

**Legislative Council Panel on Security
Youth Drug Abuse**

PURPOSE

This paper briefs Members on the latest youth drug abuse situation.

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. The Fight Crime Committee (FCC) and the District Fight Crime Committees also discuss the youth drug abuse problem from time to time.

3. Following extensive consultation with the anti-drug sector⁽¹⁾, 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.

⁽¹⁾ 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.

Implementation

5. We have taken and will continue to take vigorous 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 (ND) 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. ACAN and the Government all along collect and publish two sets of data about the number of reported drug abusers and other information, i.e. information and data from the survey of drug use among students conducted once every four years and the Central Registry of Drug Abuse (CRDA). This mechanism provides the most up to date information for monitoring the trend of abuse, with detailed information

about drug abuse among students available every four years. We also make reference to other information or figures, including ad hoc research studies, admission statistics from treatment and rehabilitation service agencies, drug-related arrest and seizure figures, to formulate policy and allocate resources.

11. The table at Annex summarises key data from the CRDA⁽²⁾. This shows that -

- (a) Over the past ten years, the total number of reported drug abusers has been decreasing steadily, from 17 635 in 1997 to 13 204 in 2006. However, the first half of 2007 registered a total of 8 208 drug abusers, representing a 1.7% increase from that in the first half of 2006 (8 071).
- (b) During the past ten years the number of reported young drug abusers below the age of 21 fluctuated quite significantly. The number in the past two years reversed the declining trend of 2000 to 2004 and began to rise. The number in the first half of 2007 stood at 1 646, representing a 10.7% increase when compared to 1 487 in the same period of 2006.
- (c) There has been a shift from the use of heroin to psychotropic substances. From 1997 to 2006, reported heroin abusers decreased from 14 291 to 8 101, but reported psychotropic substance abusers increased from 3 488 to 7 364.

As regards the survey of drug use among students, the last survey was conducted in 2004. Results revealed that about 3.4% (i.e. 17 300) of the secondary students had ever abused drugs in their lifetime, of which about 0.8% (i.e. 4 300) of the secondary students had abused drugs in the 30 days prior to the survey. We will conduct the next survey in 2008.

⁽²⁾ The reporting network of the CRDA is extensive, covering law enforcement agencies, treatment and rehabilitation organisations, welfare agencies, tertiary institutions, hospitals, etc. As information is submitted by the reporting agencies to the CRDA voluntarily, CRDA figures do not represent the total number of abusers but they do reflect the trends of abuse.

12. The information above reveals that we need to pay special attention to young abusers who are mainly psychotropic substance abusers.

LATEST ANTI-DRUG MEASURES

13. One priority is to change the perception of the public, and particularly young people, of psychotropic substances. We have been trying to counter the misconceptions that psychotropic substances are “soft” drugs, are less addictive, and are less harmful to health than conventional drugs in our publicity efforts, and will continue to do so. We will also commission a longitudinal study on psychotropic substances in Hong Kong, which looks into the toxicology and long-term consequences of abusing psychotropic substances, evaluate the available treatment models and assess the impact of psychotropic substance abuse on Hong Kong, through long-term assessment of psychotropic substance abusers.

14. On supply reduction, law enforcement agencies will continue to tackle the problem at source to prevent the inflow of drugs into the local market. They will sustain raids and licence checks at entertainment venues where youngsters congregate and psychotropic substances may be abused. On demand reduction, we focus on the following -

(a) Early Intervention Initiatives

15. We are enhancing early intervention initiatives to identify abusers for treatment since youngsters are often less sensitive of the need to seek help. Apart from the five Counselling Centres for Psychotropic Substance Abusers which are specifically set up to tackle the problem of psychotropic substance abuse, designated Integrated Children and Youth Services Centres providing overnight outreaching service for young night drifters, School Social Work Service, District Youth Outreaching Social Work Teams and Community Support Service Schemes also provide support to young people, including young drug abusers, to cater for their multifarious needs.

16. Following the advice of ACAN, we will launch a two-year pilot collaboration scheme on strengthening co-operation between private medical practitioners (MPs) and social workers in early 2007-08 to provide early intervention to young substance abusers. The scheme involves social workers referring abusers to designated MPs who provide body check service and motivational interviews. The aim is to alert the abusers of any signs of health deterioration as a result of drug use and to heighten their awareness to seek treatment early. We will assess the effectiveness of the scheme, on which basis we shall consider the way forward in the longer term.

(b) Upgrading the Skills of Stakeholders

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

18. We have organised seminars and produced radio and TV programmes 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. 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.

19. We 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 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

20. Preventive education plays a key role in demand reduction. We rolled out a publicity campaign to educate the public about the harmful effects of ketamine and ecstasy, the two most commonly abused

drugs among the youth. A Hip Hop Dance and Music Competition jointly organised by ND and Radio Television Hong Kong has been launched to engage youngsters in healthy activities and to reinforce the message of leading a healthy drug-free lifestyle.

21. The Administration has attached great importance to school-based anti-drug education. Apart from incorporating relevant topics into various subjects at primary and secondary levels, life skills and refusal skills are included in guidance programmes to help steer students away from drugs. 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. We have also launched a new drug education kit to disseminate anti-drug messages in schools and the consequences of cross-boundary drug abuse.

TASK FORCE ON YOUTH DRUG ABUSE

22. The Chief Executive in his Policy Address announced the appointment of the Secretary for Justice, the incumbent Deputy Chairman of the Fight Crime Committee, to lead a high level inter-departmental task force to tackle youth drug abuse. The Task Force will make use of the existing anti-crime and anti-drug networks to consolidate strategies to combat the problem from a holistic perspective.

23. The Task Force will review the current measures, spearhead cross bureaux and inter-departmental efforts, and enhance collaboration among Non-government Organisations, stakeholders and the community, with a view to identifying areas of focus and enhancement. Initiatives that the Task Force will consider span over the current five prongs, including how we step up the anti-drug publicity campaign, law enforcement, early intervention services for young drug abusers and collaboration between social workers and medical practitioners, etc.

24. Building on our existing fight crime and anti-drug networks, such as FCC and ACAN, the Task Force will focus on enhancing cross-bureaux and inter-departmental efforts at a strategic level. It will maintain a close partnership with ACAN and FCC and there is no

question of replacing them. ACAN and FCC will continue to put forward views and recommendations to the Administration for consideration, and we will continue to consult them on proposals.

CONCLUSION

25. The Administration is determined to arrest the upward trend of youth drug abuse in a concerted and holistic manner. We will continue to tap the views of ACAN, FCC, Drug Liaison Committee, anti-drug workers and the public in formulating anti-drug initiatives. We will enhance inter-departmental efforts and partnership with various sectors, including social workers, schools, parents, medical workers, the local community and the media in this battle against drugs.

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Number of Drug Abusers (1997 to 2007 first half)

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2006 first half	2007 first half
Heroin abusers	14 291	13 588	13 003	12 188	1 1575	11 826	10 357	10 147	9 757	8 101	5 211	4 788
Psychotropic substance abusers	3 488	3 412	3 549	5 561	6 022	5 581	5 219	6 196	6 335	7 364	4 054	4 410
Total number of abusers	17 635	16 992	16 314	18 335	18 513	17 966	15 790	14 854	14 113	13 204	8 071	8 208
Aged under 21	3 150	2 841	2 482	4 020	3 902	3 002	2 207	2 186	2 276	2 549	1 487	1 646

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

Source - Central Registry of Drug Abuse