



Hong Kong College of Paediatricians

Submission to Panel on Welfare Services Subcommittee on Strategy and Measures to Tackle Domestic Violence and Sexual Violence

Meeting on 8 December 2015 – Support services for victims of child abuse

The Hong Kong College of Paediatricians welcomes the Panel's hearing on support services for victims of child abuse. To ensure the services achieve what they purport to do - support victims of child abuse, we indeed need a review of the existing system. As resources are never unlimited and prevention is much kinder than cure, we need to review our overall efforts in prevention at the same time. As Pinheiro, independent expert for the United Nations Study on Violence Against Children,¹ said, "No violence against children is justifiable; all violence against children is preventable."

Do we know how many children are being abused to plan our services?

The Child Protection Registry under the Social Welfare Department (SWD) needs to be reviewed as to what data should be collected and how the data are best used. The current statistics do not necessarily match that from public hospitals nor that held by the police. These major parties need to work towards a **uniform database** to better reflect the local situation. Ability to analyse comprehensive, reliable and relevant data facilitates service planning, resource allocation and monitoring of trend and outcome.

The United Nations Committee on the Rights of the Child (UNC) in its Concluding Observations on Hong Kong's report submitted through China on the implementation of the Convention on the Rights of the Child (CRC) in 2013² called on the **mandatory reporting** of cases of child abuse. The government has yet to initiate a serious discussion on mandatory reporting for professionals despite abused children presenting repeatedly in a dire state or in death when timely professional action may have altered their fate. Such a discussion is important as some professionals equate mandatory reporting as reporting to the police rather than referral to the appropriate party for assistance. Others are unaware that the Personal Data (Privacy) Ordinance has exemptions in the sharing of information for the purpose of child protection so that professionals who report suspected child abuse in good faith are protected.

At the same time it is estimated through a territory-wide household survey³ and known cases in the corresponding period, only around 1% of child abuse cases are brought to professional attention. This means we need not only to improve professional training in the recognition and reporting of child abuse but we must at the same time invest much more on the prevention of abuse.

¹ Report of the independent expert for the United Nations study on violence against children 2006
http://www.unicef.org/violencestudy/reports/SG_violencestudy_en.pdf

² Concluding observations on the combined third and fourth periodic reports of China, adopted by the Committee at its sixty-fourth session 29 October 2013
http://tbinternet.ohchr.org/_layouts/treatybodyexternal/TBSearch.aspx?Lang=en&TreatyID=5&TreatyID=10&TreatyID=11&DocTypeID=5

³ Chan KL. Study on child abuse and spouse battering: report on findings of household survey. Hong Kong Department of Social Work and Social Administration, the University of Hong Kong. 2005



Which children are victims of abuse?

There is no definition of child abuse in our legal system. Different abusive acts are dealt by different ordinances. The SWD Procedural Guide for Handling Child Abuse Cases⁴ gives definitions of abuse that are open to interpretation. Hong Kong needs a **Child Ordinance** to clearly make all acts of violence against children illegal. The following are some areas of particular concern.

1. Corporal punishment

Use of corporal punishment is a form of violence against children. UNC in the Concluding Observations mentioned above asked for explicit prohibition of corporal punishment including within the family by law. To date, 47 states had already banned corporal punishment including at home.⁵ The movement started in 1979. Hong Kong is way behind.

2. Children who witness domestic violence

The impact of domestic violence on children can be serious and is both immediate and long lasting. General Comment No. 13 on Article 19 of the CRC: the right of the child to freedom from all forms of violence defines exposure to domestic violence as a form of mental violence.⁶ Current awareness of the impact of domestic violence on children is low. Co-experience of physical child abuse is well recognised in homes with domestic violence,⁷ but it is rarely documented as such. This is reflected in the SWD statistics on spouse and child abuse. Whereas the former fluctuated between three and six thousands per year over the last ten years, that of the latter remained around eight to nine hundred each year.⁸

3. Psychological abuse

Psychological abuse accompanies most other forms of abuse and can have long lasting impact on the child. Its seriousness is such that UK will be making psychological abuse illegal.⁹ Yet this form of abuse is persistently 1 to 2% of all cases on the Child Protection Registry only, while in the household survey cited earlier, psychological aggression was the most frequent form of abuse reported. A better understanding and recognition of psychological abuse is required.

4. Child neglect

⁴ Social Welfare Department. Procedural Guide for Handling of Child Abuse Cases. Revised 2007
http://www.swd.gov.hk/en/index/site_pubsvc/page_family/sub_fcwprocedure/id_1447/

⁵ Global Initiative to End All Corporal Punishment of Children: States which have prohibited corporal punishment November 2015 <http://www.endcorporalpunishment.org/progress/prohibiting-states/>

⁶ Committee on the Rights of the Child. General Comment No. 13 (2011) Article 19: The right of the child to freedom from all forms of violence http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf

⁷ Chan KL. Children exposed to child maltreatment and intimate partner violence: A study of co-occurrence among Hong Kong Chinese families. Child Abuse & Neglect 2011

⁸ Social Welfare Department. Statistics on Child Abuse, Spouse/Co-habitant Battering and Sexual Violence Cases <http://www.swd.gov.hk/vs/english/stat.html>

⁹ BBC News. New 'Cinderella law' included in Queen's speech. 4 June 2014 <http://www.bbc.com/news/uk-27693587>



General Comment No. 13 includes neglect or negligent treatment as a form of violence against children. Children being unattended leading to serious consequences is a recurrent problem in Hong Kong. Defining its unacceptability by law is not only a strong message to parents and the community, but could also lead to mandating certain home safety features like window grills in households with young children and a serious look at the provision of affordable childcare to support parents in need. After all under Article 18 of the CRC, the government has the responsibility to “render appropriate assistance to parents and legal guardians in the performance of their child-rearing responsibilities...”¹⁰

Are children with abuse receiving appropriate help and support?

It has already been pointed out that the vast majority of children abused do not reach professionals. For those that do, they should be receiving appropriate assistance according to their need as there has been a SWD Procedural Guide for Handling Child Abuse cases since the early 1980's. However, for some professionals they may only encounter children with suspected abuse infrequently. We need to ensure that when in doubt, frontline workers have the support of their supervisors to seek suitable advice and take actions with the best interests of the child as their primary consideration. The co-ordination between the Family and Child Protective Services Units of SWD, Child Investigation Units of the Police, Medical Coordinators of Child Abuse of the Hospital Authority and non-government organisations in the welfare sector could be critical to the initial investigation and management of child abuse. This needs to be enhanced.

In the recent review of the SWD Procedural Guide, in particular the functioning of the Multidisciplinary Case Conference, there was much concern with parental challenges of professionals involved in the conferences. On the other hand there is not a systematic evaluation of whether such conferences held for so many years did help the children and families or how to better engage parents and children in the participation of the conferences. After all, decisions made have direct impact on them. Little is known of the outcome of these decisions: how often were the action plans carried out as formulated; how soon and how well; how often was the child and family left in limbo as the case management get transferred from one case worker to another or one agency to another; what were the waiting time for therapy, for the preferred mode of alternate care... Much could be learned from a **systematic review of MDCC** to benefit children and their families in similar situations.

Although support for the child is the focus, parents especially the perpetrator often need support or treatment. We have yet to have measures in place to mandate treatment for the perpetrator.

Can abuse be prevented to minimise the need for remedial services?

1. Early prevention

¹⁰ Convention on the Rights of the Child. <http://www.ohchr.org/en/professionalinterest/pages/crc.aspx>



There is more awareness that adverse early childhood experiences have life long implications in health and development.¹¹ The Comprehensive Child Development Service (CCDS) started in 2005 is frequently quoted as the panacea of prevention. It is about time to **evaluate CCDS** as to how well it works or otherwise. As a new programme, the at-risk categories may have been narrower than desired. Should they be expanded to include e.g. intimate partner violence? Are families identified through CCDS able to receive appropriate help through the Hospital Authority, Maternal and Child Health Centres (MCHC) and Integrated Family Service Centres (IFSC)? There are two special concerns. One is the failure to engage mothers identified through CCDS who are referred to IFSCs because of the mothers' lack of motivation or insight; the other is the age gap between 18 months when children have completed most of their immunisations to three years when they start kindergarten. With little contact with professionals during this period, those children who would benefit from CCDS may not be identified. There is also the group that do not attend MCHCs for immunisations or check-ups at all. The introduction of home visitation programmes to complement the service should be seriously considered.

There can be a fine line between the risk of abuse and actual abuse. For children in families with particularly high risks such as when the child care is provided solely by an active substance abuser, professionals in difference disciplines should be ready to come together to discuss the welfare plan of the child through case conferences similar to MDCCs to ensure the child receives appropriate care.

2. Child Fatality Review

Since launching the review in 2008 over a hundred recommendations were made on child deaths that occurred 4 to 5 years before each report was published. Many involved recommending public or parental education to which relevant government departments' usual response was to list all such efforts being carried out already. The onus of responsibility of the deaths appears to be laid on the parents. There was little focus on how parents can be empowered and enabled to care for their children. Alleviating root causes through **system changes** were rarely touched upon. The limitations of the current mechanism in preventing child deaths were anticipated in our College's previous submissions to the Legislative Council.^{12 13 14} It is time to evaluate the mechanism itself. We can well learn from other jurisdictions where the limitations identified could be overcome so that professional time and energy used can better prevent child deaths.

3. Serious Case Review

¹¹ Center for Disease Control and Prevention: Injury Prevention & Control; Division of Violence Prevention. ACE Study. <http://www.cdc.gov/violenceprevention/acestudy/>

¹² Hong Kong College of Paediatricians. Child Fatality Review and Child Protection: submission to Panel on Welfare Services of the Legislative Council 14 May 2007

http://www.paediatrician.org.hk/index.php?option=com_docman&task=doc_view&gid=189&Itemid=66

¹³ Hong Kong College of Paediatricians. Child Fatality Review Mechanism: submission to Panel on Welfare Services Subcommittee on Strategy and Measures to Tackle Family Violence 12 June 2008

http://www.paediatrician.org.hk/index.php?option=com_docman&task=doc_view&gid=197&Itemid=66

¹⁴ Hong Kong College of Paediatricians. The Final Report of the Review Panel of the Pilot Project on Child Fatality Review: submission to Panel on Welfare Services of the Legislative council 14 February 2011

http://www.paediatrician.org.hk/index.php?option=com_docman&task=doc_view&gid=202&Itemid=66



Our College proposed Serious Case Reviews along with the introduction of Child Fatality Reviews back in 2008. The reason given for not establishing such reviews then and even recently after a seriously abused 7 year old child known to multiple agencies came to light is that it is difficult to decide what is serious. Again, we can learn from other countries like UK where the system is well established.¹⁵ To understand how our existing system, with all our procedural guidelines and supportive services, is failing our children, there should be no delay in establishing Serious Case Reviews before the next serious case hits the headlines.

Conclusion

The lifetime cost in the United States for one child confirmed to have been abused who survived was US\$210,012 and US\$1,272,900 for the child who died.¹⁶ The human and financial costs are colossal. Supportive services for victims of child abuse should therefore not be examined in isolation with a piecemeal approach. Both the UNC General Comment No. 13 and the United Nations Study on Violence Against Children have comprehensive strategies covering laws, policies, plans and programmes to be supported with human and financial resources together with monitoring and evaluation which no one is taking ownership to oversee in Hong Kong. Children are best protected when all rights of the child under the CRC are realised. We cannot continue to use the Family Council and the Child Rights Platform as shields. Hong Kong needs a **Children Commission** to break through barriers to upholding children's basic rights. We are all disturbed by the amount of violence around the world. The least we can do is to ensure to the best of our ability that our children can grow up in an environment free from violence and learn to resolve conflicts without violence.

¹⁵ HM government. Working together to Safeguard Children March 2015
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf

¹⁶ Fang, X., et al. The Economic Burden of Child Maltreatment in the United States And Implications for Prevention. *Child Abuse & Neglect* 2012;36:156–165. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3776454/>