

## **AGENDA 4**

### **Community Health and Well-being**

According to World Health Organization (WHO), health is a state of complete physical, mental and social well-being in which all individuals realize their own abilities, can cope with the normal stresses of life, can work productively and effectively, and are able to make a contribution to their communities. Mental health and the causes of mental disorder are the results of interaction of different factors, including social factors---economy and environment, as well as individual factors---physical and mental conditions. With this definition, we will approach the subject of how to improve community health and well-being in Hong Kong.

#### **Trend and Challenges**

##### **1. Increasing demand for services**

Hong Kong is a cosmopolitan city with fast-paced life. Citizens here suffer from great stress, which affects their mental health greatly. Accompanying the outbreak of the financial crisis, the rate of unemployment is soaring. People’s anxiety for the future leads to an increased number of mental-related cases. Based on the figures of Hospital Authority, 154,625 patients suffering from mental illnesses received hospitalization, specialist consultation and daytime hospital services during 2008/2009, representing an increase of 23% compared to that in 2004/2005. The data does not include any consultation with private practitioners or those patients who had not received any medical treatment and had been hidden in the community. The number of patients in psychiatry outpatient department increased by 18% from 549,133 (2002/2003) to 647,864 (2008/2009). The number of psychiatry outreach service also increased by 27% from 82,199 (2002/2003) to 104,753 (2008/2009).

##### **2. Lack of coordination and facilities for medical and social service**

In addition to the inadequacy of medical facilities for ex-mental patients, there is also a lack of adequate community rehabilitation facilities. During the year of 2008/2009, every 10,000 mental patients shared 5.71 hospital beds. There were 15,830 ex-mental patients going back to their communities. Every 10,000 mental patients shared 3.11 psychiatrists and 133 nurses. Every nurse needed to take care of 119 ex-mental patients. Only 197 social workers were shared by 10,000 patients, and each of them needed to handle 72 cases on average. At present, there are many community health services, including Halfway Houses, Community Mental Health Link Service, Community Mental Health Care Service and Community Mental Health Cooperation Plan. However, these services operated by social welfare agencies do not have clear referral relationship with psychiatry service provided by the Hospital Authority. The patients are easy to be lost track of in the health care system. The community rehabilitation services are segregated and they lack integration.

##### **3. Increasing need for psychiatry consultation and rehabilitation service based on ages**

Hong Kong lacks any age-specific psychiatry consultation and rehabilitation service. For example, due to aging of the population, the need for psychogeriatric service has increased remarkably. Moreover, the concern for mental problems of children and teenagers has also risen recently. Based on figures from the Hospital Authority in 2006/2007, 9,513 teenagers aged 6-19 received psychiatry consultation. During the period of 2001/2002 to 2006/2007, the number of children cases had risen by 56%, and the number of teenager cases had also risen by 32%. It is estimated by the Hospital Authority that only 20.85 psychiatrists and 5.4 clinical psychologists were responsible for providing psychiatry consultation and hospitalization for children and teenagers as at end of 2006. Hospitals are understaffed seriously. Some teenagers even have to wait for 18 months to be treated. There is also a lack of community rehabilitation facilities especially for teenage ex-mental patients.

**Concerns:**

Social workers have the following concerns on promotion of community health and well-being and related rehabilitation services.

1. The need for mental health services will keep increasing. However, due to limited resources, we should provide more community-based mental health services, including those for prevention, treatment and rehabilitation services. Other integrated services such as establishing supportive network in local communities for early identification and timely treatment. The government should allocate more resources to enhance supportive services. In addition, it should also establish platforms and systems in these communities to establish linkage and facilitate coordination among hospitals and communities to ensure seamless services.
2. The present mental rehabilitation services mainly focus on treatment. To help the patients more effectively, the supportive services should be recovery-oriented. They should improve the abilities of the patients to make sure that they can handle difficulties in their lives resulting from their mental problems. Furthermore, community supporting services should also be enhanced to meet the needs of patients and their families in economy, education, employment, housing and social participation so that they can fully participate in community life.
3. We should foster mental health of the entire life cycle of people when designing and providing services. Services should be based on the needs for growth and development of service users of different age groups. We should also set up a specialist body to promote mental health and provide supportive services to ensure that children have a healthy beginning of life. Meanwhile, different service models should also be provided according to various needs of teenagers, adults and the elders.
4. The rights of the patients and their families should be respected and protected in the process of service provision. They should be encouraged to take an active

part in the rehabilitation process and choose a treatment and recovery model according to their personal needs. Apart from providing supportive services, we should also increase resources and create channels to encourage service users and their families to set up self-help organizations and networks so that they can get involved in the formulation of policies and express their opinions.

5. The government is lacking long-term planning for promoting mental health. On the other hand, it also lacks a set of strategies to prevent illness. To promote community health and well-being, we should not just think about services for the mental patients, but also protect people’s basic lives through a framework of comprehensive social policies in social and economic lives, employment, education, housing, medical service, social welfare, environment and culture and so on. This will create conditions for a healthier life and is good for fostering mental health of individuals and the whole community. Moreover, these policies can also help to build a society with tolerance, harmony, respect for human rights and free of discrimination.

#### **Possible Actions:**

- 1. Promote long-term planning for medical and welfare services for community health and well-being**

In order to enhance the planning and the linkage between medical and welfare services, government departments should make long-term planning for mental health and rehabilitation services together to estimate the need for human resources in the future. It is also suggested that regular platforms should be established in every community to help specialists of medical and welfare systems to communicate and make referrals regularly. Care plan for individual cases should be formulated for those who are waiting for mental treatment, those receiving services as well as ex-mental patients to realize seamless service.

- 2. Strengthen community-based supportive services**

In line with the service idea of “community care”, community-based planning, projects and service promotion should be strengthened and be facilitated. With other services, this can support patients’ psychological needs, social life, family life, housing, education, employment, economy, medical treatment and other needs to ensure a normal life in community. Because the need for supportive services is great, relying on specialist service resources in community rehabilitation is not enough. Therefore, community rehabilitation services should be provided in coordination with other service units (such as services for teenagers, families and the elders) to promote preventive services, assessment and identification, intervention and community support. In addition, specialist community mental health supportive service can be set up based on the needs of different age groups through the community collaborative mechanism.

- 3. Enhance supportive services for relatives/caregivers**

Relatives/caregivers are the most important support of patients. Therefore, supportive services should be enhanced to coordinate families and caregivers.

Such services will not only reduce the stress of caregivers, but also help to establish supporting organizations among relatives and patients so that they can express their voices for service development.

**4. Improve public education to eliminate discrimination and advocate respecting human rights**

To eliminate misunderstanding of the public towards mental illness, the government should provide community education in different places, including schools, workplaces, enterprises and communities. The aim is to promote a correct understanding of this illness among the public and further increase opportunities for patients to recover and integrate into the society. The ultimate aim is to promote the core values for building a society with tolerance and respect of human rights.

**5. Formulate social policies to achieve a healthier life**

In the course of rapid economic development and social changes, vulnerable groups are facing greater challenges and mental stress. This can illustrate the positive relationship between poverty and incidence of mental illness. Therefore, the government should improve the basic life of citizens through comprehensive social policy planning to reduce the sense of helplessness of vulnerable groups. It should also create favourable conditions for building a healthy society and environment so that all individuals can realize their potentials, be positive about life and make contributions to the whole society.

**6. Enhance professional training to improve quality of service**

To support service development, elements of community mental health services should be incorporated in the professional training for social workers. This can make sure that those serving at the frontline should master professional knowledge, counselling skills and intervention strategies to handle mental illness. Through cooperation with universities, different service models for different needs of different age groups can be consolidated and their effectiveness be tested and enhanced. In addition, another important training area is to provide consultation on clinical treatment for the supervisory social workers in service agencies.

**7. Service planning and development should be evidence-based**

In addition to the lack of long-term planning for mental health service development, Hong Kong lacks empirical evidence for service planning in terms of statistics and research concerning the incidence of mental illness among different age groups and various kinds of mental disorder. Therefore, the government should invest resource to collect figures to estimate the needs and the trend of development. Only in this way can the government plan future treatment and social services and estimate manpower according to actual needs.

How do you think about the themes/topics above? Are there any other themes left out that you would like to raise? What are other issues or problems related to this Agenda that you think should be explored and discussed?

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