprived districts to provide one-stop direct and case management service. The one-stop model include assessment, diagnosis, pre-employment training, internship, case management (Individual Career Development Plan, ICDP), on job mentoring, and relapse prevention and following up evaluation. Reaching out approach will be adopted for those youth in social withdrawal, under low motivation or on self-referral basis from their parents.

2.1.4 Additional Concerns

- i. A body responsible for coordinating and liaising with different parties in addressing the unique needs of children should be set up. To ensure all the child care services are delivered in a coordinated, efficient and effective manner, we suggest the formation of a Children Commission to respond to the above needs and ensure children's voice can be listened.
- ii. Last but not the least, a comprehensive child friendly policy is recommended to oversee the development and caring needs of a child. Early environments and nurturing relationships are essential to children's development. The concept of child friendly society should be promoted with the best interest of children and the paramount consideration of strengthening the joint effort of all relevant system and practice like education, health and medical, welfare for strategic and long term planning. With the achievements of above services and policies, we are confident that our children can have good development and our society can nurture good leaders for the future.

3. Elderly Service

Hong Kong's population is ageing. The rapidly growing number of older people will unavoidably induce socio-economic changes to our society and have implications on public resources. It is a challenge for the community as a whole, including the government, business, NGOs, and individuals to deal with the expected consequence of ageing and to perceive ageing positively. Indeed, ageing is not a problem but public funding support to physically unfit and reliant elders should be carefully examined.

3.1 Service Improvements

3.1.1 Community Support Service

To take care of frail elder at home is demanding to the family caregiver. Without an effective community support system, the "aging in place" policy is not going to work at all. Better support to caregiver and service operator is of high priority indeed.

- i. Ensure sufficient service quota of day care centre (DCC) and integrated home care service, especially for the most moderately impaired and with special need. Setting up new service centre/team or having in-situ expansion can either be considered. The applicant and caregiver should be provided with up-to-date information on waiting time for different community support services.
- ii. Increasing number of DCC users are diagnosed of Dementia and/or demanding intensive care :
 - The problem of insufficient space in day care centre should be addressed. It is revealed that most of the net floor area in DCCs (40 capacity) are varied from less than 218M² to 355M². With the consideration of frailty rate and special care for users with dementia, the schedule of accommodation is worthy to be reviewed.
- iii. Injection of new resources to strengthen the capacity of caregivers:
 - Extend service hours and/or make available of service to the convenience of caregivers who are working.

- Target resources on expanding and enhancing respite service
- Provide measures to better improve the escort service for DCC users. Improve the manpower of DCC to minimize the waiting time for escort service.
- Improve the infrastructure and manpower of day care service such as rehabilitation equipment and professional staffing input and hours, such as social worker, para-medical and clerical staff.
- Increase provision of integrated home care service to assist families to take care of their elderly family members in the community, and allow elderly people whose physical or mental health are deteriorating to maintain family or independent living.

3.1.2 Residential Service

Residential service is one of the prime concerns in welfare priority. It is agreed that policies and resources should be sought to support elder with severe impairment or elder with moderate impairment and without caregivers support. In view of the existing long term care system and extremely long nursing home waiting list, stronger support and better safeguards are needed for the most vulnerable elder.

- i. Additional resources for purpose-built Care & Attention home conversion to severe level of care instead of moderate level should be considered. The identified home should be convertible to the standards set by Department of Health. It is a fact that unit in public housing premise, due to inherent structural constraint, is not suitable for high level nursing care. The qualtiy of life of very frail elder and the occupation safety and health of staff are major concerns.
- ii. In addressing the vulnerability to illness and poor health of elder living in residential home, easy access to health care service at home is significant. Additional resources to newly Conversion Home to secure the support service from Community Geriatric Assessment Team / Psycho-geriatric Assessment Team are required.

3.2 New Initiatives –Engage caregiver as partner in provision of care service

- i. Concrete support to caregiver in both financial and non-financial assistance, such as caregiver allowance and free respite places
- ii. Provide incentive and support to the development of self-financing residential service and community support services, so that families or elderly people who are ready to pay for quality care service had more options to keep their caring functions and/or community living.

4. Rehabilitation Service

Although the Government has input new resources to the sector to enhance support services for People with Disabilities (PWDs) living in the community in the past few years, the provision of community support services for PWDs is still far from sufficient in terms of intensity and variety. In response to the rising concerns on independent living and social integration of PWDs, the government should examine and strengthen the existing services so as to better meet their needs.

There are over 5,500 people with disabilities on the waiting list of various residential services and the average waiting time for different residential places is 4 to 8 years. A long term plan on the provision of subvented residential services for PWDs should be formulated. On the other hand, according to the Council's survey on the aging issue of people with mental handicap, the needs of the elder people with mental handicapped in nursing care and para-medical training are great.

According to government's statistics, the unemployment rate of PWDs was 2.4 times of that of the total working population in Hon Kong and taking the unemployment rate of Hong Kong in March 2008 as 3.4%, the unemployment rate of PWDs is 8.2%. However, NGOs sector estimated that the unemployment rate of PWDs hits at 30% at the least. Moreover, the society's recent enthusiastic discussions on the introduction of minimum wage is thought to have controversial implication to the employment of PWDs.

4.1 Service Improvements

- i. To formulate a long term plan on the development of subvented residential services for PWDs by setting a target of 5 years to clear the waiting list of residential service and the extra resources needed are estimated to be \$119.4M per year;
- ii. To enhance the professional support of occupational therapist and clinical psychologist in day training services for providing tailor-made training programme to autistic service users to meet their special needs;
- iii. To further increase the support to self-help organizations of people with disabilities in terms of improving the subsidy level and maintaining stable

funding of services;

- iv. To further strengthen the support to carers and family members of PWDs so as to properly address their needs and difficulties which includes examining the feasibility of introducing financial assistance to carers;
- v. To review the schedule of accommodation and resources provision for staffing support in Special Child Care Centre and Early Education Training Centre so as to better meet the needs arisen from the increasing number of pre-school disabled children with more complicated and severer condition, or even with multiple disabilities;
- vi. To modify the funding model under the "Whole-school Approach to Integrated Education" and to take necessary measures such as increasing the grant for each students with special education needs in order to ensure effective implementation of the integrated education policy. It is also suggest too strengthen the cooperation of integrated schools and NGOs so that professional supports and proper services can be provided to integrated schools to effectively address to the special education needs of the integrated students;
- vii. To support the development of self financed homes for PWDs by provision of suitable sites and facilitating measures such as offering subsidies at a certain level;

4.2 New Initiatives

Recommendations:

i. To work closely with NGOs to explore the development of district-based community support service for the mentally ill (MI) by possible integration as well as enhancement of current MI community support services, including the community mental health intervention project, the community mental health care service and the community mental health link service. It is also suggested extending services to people with mood disorders by strengthening their therapeutic and pare-medical support and to the public by enhancing the community mental health education. The integrated service team can also act as a focal point in the community linking up relevant stakeholders such as family doctors, management of public housing estates, schools and other professionals, to support MI people living in the community;

- ii. To establish a specialized employee assistance program to provide various support to PWDs being employed in the open market so as to sustain them in workplace and promote a healthy employer-employee relationship;
- iii. To implement the aging-in-place approach with sufficient manpower to support aged people with mental handicap to continue staying in the same hostel.

5. Low Income Households

There is a rising concern in the society about the impact of inflation on low income families as well as the general public. The overall consumer prices rose by 6.1% in June 2008 over a year earlier. On the other hand, wage increase lags behind the rise in price. This adds extra burden to the grassroots. It is believed that inflation will remain for some time, thus, well-targeted assistance has to be made available to help the poor face the difficult time. Besides, continuous efforts in helping the unemployed to become self reliant remain an essential agenda in this year.

5.1 Service Improvements

- 5.1.1 The government will increase the standard rate under the Comprehensive Social Security Assistance Scheme (CSSA) by 4.4% with effect from August 1, 2008 and also the meal allowance for CSSA children who are full-time students. As inflation will continue, at least in the foreseeable future, it is suggested to keep in view the changes in Social Security Assistance Index of Prices (SSAIP) and to make adjustment in standard rate every half yearly, at time of high inflation rate. The improvement practice should also be applied to Disability and Old Age Allowance.
- 5.1.2 The rent allowance in CSSA is adjusted in accordance with the movement of the Consumer Price Index (A) (CPI(A)) rent index for private housing. However, the rent level increases substantially in the past months and many of those CSSA recipients who live in private housing are paying rent higher than the maximum level of rent allowance. For instance, in February 2008, half of those living in private housing (22,345 persons) paid higher than the maximum levels of rent. Moreover, singleton CSSA recipients face more hardship in meeting the rent¹. Government should review the mechanism of formulating and adjusting the rent allowance e.g. to refer to the actual rent paid by the 90th percentile of the CSSA rent paying households in private housing.²

Recommendations:

i. At this time of high inflation rate, Government to continue adjusting the

Please see HKCSS' submission to LegCo Welfare Panel, dated April 14, 2008 on rent allowance in CSSA for details.

² This is the recommendation of the government's review of CSSA Scheme, see Para 9.10, Report on Review of CSSA Scheme March 1996

- standard rate of CSSA and the Social Security Allowance every half yearly so as to ease the impact of rising prices on the CSSA households.
- ii. It is recommended to draw reference to the 90th percentile of the CSSA rent paying households in private housing and to provide immediate additional rent subsidy to those whose actual rent payment exceeds the maximum rent allowance. As singleton CSSA recipients face more hardship in meeting rent payment, government should consider giving higher subsidy to them.
- iii. To expand the Transport Support Scheme from 4 districts to cover all districts in Hong Kong so that people with lower wage are given more financial support to deal with the increasing cost of public transportation services and the incentive to remain employed despite of the low level of income.
- iv. A systematic training for workers working with unemployed CSSA recipients and other unemployed persons is recommended. The course will cover career planning and development with focus on theories of career counseling, assessment tools and practical skills, understanding the labour market and working with the employers.

5.2 New Initiatives

- 5.2.1 Inflation hits every aspect of the daily living of the low income households food, clothing, housing and transport etc. The rise in transport charge means that these households have to minimize the expense on items like food and clothing for meeting the price rise, it will also deter many from participating in social life.
- 5.2.2 With improvement in economic conditions, it is easier for the unemployed to find jobs in the open market. Agencies find that more of those left in CSSA system are hard core cases, hence more intensive services are needed to help this target group to enter the open market and finally become self-reliant.
- 5.2.3 On the other hand, for frontline workers to discharge their duties effectively to help the unemployed, there needs systematic training. At the moment, most of the frontline workers are without or with little training on career counseling and planning. Such training is therefore recommended.

- i. To add, on top of existing travel and textbook assistance schemes, a lunch assistance scheme to primary and secondary school students. The eligibility criteria of the above existing schemes could be adopted.
- ii. The private housing rent is found to have increased by 6.5% (CPI(A)) and at the same time there is an increasing number of people in the waiting list for public housing from 97,000 in 2005/06 to 107,000 in 2006/07. It is hence suggested that a rent allowance scheme be provided to waitlisters for at most one year.
- iii. In view of the increasing cost for raising young child, it is suggested that an one-off child allowance of HK\$500 be given to the family / guardian of each child aged 3 or below through maternal and child health centres.
- iv. It is recommended to try out in selected districts to provide services to long-term CSSA recipients who are not successful in finding jobs through existing employment assistance programme. It is suggested that the pilot project should adopt a case management approach whereby the case manager will (i) conduct an assessment for participants on their employability, social readiness and training needs etc., (ii) work out a career development plan with them, (iii) make appropriate referrals for counseling / re-training courses / job-seeking employment support services and financial assistance etc., and (iv) follow up for a longer period of time, say 2 years.
- v. It is also recommended that government should consider, on trial basis, the implementation of one-stop shop service mode to serve those in need of employment assistance programmes. This will help stream-line the existing services provided under Labour Department, Employees Retraining Board and SWD.

CONCLUSION

With the understanding of the Secretary for Labour & Welfare and the support of the Director of Social Welfare, in this year, the Council has worked closely with the Government and non-government organizations in the formulation of the 2009-10 welfare priorities and agenda.

A three-part consultation process has been worked out which includes a consultation and exchange forum, a work meeting with Social Welfare Department and a meeting with Secretary of Labour and Welfare. We are glad all participants, both the government officials and NGOs, are genuine and outspoken in the exchange of their views in this welfare priorities and agenda setting exercise. This marks the harmonious government-sector collaboration and we hope this could continue in the forth coming years.

This submission is a collective effort of the welfare sector. We hope the Bureau will respond positively to our concerns and put forward our recommendations in the government plan and action in the coming year.