

## **Minutes of Twenty-eighth Meeting of the Children's Rights Forum**

Date : 13 October 2016 (Thursday)  
Time : 5:15 p.m.  
Venue : Function Room 3, 2/F,  
Kennedy Town Community Complex,  
12 Rock Hill Street, Kennedy Town, Hong Kong

### Attendance:

#### Constitutional and Mainland Affairs Bureau

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| 1) | Miss Rosanna LAW, JP<br>(Chairperson) | Deputy Secretary for Constitutional and Mainland Affairs              |
| 2) | Mr D. C. CHEUNG                       | Principal Assistant Secretary for Constitutional and Mainland Affairs |
| 3) | Mr Michael YAU                        | Assistant Secretary for Constitutional and Mainland Affairs           |
| 4) | Miss Ellen CHOW                       | Assistant Secretary for Constitutional and Mainland Affairs           |

#### Non-government organisations

#### Representatives

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|----|---|--|
| 1) | Against Child Abuse   | Ms WONG Man-ki<br>Ms TANG Wing-han<br>LU Tsz-ching   |
| 2) | Centre for Governance and<br>Citizenship<br>The Hong Kong Institute of<br>Education | Dr Gail YUEN   |
| 3) | Harmony House   | Mrs LEE LAU So-ying Doris  |
| 4) | Hong Kong Committee for the<br>United Nations Children's Fund<br>(UNICEF)           | Ms Joanne LAI<br><br><u>UNICEF Young Envoys Club and Voices of Youth</u><br>CHUNG Wing-fung Harrison<br>LEUNG Wing-ki Abby<br>YUE Hang-chi Rachel<br>IP Ho-kei Yuki<br>CHUNG Cho-kiu |
| 5) | Hong Kong Committee on<br>Children's Rights   | Ms Billy WONG<br>Miss Shirley WONG   |

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| 6) | Kids' Dream   | Douglas PEA<br>Angel WONG<br>Sarah FANG                       |
| 7) | Pentecostal Church of Hong Kong<br>Tseung Kwan O Nursery School | Ms WONG Luen-suet   |
| 8) | The Boys' & Girls' Clubs<br>Association of Hong Kong            | Mr CHEUNG Chiu-chun<br><br><u>Junior CEs</u><br>Klaudy CHEUNG |

Attendance by Invitation:

Discussion Item

- |    |                         |   |
|----|-------------------------|---|
| 1) | Mr CHAN Fu-man          | Principal Education Officer (Special Education),<br>Education Bureau              |
| 2) | Dr LAU Wing-yin, Verena | Senior Specialist (Educational Psychology Section<br>(Kowloon)), Education Bureau |

1. Introduction

- 1.1 The Chairperson welcomed representatives of non-government organisations (“NGOs”) and children representatives to the meeting.
- 1.2 As suggested by children representatives and in line with the arrangement of the last two meetings, future discussions at the Forum would be conducted in a group setting. Following the briefing given by the representative of the Education Bureau (“EDB”), attendees would be divided into two groups for group discussion.

2. Discussion item

Student Suicide (Paper No. CRF 3/2016)

- 2.1 2.1.1 The Chairperson advised that the subject for discussion at the meeting was proposed by children representatives. She then invited the representative of EDB to brief the meeting on the subject of student suicide and the progress report of the Committee on Prevention of Student Suicides.
- 2.1.2 Dr LAU gave a brief account of the paper (Paper No. CRF 3/2016) as follows:
- 2.1.3 Suicide was a complex behaviour with no single cause, but resulted from a complicated interaction of biological, psychological, cognitive and environmental factors.

- 2.1.4 Dr LAU briefed the meeting on the findings of a study conducted by the Hong Kong Jockey Club Centre for Suicide Research and Prevention at the University of Hong Kong which compared the suicide rate of adolescents between Hong Kong and some developed countries and neighbouring regions.
- 2.1.5 The Second Report of the Child Fatality Review Panel released by the Social Welfare Department in 2015 indicated that reasons for committing suicide among children aged under 18 were many, including health problem, various interpersonal relationship problems, worrying about the future, etc.
- 2.1.6 After looking into cases of student suicide, the Committee on Prevention of Student Suicides (“the Committee”) also found that the causes of student suicide were complicated and the contributing factors involved might include mental health problem, study-related adjustment problem, peer relationship problem, family-related adjustment problem, family relationship problem and emotion problem.
- 2.1.7 In some of the cases where the victims were suffering from mental illness, the problem had not been identified. Suicide of an individual usually happened with warning signs. Data of suicide cases revealed that there were more male suicide victims than female. Sensational media coverage might trigger suicidal acts.
- 2.1.8 Dr LAU briefed the meeting that the Committee recommended in the progress report, amongst other proposals, the adoption of universal prevention, selective prevention and indicated prevention strategies to enhance mental health services in schools. On universal prevention strategies, the Committee recommended that mental health promotion should be enhanced through co-ordination among different departments/organisations in conducting various mental health programmes and anti-stigma campaigns in schools. Besides, the Committee also recommended that bridging programmes conducted by schools for Secondary 1 and Secondary 4 students should be strengthened with an emphasis on students’ adjustment and adaptation rather than academic pursuit. With regard to selective prevention strategies, the Committee was of the view that early identification of and intervention for at-risk students should be strengthened through “gatekeeper” training targeting teachers to identify and assess the risks of students’ suicidal behaviours. In addition, screening tools and materials to assist the identification of at-risk students should be further enhanced and developed by EDB. As for indicated prevention strategies, the Committee considered that enhancing the interface among medical, education and social service was a critical task that had to be strengthened to ensure students in need received timely and appropriate mental health support services.
- 2.1.9 Dr LAU introduced to the attendees EDB’s online resources, including the Enhancing Life Resilience Information Kit.

2.1.10 Dr LAU then gave an account of the Joyful@School Campaign jointly organised by EDB and the Department of Health in 2016/17 school year in all primary and secondary schools in Hong Kong. With the aim of promoting mental well-being in schools, the Campaign further promoted the Joyful@HK Campaign's three key messages: "Sharing", "Mind" and "Enjoyment" in schools and enhanced students' knowledge and understanding of mental health through a series of activities.

2.1.11 Dr LAU expressed her gratitude to multiple sectors of the community which had been working actively to carry out various suicide prevention activities, contributing positively to the prevention of student suicides, examples of which were as follows:

- (i) It was encouraging to see a reduction in extensive sensational reporting in the media, reflecting their increased self-discipline in reporting behaviour.
- (ii) The social media had enhanced their support for individuals in need through promotion of online safety. Facebook had rolled out an online suicide prevention feature which worked like this: when users noticed any friends having suicidal tendency after reading their posts on Facebook, they could report the case immediately to Facebook to facilitate assistance and intervention from Facebook and other professionals, while Facebook would provide the user in need with emotional support and a suicide helpline.
- (iii) The Hong Kong Jockey Club Centre for Suicide Research and Prevention at the University of Hong Kong together with social media Facebook and NGOs had published a booklet to provide a guide to the public on how to appropriately help emotionally distressed or even suicidal individuals.

In addition, UGC-funded universities were equipped with professional counselling units to screen students' mental health condition, promote mental wellness and provide counselling and related services to students. Corresponding resources would be allocated to handle students' emotional and academic problems as well as to promote their mental well-being. Some universities adopted a positive psychology approach to enhance students' resilience.

2.1.12 Dr LAU advised that the relevant recommendations were contained in the Committee's progress report submitted in July. The final report was expected to be submitted to the Secretary for Education in late October.

2.1.13 Multi-sector collaboration between the education sector, health sector and social welfare sector was the way forward for prevention of student suicide. Suggestions from the community stakeholders for enhancing student suicide prevention work were welcome.

- 2.1.14 The Chairperson thanked Dr LAU for the briefing and invited attendees and children representatives to divide into two groups for group discussion.
- 2.2 Comments and questions on student suicide put forward by attendees and children representatives, as well as responses from the representative of EDB were as follows (Group 1):
- 2.2.1 Regarding the causes of student suicide, the Chairperson asked if there were any measures to address the environmental factor in a bid to prevent suicide. Mr CHAN of EDB advised that students should stay alert and be vigilant to their schoolmates' emotional changes by, say, taking note of the messages they posted on Facebook. Mr CHAN pointed out that Facebook had rolled out a new feature for suicide prevention. When users noticed any risk of suicide or self-harm from messages or photos posted by any friends, they could report the case to Facebook through the specified feature. Facebook would then review the content. If the user concerned was suspected to be at risk, he or she would get a pop-up window offering support in addressing emotional problem when next logged into Facebook.
- 2.2.2 An attendee commented that nowadays parents generally had high expectations of their children. They set the schedule of daily routine for their children ever since they were young. As a result, the children became passive and did not have the opportunity to express themselves. Besides, in an academic achievement-oriented community, people attached relatively less importance to habits for positive living (such as exercise and physical fitness), affecting life-balance. The attendee also pointed out that university students who grew up in a repressive environment generally lacked emotion-related words, making it difficult for them to ventilate their negative emotions.
- 2.2.3 A children representative shared with the meeting that he/she had contemplated suicide due to study pressure. Facing the difficult HKDSE subjects, he/she felt desperate. Fortunately with the support of his/her friends, he/she was able to cope with the difficult situation. The children representative remarked that students had been under immense pressure and were worried about their future. They would be viewed as a complete failure if they were unsuccessful in gaining admission to a university. On the other hand, students who concentrated on their studies were unable to develop extra-curricular interests or spare time to participate in extra-curricular activities. Another children representative shared with the meeting a case in which his/her schoolmate committed self-harm due to a romantic relationship problem. Fortunately, a schoolmate with whom he/she was on good terms identified the problem and the case was referred to a school social worker for following up. The children representative was concerned that it would be generally difficult for other schoolmates to make out what was happening.

- 2.2.4 An attendee expressed concern about the inadequate provision of mental health services in Hong Kong. Teachers, who had a hectic schedule and might not have received training on mental health counselling, had to rely on students or school social workers to identify suicide warning signs; serious cases would be referred to the mental hospital. Another attendee considered EDB's current promotional efforts inadequate and as a result different sectors of the community did not have an in-depth understanding of suicidal behaviours.
- 2.2.5 A children representative remarked that students experienced a sense of helplessness when confronted with a difficult predicament. With no trust in parents and teachers, they could not but confide in social workers or their peers, and sometimes even flared up to give vent to their emotions. The children representative also considered that parents influenced by the social atmosphere kept on exerting pressure on their children, neglecting their mental well-being.
- 2.2.6 An attendee pointed out that there was a serious inadequacy of mental health support services in Hong Kong. While patients had to wait for a long time for mental health services in public hospitals, each consultation session only lasted for 15 to 20 minutes, besides, it would take a long span of time before the patients could attend follow-up consultations, the existing service provision did not help much in relieving the patients' condition. On the other hand, mental health services provided by psychiatrists in private sectors were hardly affordable. The attendee had taken note that some teachers had been referring students with mental health problems to psychiatrists who they were well-acquainted with and charged an affordable fee, and remarked that EDB should provide more resources to teachers to promote the practice.
- 2.2.7 An attendee considered that under Hong Kong's present education system, parents and students were subjected to prolonged stress. After-school tutorials had become a common practice and family atmosphere had been affected. The attendee suggested that the situation should be addressed by relieving stress. The attendee pointed out that EDB had been relying too much on teachers to play the role of gatekeepers to identify students with mental health problems, adding to the burden of teachers, and suggested increasing the allocation of resources to relieve the burden of teachers. Another attendee was concerned that given the heavy workload of teachers, they did not have much time to communicate with their students, and thus unable to pay close attention to their needs. The attendee suggested that schools should be provided with additional resources for providing support to teachers.
- 2.2.8 An attendee said that life education should be stepped up and positive thinking as well as a sense of gratitude should be instilled in children at early childhood education stage which was the honeymoon period for children. Mr CHAN concurred that there were significant differences in children's learning when they moved from kindergarten to primary school

and from primary school to secondary school, and they needed time to adapt to the new environment. He called on schools to provide as much support to students as possible to enhance their ability to adjust.

- 2.2.9 Regarding the Committee's recommendations in respect of strengthening the bridging programmes conducted by schools for Secondary 1 and Secondary 4 students to enhance their ability to adjust, an attendee said that students had to face pressure at all learning stages and mental health promotion should start with young kids instead of targeting at Secondary 1 and Secondary 4 students only. In response, Mr CHAN said that Secondary 1 and Secondary 4 were relatively crucial transition periods, students at these two grades were more prone to having difficulty in adjustment, and so schools would particularly strengthen support to students at these stages. Apart from the efforts in supporting Secondary 1 and Secondary 4 students, schools had been promoting healthy development of students and enhancing their resilience by instilling in them positive values and attitude and teaching them ways to cope with various challenges in life through the "Personal Growth Education" and/or "Life Education" lessons and other programmes.
- 2.2.10 A children representative asked whether the Committee had consulted students in the course of compiling the report. Mr CHAN advised that five Working Groups on Mental Health, Families, Schools, Media and Youth/Post-secondary Institutions had been set up under the Committee to enable focused discussion of measures to prevent student suicide.
- 2.2.11 A children representative was concerned that people with mental health problems were reluctant to accept or acknowledge the fact that they had such problems. The children representative remarked that although there seemed to be no great changes for students who moved from Secondary 4 to Secondary 5, students at this stage too had to face adjustment problems as they had to catch up with the school work, cope with study pressure etc., and support on a long-term basis was needed.
- 2.2.12 An attendee shared with the meeting the importance of encouragement and acceptance. The attendee remarked that people with mental health problems should share their illness with their peers. If encountered problems that were beyond one's ability to address, early professional intervention should be sought.
- 2.2.13 Mr CHAN said that the "gatekeepers" might not have the corresponding abilities or skills to deal with exceptional circumstances. He advised them to refer suspected cases identified to professionals for follow-up actions. In the long run, Mr CHAN hoped that the community would change its attitude towards people with mental health problems and eliminate the stigma attached to them.
- 2.2.14 Mr CHAN thanked the attendees and children representatives for their questions and suggestions.

- 2.3 Comments and questions on student suicide put forward by attendees and children representatives, as well as responses from the representative of EDB were as follows (Group 2):
- 2.3.1 A children representative raised the point that primary schools had not been provided with adequate support and resources to promote mental health while there was a lack of support for students from school social workers. Apart from academic pressure, primary students also had problems of adapting to secondary school life. The children representative asked Dr LAU whether a mechanism had been put in place to forward a list of primary students with mental health problems to the secondary schools they attended for reference. Another children representative also noted that primary students were under heavy pressure, such as, pressure arising from drilling for the Territory-wide System Assessment. The children representative remarked that EDB's resources designated for preventing student suicide were inadequate, and suggested EDB conducting more talks and interactive workshops for parents to help them identify whether their children had mental health problems.
- 2.3.2 A children representative observed that university students paid no heed to mental health problems and the issue was seldom discussed among peers. Due to inadequate publicity of mental health services in universities, the existing resources had not been fully utilised by students with mental health problems to ventilate their emotions.
- 2.3.3 A children representative appreciated the Government's efforts in addressing student suicide. The children representative said that all suicide victims had a passive personality, they were reluctant to accept the professionals' intervention, nor would they take the initiative to search for relevant information for self-help. The children representative held that parents and teachers were the most trusted persons of students. Taking the subsidising of two teachers by the school he/she attended to receive counselling training as an example, the children representative suggested that EDB should provide related training to parents and teachers. The children representative noted that in most suicide cases, the victims had family relationship problems. With no sign of care and love from their family members, the victims would easily give up when they encountered difficulties.
- 2.3.4 A children representative observed that his/her peers generally chose to ventilate their emotions on social media platforms when they had negative feelings, so the victims' friends might be more likely to detect suicidal signs than their teachers, school social workers and parents.
- 2.3.5 A children representative urged people with mental health problems to get a friend to talk about the difficulties they encountered. The children representative shared the view that most of the suicide victims did not have the drive to seek help and would not take the initiative to attend workshops on stress relief. He/She also pointed out that the attendance rate of mental health workshops organised by universities had always been low. The children representative expressed concern about

inadequate resources for universities to provide counselling services. Help-seekers had been arranged to meet different counsellors at every counselling session. Due to the lack of continuity, long-term follow-up on cases of individual students was difficult.

- 2.3.6 A children representative considered the effectiveness of traditional ways of promotion, such as distributing leaflets and organising talks, were minimal. The children representative suggested removing the labelling effect by composing songs conveying positive messages and uploading the songs to online platforms. Another children representative suggested promoting the importance of mental health among primary students to enhance their resilience.
- 2.3.7 An attendee suggested that the Government should introduce more corresponding measures to allow the medical and health as well as social welfare sectors to assist students in addressing adjustment problems.
- 2.3.8 In response to the questions and concerns of children representatives and attendees, Dr LAU pointed out that a mechanism had been put in place to pass the information of primary students with mental health problems to the secondary schools they attended for reference subject to the consent of the parents concerned. However, as some parents were worried about the labelling effect, more communication should be established between schools and parents. Dr LAU also advised that there were student guidance personnel stationed at every primary school and school social workers (provided by the Social Welfare Department via NGOs) stationed at every secondary school; EDB had been extending the School-based Educational Psychology Service progressively to cater for students' different needs. Dr LAU pointed out that cases involving secondary students were generally more complicated than those involving primary students as secondary students might be emotionally disturbed due to, say, romantic relationship problem and academic problem.
- 2.3.9 In response to the view and question of a children representative and an attendee about encouraging students to seek assistance and how to promote mental health among young people, Dr LAU advised that EDB had been actively listening to the views of students. To illustrate, Ms Althea SUEN, President of the Hong Kong University Students' Union, had been invited to serve as a member of the Committee. Dr LAU pointed out that persons with suicidal tendency refused to seek treatment for fear of being labelled. Thus, reducing labelling effect should be conducive to encouraging people with mental health problems to seek early assistance.
- 2.3.10 Dr LAU then introduced the Joyful@School Campaign launched by EDB in collaboration with the Department of Health. Under the Campaign, schools were encouraged to organise school-based activities to enhance the understanding of mental health among teachers, students and parents; and students were encouraged to think from different angles in the face of challenges. As for promotional efforts, Dr LAU advised that the Joyful@HK Campaign had invited singer Ms Sammi CHENG to sing the

theme song “Through the Hurdles” to disseminate to young people the messages of maintaining a proactive attitude and standing ready to meet with difficulties. A children representative suggested that social media and artists which/who were popular among young people could continue to be invited to help promote positive messages in future. Targeting students’ adjustment problems, the Committee encouraged schools to conduct more adaptation and bridging programmes during the summer holiday to better prepare students for the new learning stage.

- 2.3.11 Dr LAU emphasised that suicide was a complex issue and was caused by multi-faceted factors. Based on existing data, the Committee concluded that there was no direct link between school pressure and student suicides.
- 2.3.12 A children representative noted that students were in general more resistance to the advice of the Government, teachers and parents. The children representative suggested EDB to make reference to the practices of other countries and **conduct more talks and training** to guide students to establish networks to facilitate mutual support and the seeking of assistance.
- 2.3.13 An attendee noted that people with mental health problems were mostly passive and asked how to identify people with such problems. Dr LAU advised that publications including an ebook had been produced to briefly introduce the suicide warning signs and urge people around students to watch for signs of mental illness to facilitate early identification of students with mental health problems.
- 2.3.14 A children representative was concerned that EDB’s resources for suicide prevention had not been fully utilised, and suggested that hyperlinks from the relevant websites to the schools’ intranet websites should be built to facilitate access by students to information provided thereat. Another children representative supported the setting up of networks to promote mutual help and suggested EDB to conduct related courses and training for students.
- 2.3.15 Dr LAU advised that parents also had an important role to play. Of the cases studied by the Committee, 70% involved family relationship problems, such as a gap between the expectations of parents and students. The Committee recommended that education for parents should be strengthened, such as launching a charter on happy children, to enhance interaction and communication between parents and teachers. She advised that existing resources for suicide prevention had already been uploaded onto EDB’s website. Members of the public might refer to the resources made available online for reference.
- 2.3.16 In sharing his/her views, a children representative suggested schools to provide counselling to students, and introduce to and discuss with them mental health resources during school assemblies. Another children representative noted that many students were emotionally disturbed due to romantic relationship problem, and considered that schools could conduct more talks on relationship with the opposite sex and also provide

relaxation training to students to help them ventilate their emotions.

- 2.3.17 A children representative was concerned that the frequent change of school social workers had made it difficult to follow up on student cases. The representative suggested that various sectors of the community should draw reference from overseas experiences and make use of social media and technology to identify help-seeking signs, so that early support for those having mental health problems could be provided.
- 2.3.18 Dr LAU thanked the attendees and children representatives for their questions and suggestions.

Recommendations have already been incorporated into the Final Report of the Committee on Prevention of Student Suicides by EDB. Please refer to the Final Report for details.

**Constitutional and Mainland Affairs Bureau**  
**February 2017**