Minutes of the Social Welfare Advisory Committee (SWAC) Meeting held on 22 June 2006

Present

Mr Wilfred Wong (Chairman)

Dr Stephen Chow Chun-kay Ms Christine Fang Meng-sang

Mr Quentin Fong

Mr Herman Hui Chung-shing

Dr Benjamin Lai

Mr Keith Lam Hon-keung Mr Timothy Ma Kam-wah Prof Tang Kwong-leung

Mr Tung Chi-fat

Dr Jimmy Wong Chi-ho Ms Marina Wong Yu-pok Mr Silva Yeung Tak-wah

Ms Lisa Yip

Ms Wendy Cheung (Secretary)

In Attendance

Health, Welfare and Food Bureau (HWFB)

Ms Linda Lai Deputy Secretary for Health, Welfare & Food

(Family and Women)

Ms Salina Yan Deputy Secretary for Health, Welfare & Food (Elderly

Services and Social Security)

Mr Freely Cheng Principal Assistant Secretary for Health, Welfare &

Food (Family)

Miss Hinny Lam Principal Assistant Secretary for Health, Welfare &

Food (Women)

Ms Cherie Yeung Acting Principal Assistant Secretary for Health,

Welfare & Food (Elderly Services and Social Security)

Ms Annie Kong Acting Assistant Secretary for Health, Welfare & Food

(Women) SD

Social Welfare Department (SWD)

Mr Paul Tang Director of Social Welfare

Mrs Anna Mak Assistant Director of Social Welfare (Family and Child

Welfare)

Mr Fung Pak-yan Assistant Director of Social Welfare (Development)

Ms Pang Kit-ling Chief Social Work Officer (Domestic Violence)

Hospital Authority (HA)

Dr Daisy Dai Senior Executive Manager (Medical Services

Development)

Absent with Apologies

Mrs Cheung Ang Siew-mei Dr Miranda Chung Chan Lai-foon Prof Japhet Sebastian Law Mr Vincent Lo Wing-sang

Item 2 : Review of Services for Victims of Sexual Violence (SWAC Paper No. 10/06)

- 5. Members noted that the Government recognized the uniqueness and importance of the services provided to victims of sexual violence and had adopted different measures to improve the services in the past few years. Following a review on the issue, the Health, Welfare and Food Bureau (HWFB) and Social Welfare Department (SWD) had proposed a new service model with a view to providing better support to victims of sexual violence. The new model comprised the following components:
- (a) 24-hour hotline service relating to the support for victims of sexual violence;
- (b) 24-hour outreach service for sexual violence crisis cases;
- (c) provision of designated social workers and strengthening the co-ordination of relevant services:
- (d) short-term accommodation service;
- (e) medical support by the Hospital Authority; and
- (f) provision of training to frontline professionals.
- 6. Members made the following comments:
- (a) they were concerned with the interfacing and coordination between SWD and the NGO operator in providing 24-hour outreaching service for sexual violence cases, and the monitoring of service performance;
- (b) a case manager approach was the right approach in handling sexual violence cases. It was important that the designated social worker would act as case manager to provide/coordinate services such as emotional support, counselling, report to the police, medical treatment and forensic examination, etc. for the victims. Clear procedural guidelines and protocol, strengthened inter-disciplinary training and skills as well as contact lists of all parties concerned, etc. should be provided to frontline workers for timely follow-ups under the new service model;
- (c) it was important to provide convenient services to victims and to

minimize the need for them to undergo different procedures and to rehearse the bitter experience. As such, there was concern about whether a victim had to go to different locations for services. There was also a suggestion to install conference call facilities for the 24-hour hotline to facilitate communication among the telephone operator, the victim and the case worker;

- (d) there was concern on the staffing available for handling cases after office hours and providing services for other cases of family crisis and domestic violence;
- (e) as regards funding, Members supported the Government's policy of encouraging different sectors in the community to participate in social services through open bidding. Not all welfare services had to be funded by the Government. Some services were supported by other funds or other resources in the community. It was also suggested that SWD give some leeway on the funding arrangement to allow the NGO operator certain flexibility in expanding the service of the new centre;
- (f) counselling and social support service were most crucial for victims of sexual violence. The proposed service model should be able to effectively improve the existing services and enhance the co-operation between different departments, and better take care of the unique needs of victims;
- (g) on short-term accommodation service, while it was estimated to be available at a later time in early 2008 due to the need for installing the new service centre, Members considered that both premises-tied and non-premises-tied services should be launched as early as possible;
- (h) the Government should tap on the useful experience of Rainlily in the provision of specialized service for victims of sexual violence over the past six years; and
- (i) on top of the service for the victim, the centre might also take up tasks relating to public education on prevention of sexual violence.
- 7. The Government made the following responses:
- (a) the 24-hour hotline service would be run by the selected NGO.

Calls requiring outreaching service received during office hours would be followed up by SWD whereas calls received after office hours would be followed up by the NGO to fill the service gap. In any situation, a case would be followed through by one designated social worker. The performance of the NGO would be monitored by SWD in accordance with the usual practice for Government-funded welfare services:

- the services provided should be easily accessible to victims who might come from different locations of the whole territory. The new service mode, having a designated centre/ hotline while making use of SWD's existing network of Integrated Family Service Centres / Family and Child Protective Services Units / Medical Social Services Units spread through 12 districts and HA's Accident & Emergency and after-care services through its hospital network in different clusters, would ensure that services provided would be accessible and convenient to the victims. There would be "one stop service points" all over the territory for immediate follow-up services for victims;
- (c) it was difficult to justify a designated room in each hospital to handle all procedures. It would be more practical to make better use of the available resources in the hospitals to provide the necessary services to the victims in a suitable place taking into consideration the need to protect their privacy;
- (d) in response to Members' concern on the staffing available for handling cases after office hours and providing services to other cases of family crisis and domestic violence, SWD would not set out a detailed manpower requirement for the new centre in the invitation of bid. The interested NGOs would have the flexibility to make detailed proposals on the services components, mode of operation and staffing, etc based on the service specification and amount of funding allocated; and
- (e) the new service model was an improvement to the existing one, and reference had already been made to the experience of Rainlily in developing this model. The new service model aimed to provide services for victims of sexual violence and domestic violence, creating synergy among different services and hence a more effective deployment of resources. Even with this new centre in place, Rainlily could still operate its services using other sources of funding. SWD would also invite the agency to

submit bid for running the new centre.

8. The Meeting agreed with the Government's proposed service model for victims of sexual violence. The most important thing was to have suitable personnel providing immediate support to the victims round the clock and territory-wide services for victims from different areas. It was considered that the success of the proposed service model hinged on the good coordination and cooperation between different departments. In addition, while the new centre might provide complementary services on public education on sexual violence, its prime focus should be on crisis intervention and support.

Health, Welfare and Food Bureau October 2006

Press Release

SWAC discusses proposals to strengthen support for victims of domestic and sexual violence

The following is issued on behalf of the Social Welfare Advisory Committee:

The Social Welfare Advisory Committee (SWAC) today (June 22) discussed the outcome of the Government's review on the services for victims of sexual violence and proposed amendments to the Domestic Violence Ordinance.

Speaking after the SWAC meeting, the chairman of the SWAC, Mr Wilfred Wong, said the committee welcomed the Government's proposed service model for victims of sexual violence, adding that the committee agreed with the concept of the new service model.

Under the new service model, there would be designated social workers who would follow up sexual violence cases, a 24-hour hotline and outreach services covering different regions of the territory. There would also be short-term accommodation service for the victims.

"The most important thing is to have suitable personnel providing immediate support to the victims and co-ordinating the work of different departments and units, so the victims can go through all the procedures in a convenient, safe, secured and supportive environment.

"We believe the Government's proposed model can effectively improve the existing services and enhance the co-operation between different departments, which would better take care of the unique needs of victims of sexual violence.

"The proposed new crisis intervention and support centre will also provide services for victims of sexual violence as well as domestic violence, creating synergy among different services and hence a more effective deployment of resources," Mr Wong said.

As regards subvention, the committee supported the Government's long-standing policy of encouraging different sectors in the community to participate in social services through different means, including provision of funding support.

"At present, not all welfare services are funded by the Government. Some services are supported by other funds or other resources in the community," Mr Wong said. He considered that given the limited public resources, the Government should make use of other resources in the society to provide suitable services to the public.

In addition, the committee also discussed the Government's preliminary proposed amendments to the Domestic Violence Ordinance. Mr Wong said that the committee supported the Government's proposals.

"Members noted that the Government had made these suggestions having regard to the views of different

organisations and taken into account the overall government policies and measures.

"We believe the proposals can help strengthen the protection for the victims of domestic violence. We hope that the Government will take forward the legislative proposals as soon as possible," he said.

Noting that domestic violence was a multi-faceted issue, Mr Wong said a multi-pronged approach should be adopted to tackle the problem. Legislative amendment was only part of the solution and could not solve all the problems, he added.

"We understand that the Government has implemented a number of measures in the past two years to strengthen its efforts in preventing and tackling domestic violence. Such efforts should be duly recognised.

"We hope the Government will continue its work in this aspect, promote the concept of harmonious family and co-operate with different sectors in the community to deal with the issue", Mr Wong said.

Recognising the uniqueness and importance of the services provided to victims of sexual violence, the Government has adopted different measures to improve the services in the past few years.

Following a review on the issue, the Health, Welfare and Food Bureau and the Social Welfare Department have proposed a new service model with a view to providing better support to victims of sexual violence.

The new model comprises the following components:

- 1. 24-hour hotline service relating to the support for victims of sexual violence;
 - 2. 24-hour outreach service for sexual violence crisis cases;
- 3. Provision of designated social workers and strengthening the co-ordination of relevant services;
 - 4. Short-term accommodation service;
 - 5. Medical support by the Hospital Authority; and
 - 6. Provision of training to frontline professionals.

The bureau has also completed the review on the Domestic Violence Ordinance. In the process, views of different groups and stakeholders were carefully considered. The Government is now consulting relevant bodies on its proposed amendments to the Ordinance. The Government hoped to be able to finalise the proposals within this year, and proceed with the preparation of the legislative amendments.

Ends/Thursday, June 22, 2006 Issued at HKT 18:54

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