

LegCo Panel on Health Services
Information Paper

Preventive Programmes by Department of Health

Introduction

This paper describes the existing preventive programmes of the Department of Health and reports on the new initiatives to strengthen preventive services to provide lifelong holistic care.

Background

2. Health is a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity. Health is the extent to which an individual is able to satisfy needs, to realize aspirations, to change or cope with the environment. Health is considered a resource, which permits people to lead an individually, socially and economically productive life.

Existing Services

3. Department of Health provides a wide range of disease prevention and health promotion programmes. The aim of disease prevention is to reduce the risk of developing disease and the consequences arising from the conditions which include disability and premature death. It comprises actions that prevent the onset of diseases, halt the progress of a disease once established through early detection and diagnosis, and minimize residual disabilities and complications associated with an established disease. This is achieved through a wide range of health services covering different age groups, from birth to old age, targeted at various communicable and non-communicable diseases. In particular, we have a well-established system to prevent and control communicable diseases. Childhood and school immunization programmes are provided free of charge to cover vaccine preventable diseases including diphtheria, hepatitis B, measles, mumps, pertussis, poliomyelitis, rubella, tetanus and tuberculosis. In 2000, 99% of school children are covered by the immunization programme. Moreover, with the support of the public health laboratories and other service providers, surveillance systems are in place to monitor the trend of communicable diseases like notifiable diseases and influenza. When there is an infectious disease outbreak, investigation and

control measures will be carried out by public health physicians to prevent the spread of the disease.

4. The major services and activities involved in disease prevention are Maternal and Child Health Centres (MCHC) (including family planning), Student Health Service, Women Health Service, Elderly Health Services, School Dental Service, Communicable & Infectious Disease Control, Public Health Laboratory Support Service, Sexually Transmitted Disease Prevention, Special Preventive Programme (AIDS and Hepatitis Control) and Clinical Genetic Service.

5. Health promotion is the process of enabling people to increase control over, and to improve their health. Health promotion embraces actions taken beyond the health sector which are directed at strengthening the skills and capabilities of individuals, as well as actions directed towards changing social, environmental and economic conditions so as to alleviate their impact on public and individual health. The Department of Health conducts health promotion through the provision of advice, training and support to various interested agencies. Moreover, a wide range of health education activities including exhibitions and workshops are conducted. The work is carried out by the Department's Central Health Education Unit, Oral Health Education Unit, Red Ribbon Centre, Regional Health Offices, Tobacco Control Office as well as various service units in their day-to-day contact with clients.

New Initiatives to Strengthen Preventive Services

6. The proposal in the Health Care Reform Consultation Document for Department of Health to adopt the role of an advocate for health and strengthen preventive care has received wide community support. In the Chief Executive's Policy Address 2001, one of the Key Result Areas for Health Services is to advocate the development of a living environment conducive to health and ensure the availability of a lifelong preventive programme promoting health, wellness and self-responsibility. The new programmes provided by the Department of Health are described in the following paragraphs.

(a) Universal Antenatal HIV Screening

7. One of the initiatives pledged in the 2001 Policy Objective Booklet for Health Services was the implementation of universal antenatal HIV screening. An HIV infected mother carries a 15% - 40% risk of transmitting HIV to her baby, and mother-to-child transmission is the main cause of HIV infection in children. The universal antenatal HIV testing programme was launched jointly by the Department of Health and the Hospital Authority on 1

September 2001. Programmes to prevent mother-to-child HIV transmission in the Department of Health include :-

- (i) the provision of antenatal HIV testing to all pregnant women attending the Maternal and Child Health Centres;
- (ii) technical support to the health profession – through the production of education materials (leaflets, posters, videos), development of protocols, organisation of training for the health profession;
- (iii) laboratory support – confirmation to preliminary positive results from any source; and
- (iv) development of guidelines in association with the Scientific Committee on AIDS.

(b) Smoking Cessation Services

8. Another important area of work is tobacco control. Smoking is the largest single preventable cause of death and disease. The Government's established policy on tobacco control is, through a step-by-step approach, to discourage smoking, contain the proliferation of tobacco use and protect public from passive smoking to the maximum extent possible.

9. The Tobacco Control Office, under the Department of Health, was established in February 2001 to enhance and co-ordinate the Government's anti-smoking efforts. To enhance the smoking cessation service, nicotine replacement therapy has been introduced in four general out-patient clinics since September 2001.

(c) Parenting Programme

10. The family as a basic social unit has a pervasive influence over the psychological, physical, social and economic well being of the child, especially during the formative years before birth to age 5. Through knowledge/skill transfer as well as modeling on health-promoting practices of adults, children learn to make healthy life choices and become self-reliant as they grow up. Empowerment of the family through parenting education and community support in undertaking this vital function is a prime concern of society.

11. The Family Health Service, through 50 MCHCs, provides a comprehensive range of health promotion and disease prevention services for

children aged below six and women of reproductive age. The MCHCs are progressively incorporating elements of parenting education to increase the child carers' competence and confidence in raising children. A territory-wide parenting programme, which aims at equipping parents with the necessary knowledge and skills to bring up happy and well-adjusted children, will be implemented in 2002-03. The parenting programme will focus on developing a positive relationship between parent and child, encouraging desirable behaviour and using effective discipline methods in managing misbehaviour. The plan is to give basic and essential parenting information to parents of all newborn children attending the MCHCs, and to provide more intensive training and support to parents who encounter difficulties in parenting.

(d) Adolescent Health Programme

12. Adolescence is a period of transitions including physical, psychological, social, intellectual and spiritual aspects. Adolescence is also the time when various health-compromising behaviours begin to set in. The prevalence of such at risk behaviours, such as smoking, alcohol use, substance abuse and pre-marital sex, are on a rising trend. Juvenile delinquency and suicide among teenagers have also become problems of increasing concern. These phenomena reflect that the psychosocial health status of our adolescents is at stake.

13. To address the above issues, Student Health Service has set up a new Adolescent Health Programme to promote and improve the psychosocial health of adolescents. A multidisciplinary team comprising doctors, nurses, clinical psychologists, social workers and dietician has been set up to conduct programmes for adolescents, their parents and teachers in secondary schools. The objectives and targets of the adolescent health programme are :

- (i) To enable adolescents, parents and teachers to understand the adolescents' physical, psychosocial, emotional, and intellectual changes and needs so that adolescents can build up proper self-image and self esteem.
- (ii) To enable adolescents to interact effectively with other people including peers, parents, siblings, and teachers and establish a wider social circle and understand their roles in order to prepare themselves to take part in the society.
- (iii) To enable adolescents to set up realistic life goals where they can find satisfaction and contribute to the family and society.

- (iv) To enable adolescents to realize, locate, and effectively handle problems so that they can face various challenges in their life courses.
- (v) To enable adolescents to realize and attain personal growth.

14. The pilot adolescent health team was set up in June 2001. We aim at outreaching to 18 secondary schools in the 2001-2002 school year. Two types of programmes will be offered in the first year, namely, the Basic Life Skill Training Programme for Form 1 students and the topical programmes for Forms 1 to 7 students, teachers and parents. We plan to set up another 17 teams by 2003-04 to gradually cover all secondary schools in Hong Kong.

(e) Men's Health Programme

15. A gender health gap exists in Hong Kong, as in other places in the world. For example, the average newborn male has a shorter lifespan than an average newborn female (77 years vs. 82 years). Besides inherent biological differences, this gender gap is attributable to many factors, including lifestyle practices (e.g., smoking, diet, alcohol, substance abuse), risk-taking behaviors (speeding, violence), occupational hazard exposures, awareness of health information, health services utilization, practice of preventive health care, stress and social support. Because of such differences, a gendered approach to the planning and provision of preventive health care will be useful.

16. To improve the health and well-being of the male population, the Department of Health is planning a pilot Men's Health Program in 2002. Unlike most other similar men's programs in Hong Kong which address only male-specific diseases such as sexual dysfunction, the Men's Health Program will take a holistic approach. In other words, the Men's Health Program will cover the most important diseases and conditions that affect men's health (e.g. cancer, heart diseases, diabetes mellitus, mental and psychological health) and tackle the underlying risk factors leading to poor health (e.g. smoking, unhealthy diet, obesity, sedentary lifestyle, substance abuse). To a lesser extent, it will also address male-specific diseases and conditions.

17. The Men's Health Program will target at prevention of diseases rather than treatment. Health messages will be presented in a way to achieve maximum impact on the male audience and will be delivered through multiple channels. Our plan includes a media campaign to increase men's awareness of their health, the construction of a Men's Health Website, a Men's Health Hotline, plus an array of publicity materials to promote men's health. We will also organize community health promotion activities that target at men and

places where men congregate. We will work with and support other local organizations specialized in men's health to strengthen preventive health services for men.

18. The ultimate goal of the Men's Health Program is to improve the health and quality of life of men in Hong Kong. With better health among men, there will be better social harmony and economic productivity as well.

Cervical Cancer Screening

19. Cancer of the cervix is the 4th most common cancer and the 7th leading cause of cancer deaths among women in Hong Kong. In 1999, there were 436 new cases of cervical cancer, and 159 women died of the disease. Approximately two-thirds of new cases and one-half of deaths occurred in women aged under 65 years.

20. Cervical cancer is one of the most preventable cancers. The effectiveness of an organized, population-based cervical screening program in reducing invasive cervical cancer incidence and deaths has been well documented in many countries. We expect that, with proper planning and implementation, the coverage of cervical screening among women can be improved substantially in Hong Kong.

21. A Cervical Screening Task Force has been appointed by the Director of Health in December 2001 to design, oversee, implement, and evaluate the cervical screening program to be launched in 2003-04. The Task Force consists of esteemed local experts from professional Colleges and universities, major providers such as the Family Planning Association, as well as non-government organizations like the Hong Kong Cancer Fund. The Task Force has met the first time in January 2002 and has developed a work plan. Major initiatives include devising effective education and recruitment strategies, setting up quality management standards, and building an information system to facilitate program operation. There will be private sector participation in delivering the program.

Way Forward

22. The above initiatives will contribute to the attainment of our health services policy objective. We seek to develop an environment conducive to health and provide services to enable individuals to prevent diseases and remain healthy, so that they may fully develop their potentials. Step by step over the next few years, the Department of Health will re-engineer its services into a life

course approach, strengthened and expanded to enable a wider coverage in the community, and new services added to enrich the comprehensiveness of the health promotion programme.

23. Members are invited to note and comment on the above new initiatives.

Department of Health
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