

Urgent By Fax

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Clerk to Subcommittee to Study Discrimination
on the Ground of Sexual Orientation
Legislative Council Building
8 Jackson Road
Central
Hong Kong

(Attn: Mr. Stanley Ma)

Dear Mr. Ma,

LegCo Panel on Home Affairs

Subcommittee to Study Discrimination on the Ground of Sexual Orientation

Response to Written Submissions from the Rainbow Action and the Civil Rights for Sexual Diversities on Issues Relating to Medical Services

I refer to your fax dated 11 June 2001. The Administration's response to certain medical service issues raised by the Rainbow Action and the Civil Rights for Sexual Diversities in their written submissions to the Subcommittee to Study Discrimination on the Ground of Sexual Orientation is set out in the Appendix.

Yours sincerely,

(Eric Chan)
for Secretary for Health and Welfare

Use of Electro-Convulsive Treatment (ECT) to Cure Homosexuality

The Submission

The written submission from the Civil Rights for Sexual Diversities enquired whether the Hospital Authority uses ECT or other aversive therapy to cure homosexuality and what control mechanism is in place in regulating non-government organizations in providing such treatment or therapies.

Administration Response

Homosexuality by itself is not a medical disorder that requires medical treatment. Public hospitals will not carry out ECT or other aversion therapy for treatment of homosexuality in the absence of consent of patients. However, individuals who are disturbed by their sexual orientation may require and request counselling and treatment. Under such circumstance, therapy may be offered to clinically indicated patients with their informed consent.

The subvented clinical psychology service provided by social service agencies is monitored by the Social Welfare Department (SWD). SWD does not provide any subvention to social service agencies to conduct aversion therapy or any kind of psychological / psychiatric services with an effect to reverse the sexual orientation of service recipients. We are also not aware that any social service agencies conduct aversion therapy for service recipients. That said, we understand that in delivering clinical psychology service, the clinical psychologists of SWD and other social service agencies may be called upon to help clients with

emotional problems arising from, or associated with, particular sexual orientation through psychotherapy. The provision of such service is not to reverse the sexual orientation, but to deal with the psychological consequences of and the impact of the society on such orientation. The client's choice, with regard to how they should deal with such consequences, is always respected.

Giving Consent to Carry Out Surgery

The Submission

In its written submission, the Rainbow Action raised concern about that a patient's homosexual partner is not permitted to give consent on behalf of the patient to carry out surgery when the patient has lost his/her consciousness.

Administration Response

As a general rule, medical treatment should not proceed without the consent of the patient. According to the Professional Code and Conduct issued by the Medical Council of Hong Kong, consent for treatment should usually be given by the patient himself or by a designated person under specific circumstances.

However, under common law, treatment without a patient's consent (including circumstances whereby a patient is unconscious and unable to give consent) is justified in the case of emergencies if such treatment is in the patient's best interests, such as to save his life, ensure improvement or prevent deterioration of his medical condition, and provided that there is no clear advance refusal from the patient. Where it is not possible to seek consent from the patient, the Hospital Authority

will seek support for the treatment from the patient's family or persons close to the patient, as appropriate.

Staying with Patients Outside Normal Visiting Hours

The Submission

The Rainbow Action raised concern that unlike family members of patients, homosexual people would not be allowed to stay with their partners outside normal visiting hours.

Administration Response

Ward staff in public hospitals would not require proof of a visitor's relationship with the patient. That said, in general, ward staff would only allow one to two visitors to visit a patient. This is to ensure that there will not be too many visitors for one particular patient at any given time if visiting is permitted.