

**立法會**  
***Legislative Council***

**Meeting of LegCo Panel on Welfare Services on 13 May 2002**

**Background paper prepared by Legislative Council Secretariat**

**Elderly Suicide**

**Purpose**

This paper gives a brief account of a motion debate held, and questions raised, at Council meetings relating to the issue of suicide since 1999. To date, no discussion has been held by the Panel on Welfare Services (the Panel) specifically on the issue of suicide, including elderly suicide.

**Motion debate held at Council meeting**

2. A motion debate on preventing and reducing suicide was moved by Hon Michael MAK Kwok-fung at the Council meeting on 21 June 2001. The wording of Mr MAK's motion, as amended by Hon CHOY So-yuk, and carried at the Council meeting, is as follows -

"That, as the problem of suicide has become serious in Hong Kong in recent years, this Council urges the Government to set up a task force for formulating effective strategies to prevent and reduce suicide, which include -

- (a) allocating more resources to enhance the counselling services provided by the Social Welfare Department and various social welfare agencies;
- (b) enhancing publicity and education in order to instil in members of the public, particularly the young people, the positive values of cherishing their lives; and

- (c) strengthening various studies on the problem of suicide, such as the causes of suicide, the backgrounds and psychological conditions of the people who committed suicide and the act of copycat suicide, and using them as the basis for formulating the relevant strategies."

### **Questions raised at Council meetings**

3. Two oral and one written questions relating to the issue of suicide had been raised respectively by Hon LEUNG Yiu-chung, Hon WONG Sing-chi and Hon Michael MAK Kwok-fung at Council meetings. The questions raised by Hon LEUNG Yiu-chung and Hon Michael MAK Kwok-fung sought information on statistics of suicide cases. Only part (c) of the oral question raised by Hon WONG Sing-chi on pledges for the elderly at the Council meeting on 23 January 2002, reproduced as follows, was focused on elderly suicide -

"As the suicidal rates among the elderly from 1998 to 2000 were higher than those of other age groups, whether the Administration has assessed if it has not effectively promoted the concept that "old age is the golden age in life", and has therefore failed to achieve the objective of fostering a feeling of health and worthiness among the elderly".

4. In reply to the above question, the Administration said that it believed the following measures would not only help to address the problem of elderly suicide, but would also contribute to foster a feeling of health and worthiness among elders

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- (a) A three-year campaign launched by the Elderly Commission (EC) in 2000 to promote active and healthy ageing among the community;
- (b) Setting up 18 elderly health centres and 18 visiting health teams in all administrative districts to provide preventive and promotive medical services to elders;
- (c) Setting up 36 support teams for the elderly to reach out and network vulnerable elders;
- (d) Encouraging senior volunteerism and lifelong learning among elders so that elders could achieve a sense of worthiness as they aged;
- (e) A four-year "Opportunities for the Elderly Project" launched by the Social Welfare Department (SWD) in 1999 to finance community

projects and sustain community participation in promoting healthy ageing and a sense of health and worthiness among elders;

- (f) A three-year "Joint Project on Prevention of Elderly Suicide" organised by SWD, the Hong Kong Council of Social Service and the Hong Kong Psychogeriatric Association to provide hotline services, volunteer visits, casework counselling and consultation services with general practitioners for elders at risk;
- (g) Launching an "Elderly Suicide Prevention Programme" by the Hospital Authority by late 2002 to provide multi-disciplinary services to elders with mental illness and suicidal tendency;
- (h) Enhancing home and community care services and re-engineering existing services to benefit more frail elders who preferred to age at home;
- (i) Continued development of a sustainable and quality residential care system with participation from non-governmental organisations and the private sector;
- (j) Strengthening support to family carers by involving more service units in delivering carer support services, including respite services;
- (k) Enhancing training for care workers and professional staff; and
- (l) Reducing the average waiting time of elderly singletons who wished to live by themselves in public rental housing to two years by 2005.

### **"A Multi-Disciplinary Study on the Causes of Elderly Suicide in Hong Kong"**

5. On the advice of EC, the Health and Welfare Bureau had commissioned the University of Hong Kong and the Chinese University of Hong Kong to carry out "A Multi-Disciplinary Study on the Causes of Elderly Suicide in Hong Kong". The Study was completed recently and the Administration would present a paper on the subject at the Panel meeting on 13 May 2002. According to the findings of the Study, elderly suicide rate in Hong Kong decreased in 1998 and 1999 and remained stable in 2000. The gap between elderly suicide rates and overall suicide rates had also narrowed. The relevant statistics are as follows -

<u>Year</u>	<u>Elderly Suicide Death Rate(1)</u>	<u>Overall Suicide Death Rate(2)</u>
1994	35.8	12.9
1995	31.6	12.9
1996	26.2	11.1
1997	29.5	12.0
1998	29.2	13.2
1999	26.3	13.1
2000	26.3	13.2

Note (1) : Per 100 000 elderly population

Note (2) : Per 100 000 population

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