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From: ym w
To: sc_hs52_16@legco.gov.hk

Date: Monday, May 08, 2017 12:54PM
Subject: Fwd: 少數族裔權益事宜小組委員會：2017年5月8日舉行的會議 - 確認信

History: ➔ This message has been forwarded.

主席、各委員，午安。

2011年人口普查，少數族裔在 2011年有 451,183人。佔總人口超過百分之六，本港出生比率超過百分13 (每7.5個新生命就有一位屬於少數族裔)。因此感謝各位參予少數族裔權益政策上的加強同改善。

有幾點可以增益：

1. 為協助新來港的少數族裔人仕，「民政事務總署」的「種族關係組」由2007年至2016年十年內，開過20次會議，等於平均每年祇開兩次會。政府立場是否少關注所以少開會？

其實想指出是關注力道不足以解決問題，無論質與量都要加強，又能否以例如「種族關係組」的比較專責的隊伍去協調政府部門 (如房署、醫管局、民政署等)集中處理整合解決方案？

「種族關係組」出版了 7種語言版本的 A GUIDE TO LIVING IN HONG KONG，恐怕是宣傳少知名度亦不足，連少數族裔人仕都未知有這刊物，全港派發地點只有數個地方，好啱用的工具書得個擺字。

(全港派發地點只有數個地方；如機場入境處有派發；或於「民政事務署分區辦事處」自取；另外全港總共有8間資源中心可供自取；亦可在領事館自取。)

如何增加用家對該刊物內容的認知？既然是新來港，來港前可以將資料傳送至申請人；經郵寄、或者原居地的代辦處，都是簡單程序。當然能於機場口岸增加各種翻譯人員更佳。

2. 2011年人口普查亦顯示，約3份之1的少數族裔人仕為穆斯林國民，全都要清真食品 (HALAL)。但無論政策或者社會都欠缺配套去幫助找到清真食品。

套用一位人仕的話，“為何 (香港) 政府讓我們在此居住，卻不為我們安排相應的食物配備。

市面上有種種民族特式餐廳，偏偏食品標籤及餐廳標示 卻無統一明示的設置。不如參考國內現有標準在於餐廳、新鮮食材、和包裝食品標籤方向，去設立本地的 清真食品標記。房署應在轄下商場推加清真食品標示，領展商場亦應率先推行，食環署亦責無旁貸去推行計劃。

3. 政府機構的語言協助亦相當簡略，例如醫管局轄下的醫院，都不一定全天候常駐社工及多種語言翻譯(全港有70人)。據了解當少數族裔人仕需要求診時，一般都自己安排英語或中文能力的親友陪同才敢應診，女性病人更只要求女性親友陪伴，亦祇願意由女性醫護人員照顧。HA 都有部份安排但夠嗎？麥美娟議員都已在10/4要求數據作參考。

這難題需要多方面政策加強去解決，例如

增強各醫院用 多語言 問症咭對照表；

鼓勵、提倡政府前線人員去提升語言能力，增設常駐翻譯員；

提升政府人員對少數族裔文化、語言的認知；

提倡教育多種語言能力等等。

一切有賴小組各委員通力支持。多謝主席、各委員。

王旭明敬上

Good afternoon Chairman, and members of the council,

The 2011 census states, ethnic minority (EM) includes 451,183 in population. Accounting for more than 6% of the total population and over 13% out of total birth in Hong Kong (i.e. one in every 7.5 new born). Hereby thank all of you for participating in the improvement and strengthening in policy making regarding minority interests.

Areas of improvement:

1. To help newcomers to new arrivals, the Race Relations Unit of the Home Affairs Department has held 20 meetings from 2007 to 2016, an average of two meetings a year. Is the government being indifferent to meet on the topic?

In fact, there is not enough effort put to solve the problem, in both quality and quantity. If there being a unified co-ordination of the government departments (such as the Housing Department, the Hospital Authority, the Civil Affairs Department, etc.) by a more dedicated team (e.g. the Race Relations Unit) there will be more hopeful with a focused solution.

The Race Relations Group has published A GUIDE TO LIVING IN HONG KONG in seven languages, however, publicity is insufficient. Even ethnic minority people are not aware of this publication. Only a few locations can this booklet be collected. Such useful information in this tool book is only useful when delivered to the right hands. (Only available for collection in few locations, e.g. at the Airport near Immigration Department it is distributed by the International Social Service's Information Ambassadors; or in the District Offices of the Home Affairs Department; or at the designated 8 service centres.)

How to promote this publication? While EM are new comers to Hong Kong, the information can be sent to the person even before their arrival, by mail, or passed to them at their departing country through our agencies, this seems simple procedures. Of course, it will be great service to station interpreters at the airport.

2. The 2011 census also shows that around one-third of EM are Muslim nationals, all of whom needs Halal food. However, there is no policy to address this and lack of communal help for them to locate Halal food.

One EM raised, "Why (HK) government let us live here, but do not lead us to our food."

There is a good variety of ethnic restaurants in the market, but there is no indication of Halal food labeling and restaurant signage. China is a more mature market for Halal food and we can use it as a reference for policies and standards with directions and solutions, in the restaurant signage, for fresh foods, and food labels; in order to set up a local Halal food system.

The Housing Department should introduce the Halal food signage in its shopping malls and the Link REIT has shopping malls to pioneer this Halal food signage and labeling implementation. The Food and Environmental Hygiene Department (FEHD) should also take leading responsibility in implementing the scheme.

3. Language assistance from government agencies is also too basic. For example, hospitals in the HA system do not have resident social workers and resident multilingual translators (only 70 people). It is understood that when ethnic minorities need to seek treatment, they will ask English/Chinese speaking relatives or friends to accompany, female patients will only ask same gender to accompany and also accept health care workers of same gender. HA obviously has some arrangements but definitely insufficient for the entire EM population. Ms Alice Mak stated a need for statistics at last meeting (10/4), perhaps that will lead to a more focused solution.

These problems require a multidimensional policy to strengthen, which may include but not restricted to these following actions.

Enhance the use of multilingual question cards in various hospitals;

Encourage government front line staff to enhance language skills, and the addition of resident translators;

Educate more broadly the government personnel on the EM culture, language awareness;

Improve the education system to accommodate EM communications and language skills.

I look forward to every success of the members of the group. Thank you, Chairman and member of the council.

Respectfully,

Wong Yuk Ming

----- Forwarded message -----

From: **Avil PL MA** <aplma@legco.gov.hk>

Date: Thu, May 4, 2017 at 6:31 PM

Subject: 少數族裔權益事宜小組委員會：2017年5月8日舉行的會議 - 確認信

To: _____

隨文附上信件確認出席上述會議發表意見。務請準時出席!

Best regards,

Avil MA

Council Business Division 2

Legislative Council Secretariat

Tel : (852)3919 3238

Fax : (852)2509 9055

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