

**Legislative Council Panel on Welfare Services  
Support Services for Young Drug Abusers**

**PURPOSE**

This paper briefs Members on the anti-drug strategies and support services for young drug abusers.

**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 from 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

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<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 supply of drugs 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 the BDF.

9. Law enforcement agencies maintain a close partnership with their counterparts in the Mainland and overseas 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.

## **DRUG ABUSE SITUATION**

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

- (a) Over the past ten years, the total number of drug abusers has been decreasing steadily, from 17 635 in 1997 to 13 204 in

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<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.

2006. The first quarter of 2007 registered a total of 4 649 drug abusers, compared to 4 680 in the first quarter of 2006.

- (b) During the past ten years the number of young drug abusers below the age of 21 fluctuated quite significantly. Comparing the figures for 1997 and 2006, the number of young abusers decreased from 3 150 to 2 549. However, the number in the first quarter of 2007 stood at 994, compared to 903 in the same period of 2006.
- (c) There has been a shift from the use of heroin to psychotropic substances. From 1997 to 2006, heroin abusers decreased from 14 291 to 8 101, but psychotropic substance abusers increased from 3 488 to 7 364.

These figures show that while we should continue to reduce 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.

## **LATEST ANTI-DRUG STRATEGIES**

11. One priority is to change the perception of the public, and particularly young people, of psychotropic substances. There are often misconceptions that psychotropic substances are “soft” drugs, are less addictive, and are less harmful to health. We have been trying to counter such misconceptions in our publicity efforts, 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. On demand reduction, we focus on the following -

- (a) early intervention initiatives to motivate abusers to seek treatment;
- (b) upgrading the skills of parents, teachers and social workers to identify and help young drug abusers; and
- (c) stepping up preventive education and publicity measures to educate the public, in particular youngsters, about the harmful effects of psychotropic substance abuse at an early age.

13. In the provision of treatment and rehabilitation services, Hong Kong adopts a multi-modality approach to cater for the different needs of drug abusers from varying backgrounds. Services can broadly be grouped into the following five categories -

- (i) compulsory drug treatment programme at drug addiction treatment centres operated by the Correctional Services Department for persons of 14 years old or above addicted to drugs who are found guilty of offences and sentenced to imprisonment.
- (ii) 39 residential drug treatment centres and halfway houses (RDTCs/HWHs) run by 17 non-government organisations (NGOs). All except three RDTCs/HWHs are currently providing services to young drug abusers.
- (iii) counselling centres for psychotropic substance abusers (CCPSAs) subvented by the Social Welfare Department (SWD) to provide counselling services and other assistance to psychotropic substance abusers and youth at risk.
- (iv) methadone treatment programme provided by the Department of Health which offers both maintenance and detoxification options for opiate drug dependent persons of all ages through a network of 20 methadone clinics on an outpatient mode.
- (v) substance abuse clinics run by the Hospital Authority to

provide medical treatment to psychotropic substance abusers with psychiatric problems.

**(a) Early Intervention Initiatives**

14. In the light of the psychotropic substance abuse problem among the youth, we are enhancing early intervention initiatives to identify abusers to come forward for treatment since youngsters are often less sensitive of the need to seek help. Among others, the five CCPSAs are specifically set up to tackle the problem of psychotropic substance abuse. These centres are the focal points for psychotropic substance abusers to receive timely counselling, treatment and rehabilitation. They also serve as resource centres for other professionals who may come across psychotropic substance abusers in the course of their work. Starting from April this year, we have deployed an additional \$3.7 million (an increase of 22.7% 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, to help the young drug abusers.

15. A working group has also been set up under the Treatment and Rehabilitation Sub-Committee of ACAN to draw up measures to strengthen co-operation between private medical practitioners and social workers. The aim is to tap the professional expertise of medical practitioners to address the medical needs of abusers, and to widen the network for preventive education and early intervention at the community level. Abusers, in particular young and occasional abusers, will be given medical advice and treatment, or referred to counselling or other services at an early stage. In 2007-08 we will launch a pilot cooperation scheme, involving body check and early treatment services.

16. The BDF will continue to provide funding support to organisations to hold various kinds of anti-drug activities to steer youngsters away from drugs.

17. Early intervention is also the strategy adopted by SWD for various services targeting the youth in general, including those designated Integrated Children and Youth Services Centres providing

overnight outreaching service for young night drifters to cater for their multifarious needs. To this end, SWD has allocated additional provisions to enhance their services since August 2005. Support services to young people are also rendered through School Social Work Service, District Youth Outreaching Social Work Teams and Community Support Service Schemes.

**(b) Upgrading the skills of Parents, Teachers and Social Workers**

18. To help the young drug abusers, we also actively engage stakeholders such as parents, teachers and social workers in the education and rehabilitation process.

19. A strong and positive family relationship serves as an effective agent in protecting young people from the harms of drugs. We have organised seminars for parents to enhance their knowledge of drugs, heighten their awareness of signs of drug abuse, improve their skills in communicating with their children and helping their children if they have drug abuse problems. To reach a wide audience of parents, several series of radio and TV programmes have also been produced to enhance their skills. We have also commissioned a research study to look into the role of parents in anti-drug work. We will continue to engage parents actively in drug prevention education for their children.

20. Teachers and social workers are also very important agents to promote anti-drug messages to youngsters. We will organise seminars, district networking and workshops to enhance their drug knowledge and upgrade their skills in identifying drug abusers, handling drug abuse cases in school and collaborating with NGOs and the Police. Liaison between schools and the Police will also be strengthened.

21. The Narcotics Division (ND) of Security Bureau commissioned the first structural training programme held in 2006 for frontline anti-drug workers and peer counsellors to enhance the professionalism of anti-drug workers. In May 2007 we also organised a training workshop on psychotropic substance abuse to equip anti-drug workers with more skills in identifying and handling young drug abusers. We will continue to accord a high priority in the professional training of anti-drug workers.

### **(c) Preventive Education and Publicity**

22. To tackle the youth drug abuse problem, preventive education plays a key role in demand reduction. Ketamine and ecstasy are the most commonly abused drugs among the youth. We rolled out a publicity campaign to educate the public about the harmful effects of these two drugs, through different media and channels. The publicity campaign will be intensified during the summer holidays. A Hip Hop Dance and Music Competition jointly organised by ND and Radio Television Hong Kong has recently been launched to engage youngsters in healthy activities and to reinforce the message of leading a healthy drug-free lifestyle. A mobile phone game “Evil Killer” will also be launched in mid-July to bring home anti-drug messages to the youth.

23. The Administration has attached great importance to school-based anti-drug education. Relevant topics have been incorporated into various subjects at primary and secondary level. Both life skills and refusal skills are included in guidance programmes to help steer students away from drugs, such as “Understanding the Adolescent Project” for primary pupils and “Smart Teen Challenge Camp” for junior secondary students. 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. The Hong Kong Jockey Club Drug InfoCentre will continue to be an important platform to promote anti-drug education. It is especially popular for schools to organise visits to the Centre as part of their anti-drug education for students.

24. We have launched the “Sponsorship Scheme on Anti-Cross-boundary Drug Abuse Projects” which provides funding to 18 projects on anti-drug activities targeting young people, especially youth at risk, in various districts and also at the boundary. A new drug education kit has also been launched recently for disseminating anti-drug messages in schools and the consequences of cross-boundary drug abuse. The kit is designed for use by Primary four to six for the curriculum of General Studies, and Secondary one to three for Personal, Social and Humanities Education Key Learning Area.

## **THE WAY FORWARD**

25. The Administration will spare no efforts to combat the drug problem on all fronts. We will continue to tap the views of ACAN, Drug Liaison Committee, anti-drug workers and the public in formulating anti-drug initiatives. We will enhance our partnership with various sectors of the community, including social workers, schools, parents, medical workers, academia and the media in this battle against drugs.

Security Bureau  
Health, Welfare and Food Bureau  
Education and Manpower Bureau  
June 2007

**Annex**

**Number of Drug Abusers (1997 to 2007 Q1)**

	<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>2006</b>	<b>2006Q1</b>	<b>2007Q1</b>
Heroin abusers	14 291	13 588	13 003	12 188	1 1575	11 826	10 357	10 147	9 757	8 101	3 025	2 739
Psychotropic substance abusers	3 488	3 412	3 549	5 561	6 022	5 581	5 219	6 196	6 335	7 364	2 237	2 415
Total number of abusers	17 635	16 992	16 314	18 335	18 513	17 966	15 790	14 854	14 113	13 204	4 680	4 649
Aged under 21	3 150	2 841	2 482	4 020	3 902	3 002	2 207	2 186	2 276	2 549	903	994

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

Source - Central Registry of Drug Abuse