

**Legislative Council Panel on Security**  
**The Latest Drug Abuse Situation and Anti-drug Strategies**

**PURPOSE**

This paper briefs Members on the latest drug abuse situation and anti-drug strategies to tackle the drug problem.

**CURRENT ANTI-DRUG POLICY**

Formulation of the Policy

2. The current anti-drug policy is embodied in the “five-pronged” approach - law enforcement and legislation, treatment and rehabilitation, preventive education and publicity, research and external cooperation. It has been drawn up on the advice of the Action Committee Against Narcotics (ACAN) and its sub-committees, with members coming from various fields including youth, social work, medicine, academia and Legislative Council Members.

3. Following extensive consultation with the anti-drug sector<sup>(1)</sup>, we promulgated the Fourth Three-year Plan on Drug Treatment and Rehabilitation Services in Hong Kong (2006-08) in March 2006, which maps out the strategies of drug treatment and rehabilitation services Hong Kong should take in 2006 to 2008.

4. We also keep in touch with anti-drug workers from subvented and non-subvented centres, youth groups, social welfare organisations and drug education experts through the Drug Liaison Committee.

Implementation

5. We have taken and will continue to take vigorous

---

<sup>(1)</sup> A working group led by the Chairman of the Sub-Committee on Treatment and Rehabilitation was set up to develop the Plan. The Hong Kong Council of Social Services organised two consultation sessions with frontline anti-drug workers in 2005 to gather views direct from the service sector. ACAN and DLC were invited to provide ideas and comment for the Plan.

enforcement actions against drug-related crimes and tackle the problem at source. Legislation is updated to reflect the emergence of new drugs or changing drug trends as appropriate.

6. Different modalities of treatment and rehabilitation are encouraged. Professional training for anti-drug workers has been included as one of the priority areas.

7. Anti-drug messages are conveyed through extensive preventive education and publicity programmes. To actively involve various sectors of the community in the anti-drug cause, the Beat Drugs Fund (BDF) provides funding support to innovative anti-drug projects every year.

8. Hong Kong has attached great importance to an evidence-based approach in dealing with the drug abuse problem. Various research projects are supported by ACAN and Narcotics Division of Security Bureau, or through the sponsorship of BDF.

9. Law enforcement agencies maintain a close partnership with their external counterparts in intelligence exchange and joint enforcement actions. External cooperation has also been extended to preventive education and publicity, treatment and rehabilitation and research, as evidenced in the sharing of Hong Kong's experience on these fronts with our counterparts in the region, the Mainland and Macao SAR.

## **LATEST DRUG ABUSE SITUATION**

10. The table at Annex summarises key data from the Central Registry of Drug Abuse (CRDA)<sup>(2)</sup>. This shows that -

- (a) over the past ten years, the total number of drug abusers has been decreasing steadily, from 19 673 in 1996 to 14 087 in 2005. This trend has continued in 2006: the first three

---

<sup>(2)</sup> The Registry tracks the changing trend and collates statistical information regarding drug abuse. Drug abusers' information is submitted by a network of reporting agencies voluntarily. The reporting network is extensive, covering law enforcement agencies, treatment and rehabilitation organisations, welfare agencies, tertiary institutions, hospitals and clinics.

quarters of 2006 registered a total of 10 779 drug abusers, compared to 11 914 in the first three quarters of 2005.

- (b) within this overall decrease in the number of drug abusers, the decrease in the number of young abusers (aged under 21) has not been as steady as that in the number of adult abusers. Comparing the figures for 1996 and 2005, the number of young abusers decreased from 3 657 to 2 255. However, during the ten years the number fluctuated quite significantly. The number in the first three quarters of 2006 stood at 1 980, compared to 1 802 in the same period of 2005.
- (c) within the overall decrease in the number of drug abusers, there has been a shift from the use of heroin to psychotropic substances. From 1996 to 2005, heroin abusers decreased from 16 107 to 9 734, but psychotropic substance abusers increased from 3 389 to 6 310.

These figures show that while we should continue to suppress the number of adult abusers and heroin abusers, we need to pay special attention to young abusers and psychotropic substance abusers, to try and further reduce those two numbers. There is a connection between these two numbers, since young drug abusers mainly abuse psychotropic substances.

## **SERVICE NEEDS AND LATEST STRATEGIES**

11. One priority is to change the perception of the public, and particularly young people, of psychotropic substances. The public are generally familiar with the harm of conventional drugs like heroin given their very pronounced withdrawal symptoms. The public, particularly young people, are less sensitive to the harm of psychotropic substances, the continuous consumption of which would cause permanent damage to health. There are also misconceptions that psychotropic substances are “soft” drugs, are less addictive, and are less harmful to health. We have been trying to promulgate information to counter such misconceptions, and will continue to do so.

12. On supply reduction, law enforcement agencies will step up cooperation with their Mainland and overseas counterparts to cut off the supply of drugs before they reach the local market. Raids and licence checks will be sustained at entertainment venues where youngsters congregate and psychotropic substances may be abused. Inspection will be stepped up at control border points to intercept any illegal drugs. On demand reduction, we focus on the following -

- (a) Strengthening preventive education and publicity measures to educate the public, in particular youngsters, about the harmful effects of psychotropic substance abuse at an early age;
- (b) intensifying early intervention initiatives to motivate abusers to seek treatment; and
- (c) enhancing medical support to psychotropic substance abusers.

Specific measures are set out below.

#### **(a) Preventive Education and Publicity Measures**

13. The Administration has attached great importance to school-based anti-drug education. Relevant topics have been incorporated into various subjects. Both life skills and refusal skills are included in extra-curricular activities to help steer students away from drugs. Since September 2006, we have extended anti-drug education talks to students at Primary 4 and above from the previous Primary 5 and above to educate students on the scourge of drugs at an earlier age.

14. Ketamine and ecstasy are the most commonly abused drugs among the youth. We have recently embarked on a new publicity campaign to educate the public about the harmful effects of these two drugs, through TV and Radio Announcements in the Public Interest, bus body advertisements, etc. We will continue to make use of different media and channels to disseminate anti-drug messages, including publicity projects targeting the youth.

15. A strong and positive family relationship serves as an effective agent in protecting young people from the harms of drugs. Indeed, the survey of drug use among students conducted in 2004 showed that the proportion of drug-taking students living with parents were comparatively lower than non-drug-taking students. The relationship of non-drug-taking students with parents and family members was often worse.

16. We therefore seek to engage parents actively in promoting anti-drug education in the family. Parents play a very important part in the life and development of their children. They can also play an important role in preventing drug abuse by their children. We have organised seminars for parents to improve their skills in communicating with their children, enhance their knowledge of drugs as well as heighten their awareness of signs of drug abuse. To reach a wide audience of parents, two special radio programmes (“父母攻略” and “子女成長 Q&A”) have been produced to enhance their skills. We have also commissioned a research to study the role of parents in anti-drug education.

17. Teachers and school social workers are also important agents to promote anti-drug messages to youngsters. We will continue to organise anti-drug education workshops regularly to enhance their drug knowledge.

18. We have stepped up educational and publicity activities against cross boundary drug abuse recently. Apart from disseminating anti-drug messages at KCR trains and border control points, a series of docu-drama “Anti-Drug Files” featuring genuine cases has been produced jointly with the Radio Television Hong Kong and broadcast on television. We have launched the “Sponsorship Scheme on Anti-Cross-boundary Drug Abuse Projects” which provides funding to 18 projects on anti-drug educational and publicity activities targeting young people, especially youth at risk. We will also produce an education kit for reference by primary and secondary schools to disseminate anti-drug messages to teenagers.

19. The Hong Kong Jockey Club Drug InfoCentre has been an

effective platform to promote anti-drug education to the public. It is especially popular for schools to organise visits to the Centre as part of their anti-drug education for students. The BDF will continue to provide funding support to organisations to hold various kinds of anti-drug activities. Parents education projects, drug education projects targeting children and projects which help to curb cross boundary drug abuse have been included as priority areas in the 2007-08 funding exercise.

### **(b) Early Intervention**

20. The Social Welfare Department (SWD) subsidises five Counselling Centres for Psychotropic Substance Abusers (CCPSAs) which are specifically set up to tackle the problem of psychotropic substance abuse. We will, starting from April this year, deploy an additional \$3.7 million (an increase of 22.8% over the current provision of \$16.3 million) to the five CCPSAs to strengthen their outreaching services and early intervention work, and their collaboration with schools, law enforcers, medical practitioners and other NGOs. Early intervention is also the strategy adopted by SWD for various services targeting the youth, including those designated Integrated Children and Youth Services Centres providing overnight outreaching service for young night drifters. SWD has allocated additional provisions to enhance their services since August 2005.

21. To enhance the professionalism of anti-drug workers, the Narcotics Division of Security Bureau commissioned the first structural training programme held in 2006 for frontline anti-drug workers and peer counsellors. In 2007 we will organise training workshops focusing on psychotropic substance abuse to equip anti-drug workers with more skills in identifying and handling substance abusers.

### **(c) Medical Support**

22. A working group has been set up under the Sub-Committee on Treatment and Rehabilitation of ACAN to look into the possibility of strengthening co-operation between private medical practitioners and social workers. Apart from tapping the expertise of private medical

practitioners to address the medical needs of psychotropic substance abusers, we can widen the network for preventive education and early intervention at the community level so that abusers, in particular youngsters and occasional abusers, may be given medical treatment and advice, or referred to counselling or other services at an early stage. We will launch a pilot cooperation scheme in 2007-08.

## **THE WAY FORWARD**

23. Over the years the Administration has spared no efforts in combating the drug problem. We will continue to tap the views of ACAN, Drug Liaison Committee, anti-drug workers and the public in formulating policies and initiatives. We will establish a strategic partnership and enhance cooperation with various sectors of the community, including medical and social workers, family, academia, schools and the media in this battle against drugs.

Security Bureau  
January 2007

**Annex**

**Number of Drug Abusers(1996 to 2006 Q1-Q3)**

	<b>1996</b>	<b>1997</b>	<b>1998</b>	<b>1999</b>	<b>2000</b>	<b>2001</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2005Q1-Q3</b>	<b>2006Q1-Q3</b>
Heroin abusers	16 107	14 291	13 588	13 003	12 188	1 1575	11 826	10 357	10 127	9 734	8 427	6 826
Psychotropic substance abusers	3 389	3 488	3 412	3 549	5 561	6 022	5 581	5 219	6 194	6 310	5 065	5 702
Total number of abusers	19 673	17 635	16 992	16 314	18 335	18 513	17 966	15 790	14 852	14 087	11 914	10 779
Aged under 21	3 657	3 150	2 841	2 482	4 020	3 902	3 002	2 207	2 184	2 255	1 802	1 980

Note - An abuser may abuse both heroin and psychotropic substances.

Source - Central Registry of Drug Abuse