



Hong Kong College of Paediatricians
香港兒科醫學院
(Incorporated in Hong Kong with Limited Liability)



By Email & By Mail

20 July 2010

Social Welfare Advisory Committee Secretariat
Room 805, 8/F, West Wing
Central Government Offices
11 Ice House Street
Central
Hong Kong

Dear Sir / Madam,

**Response to Consultation Paper on
Long-term Social Welfare Planning in Hong Kong**

The Hong Kong College of Paediatricians, being an advocate for the health and welfare of children, would like to submit our views on the consultation paper as summarized below.

Recognizing the need on preventive and developmental services

We are in full support to this direction. Scientific studies, including economic analysis by Prof J Heckmans, Nobel Prize winner in Economy, clearly demonstrated that capital spent on the young child in need to support early child development is far more effective and beneficial to the society than just giving money to the poor at their later period of life. Based on this rationale, the Comprehensive Child Development Service was started in 2005 to support early development of at risk infants, for example, from teenage mothers or those with drug addiction or psychiatric illness. The services provided in the 3 districts established so far are achieving positive results. The original plan was to cover the whole territory in phases but it appeared that expansion had stopped after involving 3 districts with no explanation as to why the original schedule was not followed. We would like to urge the government to expedite the coverage of the service to all districts of Hong Kong.

Support in early development should not be confined to the very high risk group. Good parenting is important in the development of physical, psychological and social health. On the other hand,



ineffective parenting is associated with child abuse, household injuries and adolescent problems. Some support services for parents who seek help are provided by social welfare agencies. Good parenting is not necessarily an inborn skill but many parents, irrespective of education or income level, are not aware of their needs for such skills or are unable to put the skills into practice. Hong Kong needs to develop strategies towards cultivating good parenting for the entire population, and providing adequate services to those in need, particularly the hard to reach groups.

Family-based approach, respect the rights of children

We agree that many social problems can be traced back to the family. Strengthening relationships and enhancing harmony in the family may reduce these problems. The Government appeared to have provided a solution through the establishment of the Family Council. By now, the Family Council had been established for over 2 years but measurable improvements remain to be seen. Children's well-being is dependent on their parents or carers. At present, a mechanism to protect each child's basic rights to protection, provision and participation is still lacking. Cases of child abuse and neglect are on the increase while we continue to be saddened by the repeated incidents of children killed by their parents who committed suicide at the same time. The under-five mortality per 100,000 has increased from 62.4 in 2004 to 72.3 in 2006 and 77.5 in 2008. The demography of families is changing. Together with the increase in cross-border activities, challenges are indeed many but cannot be left as being "unpredictable". The potential impact and solutions to provide the optimal environment for the development and growth of the child need to be sought. While the Family Council is unable to fully fulfill the function of advancing children's right, the establishment of a Child Commission in Hong Kong is still a necessity.

Towards a more active mode of engagement

The social services provided by the Government are located in Integrated Family Services Centres (IFSC) for those who present to the centres. However, children at risk will not be identified if their parents or carers do not seek help. Social problems are often identified when young children come for immunization or health checks and it is usually easier to engage the at risk families under these settings. Thus, a close liaison between social workers and health care providers will facilitate early intervention to at risk children. Arranging outreach sessions by social workers to Maternal & Child Health Centres is worth considering. Furthermore, we understand that in the present practice



of IFSC, a case is considered closed if the client (the adult rather than the child) refuses the service. When a child is in need or at risk, there should be a mechanism to enable support and intervention even if parents do not actively seek help.

Enhancing professional competence

Considerable training and experience are required to tackle the increasingly complex social problems. Like many other professions, subspecialisation is inevitable in achieving professional excellence. We understand that social workers in government services are routinely rotated over different posts every few years. However, such routine rotation does not favour retention of experienced staff and may even jeopardize the quality of service. The administration should consider reviewing this practice.

Refocusing on long-term planning and outcome

Recognizing the need for preventive and developmental services, it is high time that the Government should have long-term planning in our social services. Though we agree on an evidence-based approach in programme design and service provision, this should not be a constraint that results in preferential development of programmes with short-term outcomes. Programmes with potential for good long-term outcome should also be supported. Instead of creating multiple under-utilized funds to serve specific short term purposes, funding can well be channeled to regularize basic support to enable parents to perform their role.

Commitment from Government

In the proposed strategic directions, the consultation paper emphasized on building capacity of individuals, families and communities to help each other, promoting volunteerism, empowering NGOs and involvement of the business sector. While we support these strategies, they are only supplementary to the responsibility of the Government. In the consultation paper, we could not find any statement of commitment from the Government on meeting the needs of the underprivileged. Reviews of deaths in children due to non-medical causes showed that deficiencies in social services are important contributing factors. The Government should address existing and future deficiencies in social services.



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In conclusion, our College would like our Government to show a stronger commitment in social services, to ensure the rights of the child are upheld, to facilitate developmental and preventive programmes and to adopt a proactive approach in social service delivery.

Yours sincerely,

Professor Pak C Ng
President
Hong Kong College of Paediatricians