Committee on the Promotion of Racial Harmony

Notes of the meeting on 28 June 2016

**Present**

**Home Affairs Department (HAD)**

Mr Jack Chan (Chairman) Deputy Director

Mrs Candy Yeung Assistant Director

Mr KY Cheng Chief Executive Officer

Mr Alfred Shum (Secretary) Senior Executive Officer

**Official Members**

Mr Yau Lok Fung, Michael Assistant Secretary (Constitutional & Mainland Affairs)5A, Constitutional and Mainland Affairs Bureau

Miss Yik Wai King Principal Information Officer (Local Promotion), Information Services Department

Ms Tang Wing Chi, Queenie Assistant Education Officer (Placement and Support), Education Bureau

Ms Lo Yin Wah, Clara Labour Officer (Employment Services), Labour Department

**Non-official Members**

Mr Dewan Saiful Alam

Mr Mohamed Ibramsa Sikkander Batcha

Mr Brian Chau

Dr Theresa Cunanan

Mr Kul Prasad Gurung

Dr Sharmila Gurung, MH

Mr Vijay Harilela

Mr Hung Chiu Wah, Derek

Mr Akil Khan

Mr Amirali Bakirali Nasir, MH, JP

Ms Rigam Rai

Ms Bungon Tamasorn

Dr Rizwan Ullah

Mr Yeung Chuen Chow, Thomas

**In Attendance**

Mr Raymond Ho Senior Equal Opportunities Officer, Ethnic Minorities Unit, Equal Opportunities Commission

For Agenda Item (3)

Miss Cheung Man Yee, Rosalind Principal Assistant Secretary (Narcotics)1, Narcotics Division, Security Bureau

Miss Cheng Ching Mon, Libera Assistant Secretary (Narcotics)1, Narcotics Division, Security Bureau

Mr Chan Wai Chung, Jack Assistant Secretary (Narcotics)2, Narcotics Division, Security Bureau

Ms Tse Shuk Yee, Josephine Senior Statistician (Security), Narcotics Division, Security Bureau

Ms Siu Ka Yan, Sky Executive Director, KELY Support Group

Mr Wong Lai Yin, Anthony Supervisor, The Society of Rehabilitation and Crime Prevention, Hong Kong

Mr Lau Kin Chung, Angus Project-in-charge, The Society of Rehabilitation and Crime Prevention, Hong Kong

Mr Basnet Pankaj Kazy Senior Peer Educator, The Society of Rehabilitation and Crime Prevention, Hong Kong

For Agenda Item (4)

Mr Antony Lui Senior Manager (Business Support Services)2, Hospital Authority

Dr Steve Chan Senior Manager (Business Support Service)3, Hospital Authority

Mr Chan Ching Wa Senior Service Coordinator, HK SKH Lady MacLehose Centre

Mr Ryan Choi Social Enterprise Development Manager, HK SKH Lady MacLehose Centre

Ms Wayne Wu Acting Chief Supervisor of Ethnic Minority Services of HK Christian Service / Centre-in-charge of CHEER Centre

Mr Dewan Chirag Rai Coordinator (Interpreter/Translator), CHEER Centre

**Absent with apologies**

Ms Cheung Yee May, Mimi

1. Introduction
   1. The Chairman welcomed Members to the meeting, including four new Members, namely Mr Vijay Harilela, Mr Derek Hung, Mr Akil Khan and Ms Rigam Rai, who have been appointed to the Committee since 1 June 2016. Another newly appointed Member, Ms Mimi Cheung, was unable to attend the meeting due to prior commitment.
2. Confirmation of the notes of discussion on 14 January 2016
   1. The notes of the last meeting held on 14 January 2016 were confirmed.
3. Matters arising from the meeting on 14 January 2016
   1. There was no matter arising from the meeting on 14 January 2016.
4. Drug Situation in Hong Kong by Narcotics Division, Security Bureau
   1. At the invitation of the Chairman, Miss Rosalind Cheung of the Narcostics Division (ND), Security Bureau briefed Members on the drug situation in Hong Kong. Following her presentation, Ms Sky Siu of the KELY Support Group (KELY) and Mr Basnet Pankaj Kazy of the Society of Rehabilitation and Crime Prevention, Hong Kong (SRACP) shared their experience in carrying out anti-drug programmes in the community.
   2. Issues raised by Members and the discussions were summarised below:

**(a) Drug use statistics**

* + 1. Members expressed appreciation towards the work of the ND and Non-Government Organisations (NGOs) sponsored by the Beat Drugs Fund (BDF) in combating drug abuse, and were pleased to note that the number of reported drug abusers had been decreasing.
    2. A Member enquired whether statistics had shown which anti-drug abuse measure was more effective. Miss Cheung referred to the five-pronged approach adopted by the ND which included preventive education and publicity, treatment and rehabilitation, legislation and law enforcement, external co-operation as well as research. She considered that the reduction in the number of reported drug abusers was the result of a holistic programme pursued by the ND, law enforcement agencies, and relevant partners in the anti-drug sector.
    3. Other Members enquired about the figures of drug abuse by women and youngsters, and whether drug issues were more prevalent in certain geographical areas. Miss Cheung said relevant statistics could be found in the statistics collected by the Central Registry of Drug Abuse. Relevant information would be provided to Members after the meeting.

(Post-meeting Notes: The Internet links to the relevant statistics were sent to Members on 4 July 2016.)

**(b) Combating drug abuse among students**

* + 1. In response to a Member’s enquiries, Miss Cheung said that friends were popular sources of drugs for students. According to the experiences of frontline workers, some drug traffickers would give out drug for free to lure students into selling drugs. To address this issue, publicity and enforcement action on this front had been stepped up.
    2. The Chairman expressed concern about the penalty for giving free drugs to students as it appeared that the penalty would tend to be more lenient if no money was involved. Miss Cheung explained that there were comprehensive legislation dealing with different drug-related offences and engaging young people in drug trafficking could be a relevant factor in applying to court for enhanced sentencing. A Member commented that it would be more effective to tackle the problem at its source because the court could not address the social problems associated with drug abuse. Miss Cheung took note of the comments and replied that law enforcement efforts had all along been and would continue to be pursued alongside other work under the five-pronged anti-drug strategy, including those on the prevention, treatment and rehabilitation fronts.
    3. Members asked how KELY identified and approached target schools and how many schools were visited each year. Ms Sky Siu replied that working relationships were established through school visits, and by introducing anti-drug programmes and education activities to them. KELY worked with around 70 schools each year, including schools with a large body of ethnic minority students, international schools and other local schools.

**(c) Reaching out to ethnic minorities**

* + 1. A Member enquired if the ND would work closely with NGOs in formulating strategies to deal with drug issues. Miss Cheung replied that there was close liaison with different partners, both within and outside the anti-drug sector. Specifically, ND would regularly meet service providers and relevant bodies in the Drug Liaison Committee (DLC) to collect views on drug-related issues.
    2. Mr Raymond Ho of the Equal Opportunities Commission expressed concern about equal access to the information and resources by ethnic minorities, and cultural sensitivity of the service providers. Mr Jack Chan replied that funding, including the BDF, were being provided for to various NGOs to conduct outreaching programmes and engagement activities for ethnic groups so as to publicise the available anti-drug community resources and services. The project of SRACP was one example.
    3. A Member considered that the drug use situation might be underestimated because of hidden and unreported cases. He asked how those hidden drug users could be identified and given remedial treatment. Miss Cheung replied that various measures had been adopted to deal with the hidden drug abuse problem. Specifically, the BDF had launched the Anti-drug Community Awareness Building Programme to mobilise the district networks to identify hidden drug abusers and encourage them to seek help early. Ms Siu and Mr Basnet Pankaj Kazy agreed with the observation and said that NGOs had been developing specific programmes to enable early identification of persons with drug problems, and promote early help seeking.
    4. A Member asked if KELY could share their educational materials with NGOs serving ethnic minorities so that the anti-drug message could be widely disseminated. Another Member asked if SRACP could share success stories of quitting drug after using their services. Furthermore, a Member suggested that anti-drug information could be disseminated through HAD-sponsored radio programmes in ethnic minority languages. Ms Siu, Mr Basnet and Miss Cheung welcomed the suggestions.

(Post-meeting Notes: To further promote anti-drug messages to the ethnic minority communities, ND had arranged through HAD anti-drug radio announcements in the public interest to be broadcast in five ethnic minority languages, namely Bahasa Indonesia, Hindi, Nepali, Thai and Urdu, in five weekly radio programmes sponsored by HAD on the Radio and Television Hong Kong and Metro Radio, starting from July 2016. Five anti-drug posters would also be translated and printed in Hindi, Nepali and Urdu to promote anti-drug messages to the ethnic minority communities.)

* + 1. Miss Cheung informed Members that the BDF would open a new round of applications soon and invited interested NGOs and district bodies to submit applications.
    2. The Chairman thanked for the presentations made by Miss Cheung, Ms Siu and Mr Basnet.

1. Interpretation Service for Ethnic Minorities
   1. At the invitation of the Chairman, Dr Steve Chan of the Hospital Authority and Ms Wayne Wu of the Hong Kong Christian Service briefed Members on the interpretation service for ethnic minorities by the Hospital Authority and the CHEER Centre respectively.
   2. Issues raised by Members and the discussions were summarised below:

**(a) Using Hospital Authority’s interpretation services**

* + 1. Members were pleased to note the Hospital Authority’s efforts in providing interpretation services to assist ethnic minorities in using medical services.
    2. A Member asked what the hospital staff would do if they had difficulty communicating with an ethnic minority patient. Dr Chan replied that the hospital staff would show flag sheets and cue cards to the patient concerned to identify his interpretation needs. A Member said complaints were still being heard that ethnic minority patients were not offered interpretation service even if there were communication difficulties. Dr Chan pointed out that either the hospital staff or the patients could initiate a request for interpretation service. Depending on the situation, telephone or on-site interpretation service would be arranged.
    3. A Member suggested that since the queuing time for treatment is usually long, it would be desirable if the interpretation need could be communicated early so that interpretation service could be arranged while the patient was waiting. Dr Chan replied that the Hospital Authority would continue to review the service and enhance communication between the hospital staff and the patients. For example, the Hospital Authority had displayed posters in outpatient clinics.
    4. A Member asked about the lead time required to arrange interpretation service for scheduled and emergency services. Dr Chan replied that for scheduled services, interpretation service was usually arranged alongside a medical appointment. For emergency services, life-saving treatment would be accorded top priority, and telephone or on-site interpretation would then be arranged as necessary.
    5. Mr Raymond Ho of the Equal Opportunities Commission (EOC) pointed out that while the system was in place, some frontline staff were not fully aware of the procedures for acquiring interpretation services. He suggested that the procedures could be simplified by designating a specific unit to handle all interpretation requests.
    6. A Member expressed concern whether ethnic minority patients were given sufficient time to read and understand the content of the Patient Consent Forms. Dr Chan replied that patients would be explained the content of consent forms before they were asked to sign them. As to whether a patient would be given a copy of the form, Dr Chan replied that it was not the usual practice but the patient might seek clarification from clinical staff if necessary.

**(b) Using CHEER’s interpretation services**

* + 1. In response to a Member’s enquiry, Ms Wu clarified that services were provided to ethnic minority individuals free of charge. Only public service providers would be charged for using paid services such as on-site interpretation. She told the meeting that these services were highly utilised.
    2. A Member suggested that CHEER Centre could consider developing a smartphone application to facilitate ethnic minority communities in using the services of CHEER Centre. Another Member suggested exploring the feasibility of developing an application with easy-to-use translation and interpretation function for ethnic minorities.

(Post-meeting notes: After a research on relevant smartphone apps, the Secretariat found that there is a free app in the market “HK Easy” developed by Yang Memorial Methodist Social Service (YMMSS), which included a directory of public services and a glossary of Chinese phrases frequently used in daily life. The app supports Chinese, English, Nepalese and Urdu. YMMSS agreed to include a link to the Race Relations Unit website and contacts of HAD Support Service Centres for EMs in the App in their next update.)

**(c) Emergency services**

* + 1. A Member expressed concern about the support for ethnic minorities, especially women and elderlies who did not speak English or Cantonese, calling the emergency hotline. Noting that emergency hotlines operate in several languages in some overseas countries, she considered that it would be helpful if other languages were offered to callers of the emergency hotline.
    2. A Member suggested that the Government or non-government organisations could consider providing a service for ethnic minorities similar to the “Emergency Alarm System (平安鐘)” which was available in the Chinese community. Ms Wu said that some service providers in the market were offering such a service to ethnic minorities and they even offer fee waivers to the elderlies in need. Mr Chan Ching Wa added that fee waivers were also available to people with chronic diseases. The Chairman suggested that our support service centres could help promote such services.

(Post-meeting notes: Senior Citizen Home Safety Association has been providing the “Emergency Alarm System” service to ethnic minorities, with support including emergency support, health consultation, counselling, appointment to clinics and other community services. Services are offered in English and three EM languages (Hindi, Urdu and Punjabi) in addition to Cantonese. Support Service Centres for EMs will assist in publicising the service to EMs.)

* + 1. A Member suggested that an emergency service operated through Short Message Service (SMS) would be useful for those who did not use a smartphone.
    2. Mr Raymond Ho reported that the EOC had lined up meetings with several government departments on the use of translation and interpretation services as well as other issues on cultural sensitivity. The Chairman invited Mr Ho to update Members on the progress at the next meeting.
  1. The Chairman thanked for the presentations made by Dr Chan and Ms Wu.

1. Any Other Business
   1. In response to a Member’s enquiry on the Government’s policy on the provision of interpretation service by different departments, Mr Michael Yau of the Constitutional and Mainland Affairs Bureau (CMAB) explained that it had been sharing good practices with departments and would keep the subject under review. The Chairman supplemented that CMAB’s Administrative Guidelines required bureaux and departments to ensure that public services were accessible to all, and translation and interpretation support were in place to facilitate ethnic minorities in using these services. On the suggestion of recruiting a central pool of interpreters to serve all departments, a Member pointed out that the Judiciary maintained a list of court interpreters who speak various ethnic minority languages. All Government departments had access to the list and could engage these interpreters as and when necessary.
   2. The meeting was adjourned at 12:30 p.m.
   3. For the date of next meeting, Members would be duly informed nearer the time.

**Home Affairs Department**

**September 2016**