

For discussion on  
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Paper No. CB(2)1104/02-03(03)

## **Legislative Council Panel on Welfare Services**

### **An Update on Strategy and Measures to Prevent and Tackle Family Violence**

#### **Purpose**

At its meeting held on 11 March 2002, Members discussed the Administration's strategy and measures to prevent and tackle family violence vide Panel Paper No. CB(2)1265/01-02(05). This paper updates Members on the progress made and recent developments, some of which are based on comments and suggestions made by Members during the last discussion.

#### **Updated Statistics**

2. According to the latest statistics for 2002, there has been an increase of 25% in the number of newly reported battered spouse cases as compared with 2001. There were a total of 3 034 newly reported battered spouse cases in 2002 while 2 433 cases were reported in 2001. On the other hand, 520 newly reported child abuse cases were recorded in 2002, representing a drop of 3% as compared to the number of 535 in 2001.

#### **Multi-disciplinary Collaboration**

3. To further enhance multi-disciplinary collaboration for helping families suffering from family violence, efforts have been made to improve the existing mechanism in various areas.

#### Guide to Participants of the Multi-disciplinary Case Conference on Child Abuse (Guide)

4. It is an established practice to convene multi-disciplinary case conference (MDCC) on suspected child abuse case which is a forum for the related professionals to exchange views on the nature of the case and work

out an appropriate welfare plan for the protection of the child. To facilitate the professionals to participate in the MDCC, a Guide was provided in the “Procedures for Handling Child Abuse Cases – Revised 1998”. In view of the growing concerns raised by parents on a number of issues such as the functioning of the MDCC, the decision-making process and the role and participation of parents in the MDCC; as well as the need to enhance co-operation among the helping professionals, the parents and the child, the Guide was revised following a thorough review of the functions and operation of MDCC and extensive consultation with departments and professional groups concerned. Upon the endorsement of the Committee on Child Abuse, the revised Guide was implemented in July 2002 after a series of briefing sessions and workshops organized for related professionals.

5. The improvement measures set out in the revised Guide include-

(a) ***Promoting family participation***

Parents who are not the abusers are invited to attend the whole MDCC as far as practicable so as to enhance their understanding on the issues of concern and enlist their involvement in the formulation and implementation of the welfare plan. This arrangement can help to empower the parents and solicit their co-operation in the protection of their child(ren).

(b) ***Differentiating members into full members and persons in attendance***

In the past, some members who were less involved in the child abuse cases being discussed expressed difficulty in giving comments on the nature of the case and whether the welfare plan was to the child’s best interests. The difficulty would be aggravated if the suspected abuse incident occurred in their institutions and they might be seen to have a conflict of interest in their role or in maintaining impartiality. To address these concerns and to encourage the contribution of related professionals in the assessment of the risk of the child and formulation of welfare plan, the arrangement of membership was revised in the Guide such that the professionals may be invited to

take part in the MDCC as full members or persons in attendance. Full members refer to those who have played a major role in the investigation of the child abuse case while professionals who are not involved in the investigation of the case can be invited to attend the MDCC as persons in attendance for sharing particular information or advice on the case on need basis.

(c) ***Pre-conference preparation and post-conference management***

More specific guidelines on the arrangement of briefing on the MDCC for the family members and review conference among the professionals are developed to facilitate working with the family members and co-operation among the professionals before and after the MDCC.

Multi-disciplinary Guidelines on the Handling of Battered Spouse Cases (the Guidelines)

6. The Guidelines which were issued in 1996 are being revised taking into account the views contributed by members of the Working Group on Combating Violence (WGCV). Apart from updating the information on the services available for battered spouse cases, the needs of the batterers and other family members including children witnessing domestic violence will be highlighted in the revised version. The arrangement of case conference for specific cases will also be included. Besides, guidelines for other related sectors (e.g. Housing Department, schools) will be covered to facilitate them in identifying battered spouse cases and referring the families for appropriate services. We expect these revised Guidelines to be ready for issue by mid 2003.

Referral of Family Violence Cases for Welfare Services Without the Consent of the Victims

7. Based on legal advice and the views of the Privacy Commissioner for Personal Data (Privacy Commissioner), the Police and SWD have strengthened the referral mechanism to facilitate the Police to refer domestic violence cases to SWD for intervention in the absence of the consent of the victims/alleged offender. The referral mechanism has been

implemented since 1 January 2003. With this mechanism in place, the Police would refer cases classified as crime or dealt with by court proceedings/binding over applications to SWD without the consent of the victim/alleged offender/child(ren). For cases not falling under these categories and without the consent of the victim/alleged offender/child(ren), the Police may also refer them to SWD by applying exemption under Section 58(2) of the Personal Data (Privacy) Ordinance (PDPO) if there is reasonable ground to believe that failure to disclose the subject's personal data to SWD would likely prejudice the prescribed purposes specified in Section 58(1) of the PDPO --

- (a) the prevention or detection of crime (Section 58(1)(a)); and/or
- (b) the prevention, preclusion or the remedying (including punishing) of unlawful or seriously improper conduct, or dishonesty or malpractice by persons (Section 58(1)(d)).

8. In light of the revised referral mechanism, and to achieve even better service quality and to ensure that all parties, including persons with mental problems, can be catered for, the Police have also completed a comprehensive review on the Police procedures for handling domestic violence which have been promulgated in January 2003.

9. As some cases at risk of family violence may be first known to other organizations such as housing estate offices and hospitals, SWD has also sought the advice of the Privacy Commissioner on the provisions of exemption from the Data Protection Principle 3 under the PDPO to facilitate any concerned party to make referral of needy cases to SWD or non-governmental organizations (NGOs) for rendering timely welfare support to the data subjects and/or their family members even without the consent of the data subjects. The Privacy Commissioner has advised that the exemption provisions under Sections 58 or 59 of the PDPO may be applied subject to certain conditions. However, it is noted that the provision of exemption under Section 59 applies only to personal data relating to the physical or mental health of the data subject but no other information (e.g. address, telephone number, etc). Since the application of exemption requires the referring organizations' judgment on a case-by-case basis and may have implications on the personal right of the victims, SWD will, in consultation

with the WGCV, revisit this issue after reviewing the experience of implementing the referral mechanism between the Police and SWD mentioned in paragraph 7 above, with a view to developing a set of guidelines.

#### Development of Website and Booklet on Victim Support Services

10. Upon the endorsement of the WGCV, a website and a booklet will be developed to promote the services available for the victims of spouse battering, child abuse and sexual violence, and facilitate the access/sharing of information among the helping professionals especially frontline workers handling these cases. The website which will be attached to the homepage of SWD will be hyper-linked to other relevant websites and homepage such as the government information website and homepages of NGOs. It will continuously be updated to provide a comprehensive list of resources/services/training opportunities available. The booklet will provide information similar to the content of the website and will serve as useful reference material for those who have difficulty in gaining access to computer. We hope to have the website in operation by mid 2003.

#### Housing Assistance

11. Conditional Tenancy is a form of housing assistance under the Compassionate Rehousing Scheme to assist battered spouses with dependent children on divorce proceedings in resolving their genuine and imminent housing problems. To strengthen support for victims of domestic violence, agreement has been reached between SWD and the Housing Department (HD) to extend the Conditional Tenancy Scheme with effect from 29 November 2001 to cover victims of domestic violence on divorce who have no offspring or bring along no dependent children when leaving their matrimonial homes. In 2002, SWD has also revised the guidelines for processing applications for Compassionate Rehousing. More flexibility has been built in the criteria to help certain needy groups including single parents with dependent children striving for self-reliance. During the period from January 2002 to October 2002, more than 150 cases involving domestic violence were recommended for Conditional Tenancy and Compassionate Rehousing.

12. Apart from Compassionate Rehousing, social workers of SWD may also be requested by HD to make recommendations for various forms of

housing assistance, such as splitting of household and house transfer for needy public rental housing tenants including those who suffer from family problems or domestic violence. The referral mechanism between the two departments in handling such applications has also been streamlined to speed up the application process. While splitting of household and house transfer remain the purview of HD, under the new practice, social workers who refer their known cases to HD will highlight in the referral the social and/or medical circumstances leading to the need for housing assistance so as to facilitate the consideration of HD and accelerate the decision-making process.

13. Regarding the housing arrangements for Public Rental Housing (PRH) divorcees, HD will not normally offer an additional PRH unit to a divorced couple to uphold the principle of rational allocation of public housing resources. The divorced couple is expected to make their own housing arrangement regarding the disposition of the PRH tenancy. If an agreement cannot be reached by both parties on the public housing tenancy, the divorced party who is awarded the child custody upon completion of divorce proceedings will be allowed to stay in the PRH flat whereas the singleton party will be required to move out. If the latter is faced with genuine hardship to find an alternative accommodation, HD may arrange for him/her a 1-person unit in the Interim Housing in the New Territories should he/she pass the Comprehensive Means Test (CMT) and the Domestic Property Test (DPT). He/she will be granted a credit waiting time up to a maximum of three years if he/she applies for PRH under the Single Person Waiting List. Separate housing units will be allocated if both divorced parties have been awarded split custody of the children, or the tenancy consists of other relatives, subject to their passing the CMT and the DPT. Whenever justified, a battered spouse can apply for transfer to a flat of another estate to stay away from his/her former spouse after being favoured with the PRH tenancy. For the period from 1 January 2002 to 30 September 2002, 689 divorced households were approved for re-arrangement of their tenancies without allocation of additional PRH units, whereas separate PRH units were offered to another 131 divorced households.

### **Multi-disciplinary Training**

14. As a means to improve the human-ware and to enhance multi-disciplinary collaboration in combating violence, SWD has conducted

different training programmes for social workers and some of the programmes also catered for other professionals. During the period from April 2002 to January 2003, over 1 200 professionals of various disciplines including social workers, police officers, medical officers, teachers etc. have attended 29 programmes conducted by local trainers and overseas experts.

### **Three-pronged Approach**

15. As reported in the last meeting, the Government has adopted a three-pronged approach to provide a continuum of preventive, supportive and specialized services at primary, secondary and tertiary levels to prevent family problems and to deal with them when they arise. Some of the developments achieved under this approach with the joint effort of Government departments and NGOs over the past months are highlighted below.

#### Publicity and Community Education

16. The publicity campaign on “Empowering Families to Face Challenges”, launched in December 2001 with the aims of promoting positive values towards life, strengthening families and enhancing people’s resilience in coping with stress was completed in July 2002. Including in the campaign were 2 kick-off ceremonies, 10 radio programmes, 8 TV docudramas, radio and TV Announcement of Public Interest (API), promotional leaflets and posters, as well as district programmes. Over 30 000 participants took part in the kick-off ceremonies and district programmes and about 120 calls were received in response to the radio programmes. To further promote the themes of the Campaign, a booklet reporting the activities and cases facing the challenges has been produced and distributed to the public.

17. Another publicity campaign entitled “Strengthening Families and Combating Violence” (formerly named as “Strengthening Families and Protecting Children against Abuse and Violence”) has been launched since August 2002 under the steering of a Working Group convened by SWD and comprising representatives from the Information Services Department and NGOs. The objectives of the Campaign are to promote public awareness on the importance of prevention and seeking timely and early assistance, equip individuals with knowledge and skills in handling challenges, restore proper value/attitude towards violence in the family and community, and instill the

concept of family care as a source of support in meeting life challenges. A variety of territory-wide and district programmes e.g. slogan and poster competitions, production of TVAPIs, radio series, “In Search of Resilient Family Members”, etc. have been conducted or being planned. Moreover, in order to create a greater and long-lasting impact of the Campaign, SWD is arranging display of roadside banners, plywood boards and posters in designated spots in all District Council districts with the assistance of the Lands Department and Housing Department. In designing these banners, boards and posters, reference will be made to the messages and artwork selected from the winning entries of the slogan and poster competitions as well as information on the resources available to facilitate people in seeking help when facing problems.

18. Since July 2002, SWD has also implemented a community-wide volunteer movement “Campaign Evergreen” to call for cross-sectoral collaboration in promoting positive life values and showing mutual care and concern through sharing of life experience by volunteers/social dignitaries.

19. Apart from the “Campaign Evergreen”, the Community Investment and Inclusion Fund (CIIF) which is set up to build social capital through encouraging mutual concern and aid among people, developing community support network and promoting community participation, has allocated \$8.9 million to 12 projects which are selected from the first batch of 227 proposals submitted to the CIIF. The foci of these selected projects include empowering and building up the capacities of marginalized service recipients to become contributors to the society, strengthening community support networks, encouraging cross-sectoral collaboration, as well as adopting a novel approach in supporting the disadvantaged. Project beneficiaries include a wide spectrum of the community including single parents, new arrivals, the unemployed, the elders, young people, ex-mentally-ill patients and inexperienced mothers etc.

20. The Department of Health has implemented by phases a new Parenting Programme in Maternal & Child Health Centres (MCHCs) since September 2002. The Universal Programme aims at equipping parents of all children attending MCHCs with the necessary knowledge and skills to bring up healthy and well-adjusted children. Parents of all children (with a focus on 0-3 years) attending MCHCs will receive anticipatory guidance in



parenting, which is appropriate to the ages of the child, through comprehensive information leaflets, workshops and/or individual counselling. Parents of children with early signs of behaviour problems or those who encounter difficulties in parenting, will be given more intensive training on parenting skills at the MCHCs. Parents are taught how to build a positive parent-child relationship, encourage desirable behaviour and use effective and non-violent methods to manage child behaviour. Children with established behaviour problems or those with more complicated family issues will be referred for specialist management.

### Improved Accessibility to Services

21. To facilitate the needy in seeking early assistance to prevent deterioration of their emotional or family problems, an additional funding of \$1 million was provided to the Family Crisis Support Centre (FCSC) in May 2002 for enhancement of its hotline service such that a total of 8 lines (including 3 warm lines answered by trained volunteers) are available to provide immediate counselling or support to persons in emotional distress or family crisis. An average of 1 200 calls have been received by its 24-hour hotline per month since its coming into service in November 2001. Arrangement has also been made in April 2002 to enable the Samaritan Befrienders Hong Kong to flexibly deploy the crisis workers of the Suicide Crisis Intervention Centre (SCIC), which was set up with the support of Lotteries Fund Grant on a three-year pilot project basis, to assist in manning the agency's non-subsidized hotline service. Besides, SWD is lining up the dedicated suicide prevention agencies to devise plans in strengthening volunteers training in support of the hotline services.

22. In view that both the FCSC and SCIC provide round-the-clock crisis intervention, while SWD also provides hotline service through its Departmental Hotline Service Unit with the back-up of 24-hour emergency rosters on the handling of battered spouse/child abuse cases and psychiatric emergency cases, measures have been worked out to develop close interfacing between these services. Under the new arrangements, which have been implemented since end of January 2003, co-ordinated efforts are made by the SWD, FCSC and SCIC to provide emergency outreaching and crisis intervention to the needy individuals/families on a 24-hour basis throughout the year.

23. To promote the service users' accessibility to services, the 15 pilot Integrated Family Service Centres (IFSCs) and some of the family services centres have also extended their service hours to make services available in weekday evenings, Saturday afternoons/evenings or Sundays. Besides, the medical social services units operated by SWD at six major hospitals with Accident and Emergency Departments namely Queen Mary Hospital, Pamela Youde Nethersole Eastern Hospital, Queen Elizabeth Hospital, Tuen Mun Hospital, Princess Margaret Hospital and Prince of Wales Hospital will also extend their service hours to 8:00 p.m. (on weekdays) and 3:00 p.m. (on Saturdays) starting from 1 April 2003.

#### Supportive Services

24. A total of 15 pilot IFSCs projects with an in-built evaluative study by the University of Hong Kong have been implemented for two years since 1 April 2002 in 13 SWD administrative districts, involving 11 NGOs and SWD units. Although the effectiveness of this new service delivery model has yet to be assessed, the IFSCs have strengthened their networking and outreaching functions to facilitate early identification of problems and provision of early intervention to individuals and families. Up to December 2002, over 3 300 users were engaged through outreaching/networking. Besides, over 8 900 intensive counselling cases and 6 400 brief and supportive cases were served and 2 300 groups and programmes were conducted.

25. Child abuse victims or children witnessing domestic violence who are not suitable to return to their homes and need residential placement will best be placed in a family setting in the community, instead of being placed into institutions. Resources of \$11.17 million have been secured to introduce 60 additional foster care and 30 emergency foster care places in 2002-03, and a further 60 foster care places in 2003-04 to cater for the vulnerable children in need of care or protection.

#### Specialized Services and Crisis Intervention

26. In order to further enhance the effectiveness and efficiency in family and child protection work, the Family and Child Protective Services Units (FCPSUs) of SWD which used to be responsible only for handling child

abuse and battered spouse cases have been restructured through amalgamation with the former Child Custody Services Units since 25 March 2002 to form five regional-based specialized units to provide integrated services for families with the problems of child abuse, child custody and spouse battering. The restructuring of the FCPSUs has facilitated the pooling of the manpower, knowledge, skills and expertise required in working with abused children, families suffering from spouse battering, and children witnessing/distressed by spouse battering and marital breakdown of parents. Besides, to strengthen supervisory support and promote service specialization, each restructured FCPSU is now headed by one supervisor with the additional provision of three Senior Social Work Officers. With the additional 42 frontline social workers provided since April 2000, the FCPSUs are operated by a total of 105 professional workers (excluding the Senior Social Work Officers) of whom 95 are senior practitioners at the Social Work Officer rank.

27. Continuous effort is being made to improve the services of FCPSUs in different areas. To facilitate assessment of risk and intervention, a set of assessment tool has been developed with the joint effort of clinical psychologists and a co-worker approach is adopted in handling complicated cases (two workers pairing up to serve one family). Also, with the creation of two additional clinical psychologist posts and the setting up of a specialized team of clinical psychologists handling domestic violence cases, FCPSUs have, in collaboration with the clinical psychologists, enhanced treatment of victims, batterers and children witnessing domestic violence through group work services besides casework intervention. During the period from April 2002 to January 2003, 17 groups were organized for 226 participants with positive feedback. Moreover, FCPSUs will strengthen the networking with NGOs such as Single Parents Centres and NGOs involved in handling domestic violence by launching joint projects (e.g. parallel group for parents and children witnessing domestic violence, publicity programme on prevention of domestic violence etc.) so as to optimize the use of existing resources to prevent and handle family violence.

28. Since treatment of batterers is very important for stopping family violence and most of the batterers in spouse battering cases are men, there have been increasing services for male batterers. Apart from the groups or hotlines for men provided by FCPSUs and NGOs, an additional men's hotline has been set up by the Po Leung Kuk, the NGO operating the fourth refuge centre, since November 2002 and counselling groups for male batterers will also be organized.

29. Upon commencement of full operation of the FCSC in March 2002, a total of 296 women, 114 men and 105 children have been admitted for temporary accommodation as at end of November 2002. Outcome measurements such as whether the service users have satisfactorily overcome the immediate crisis and regain emotional control, whether the service users have reduced occurrence of crisis, etc. have been put in place to evaluate the effectiveness of the service of the FCSC. Up to end of September 2002, more than 90% of the service users having used the temporary accommodation facilities indicated positive response in overcoming the immediate crisis with emotional control regained upon leaving the FCSC.

30. The fourth refuge centre for women which is operated by the Po Leung Kuk has commenced full operation at its permanent base providing 42 places since 16 December 2002. Up to end of November 2002, a total of 78 women and 69 children have been admitted to the refuge centre operating from a temporary site. Based on the feedback given by the abused women upon their discharge from the refuge centre, all of them were satisfied with the services provided and nearly 99% of them have acquired the basic skills in protecting and planning for themselves and the children.

31. The SCIC of The Samaritan Befrienders Hong Kong (SBHK) has commenced full operation since September 2002 to provide round-the-clock outreaching, crisis intervention/intensive counselling to persons in crisis situation and at high/ moderate suicidal risks. Together with the NGO's hotline service and the Life Education Centre which was set up in May 2002, the SBHK has formed a three-pronged approach to combat the problem of suicide through the provision of preventive education, hotline for brief counseling, befriending, referral etc., and crisis intervention.

32. Up to end of November 2002, SCIC has handled 150 cases with high/moderate suicidal risks and has conducted 178 outreaching/on-site visits. The number of suicide cases for the middle age group (i.e. 30-49) accounts for 60% of the caseload; whereas the nature of problems reported include relationship problems, financial problems and emotional problem etc.

## **Research**

33. SWD has supported the Centre for Criminology at the University of Hong Kong to conduct a study on homicide-suicide in Hong

Kong with a grant of \$0.93 million from the Lotteries Fund. The study has commenced since November 2002 and is scheduled to be completed in two years. It aims at examining the macro and situational factors leading to homicide-suicide that are unique to Hong Kong and strengthening preventive measures and intervention strategies to combat lethal and domestic violence. A qualitative retrospective follow up of the homicide-suicide cases identified during the period from 1989 to 2002 will be made to obtain further information about each case in order to better understand how the death event unfolded and how the affected individuals and families and agencies interacted. The study will also develop an assessment tool for frontline social workers to identify high risk cases, and provide training to social workers on the use of the assessment tool and to enhance their knowledge and skills in handling cases with potential risks of homicide-suicide.

34. With the support of another Lotteries Fund grant, tertiary institutes have been invited to submit proposals before 21 February 2003 to carry out a study on child abuse and spouse battering in the following areas:

- (a) prevalence of the problems,
- (b) profiles of the victims and perpetrators ; and
- (c) elements contributing to effective prevention and intervention (including, inter alia, whether the provision of legislative measure, e.g. the Domestic Violence Ordinance can facilitate prevention and intervention, and the feasibility and implications of adopting mandatory treatment of perpetrators in Hong Kong).

35. The study will help to enrich our understanding of family violence in Hong Kong and facilitate formulation of strategies relating to prevention and intervention. The tertiary institute to be commissioned will also be required to develop assessment tool(s) to facilitate early identification of cases at risk of child abuse and spouse battering for timely intervention, and to provide training for the frontline professionals on the use of the tools. The whole study together with the development of the assessment tools will take two years to complete.

### **Enhancement of Information Systems**

36. At present, statistics on battered spouse and child abuse cases are captured by the Central Information System on Battered Spouse Cases (CISBS) and the Child Protection Registry (CPR) respectively. Action is under way to enhance these two information systems. The database of the CISBS will be expanded to include information on sexual violence cases and more data on battered spouse cases (e.g. occupation of the victims and

batterers, years of residence of the batterers etc.). The enhancement of the CPR includes the improvement of the computerized programme and the revision of the data input form for collecting more specific information on child abuse cases (e.g. contributing factors of the child abuse incidents). The enhanced systems are scheduled to be implemented around mid 2003.

### **Legal Concerns**

37. The Government has noted the proposals from different parties to amend the Domestic Violence Ordinance (DVO), such as to widen the coverage and scope of protection (to cover all family members and different types of family violence) etc. The study on child abuse and spouse battering mentioned in paragraphs 34 and 35 above will, inter alia, identify possible areas of improvement including those that may be related with legislation. Relevant statistics from the Judiciary are also being collected to assess the effectiveness of the existing legal remedies under the DVO. This will shed light on the way forward, before we consider embarking on an evidence-based legislative review.

38. Separately, the sub-committee of the Law Reform Commission has been finalizing its proposals on family dispute resolution process as well as access and custody, having regard to the outcome of the consultation exercise and recent overseas developments in the area. The Administration would consider the recommendations upon receipt of these reports.

### **Way Forward**

39. Members will note that the concerned departments have made considerable efforts in developing and enhancing services to combat family violence in the past few months. However, we need efforts of all in the community to help build a society free from family violence. While we look forward to the findings of the studies mentioned in paragraphs 33 – 35 above for identifying future direction of prevention and intervention strategies, we shall continue to adopt and strengthen the three-pronged approach in collaboration with parties concerned. Protection of families and children will remain a key priority of the Government.

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Health, Welfare and Food Bureau / Social Welfare Department