

## Missing man in Kwai Chung located

A man who went missing in Kwai Chung was located.

Lai Wai-tak, aged 43, went missing after he left his residence in Kwai Shing West Estate on April 21. His family made a report to Police on June 6.

The man was located on Pei Ho Street in Sham Shui Po this afternoon (June 13). He sustained no injury and no suspicious circumstances were detected.

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## Hong Kong Customs seizes suspected illicit cigarettes (with photo)

Hong Kong Customs today (June 13) seized about 200 000 suspected illicit cigarettes with an estimated market value of about \$500,000 and a duty potential of about \$400,000 at Man Kam To Control Point.

Customs officers intercepted an incoming truck declared as carrying assorted goods at Man Kam To Control Point this morning. After inspection, Customs officers found the batch of suspected illicit cigarettes inside 15 cartons packed with small tables.

The 62-year-old male driver was arrested and the truck was detained. Investigation is ongoing.

Smuggling is a serious offence. Under the Import and Export Ordinance, any person found guilty of importing or exporting unmanifested cargo is liable to a maximum fine of \$2 million and imprisonment for seven years.

Members of the public may report any suspected illicit cigarette activities to the Customs 24-hour hotline 2545 6182 or its dedicated crime-reporting email account ([crimereport@customs.gov.hk](mailto:crimereport@customs.gov.hk)).



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## [FS visits Sham Shui Po District \(with photos\)](#)

The Financial Secretary, Mr Paul Chan, visited Sham Shui Po District this afternoon (June 13). Apart from meeting with members of the Sham Shui Po District Council (SSPDC), he also called on an organisation and a platform supporting development of the creative industries in Hong Kong.

Accompanied by the Chairman of the SSPDC, Mr Ambrose Cheung, and the District Officer (Sham Shui Po), Mr Damian Lee, Mr Chan first visited the Jockey Club Creative Arts Centre (JCCAC) and exchanged views with artists there.

Housed in a building converted from an old factory estate, the JCCAC supports the nurturing of local creative talent and promotion of arts and culture through providing arts studios as well as display and performing venues for artists. Around 140 artists and arts organisations of different art disciplines are currently based in the JCCAC.

Later, Mr Chan visited D2 Place in Lai Chi Kok. D2 Place was a project under the Scheme on Revitalisation of Industrial Buildings and was transformed from industrial buildings to commercial uses. The project supports local start-ups and entrepreneurs in developing their business through concessionary rental and support in their operations and marketing. Moreover, it also provides additional shared space for start-ups and creative work through the Space Sharing Scheme for Youth.

Mr Chan said that he was very pleased to see different sectors of society collaborate to support the development of creative industries, so to provide diversified career development opportunities for young people. The Government is committed to supporting the development of the creative industries. Since 2009, the Government has injected a total of \$1 billion into the CreateSmart Initiative (CSI). In the 2018-19 financial year, the Government will inject another \$1 billion into the CSI to strengthen support for the development of the creative industries, especially in nurturing youths and helping start-ups, and also to enable the Hong Kong Design Centre to implement initiatives to enhance public understanding of the value of creativity and design.

Mr Chan then met with the members of the SSPDC to learn more about the latest developments of the district and to exchange views on matters of mutual interest.



## LCQ19: Support for women who have suffered a miscarriage and their families

Following is a question by the Dr Hon Elizabeth Quat and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (June 13):

Question:

Some studies have pointed out that women who have experienced miscarriage often have various negative emotions, such as self-blame, fear, depression and anxiety. However, members of the public in general do not understand much about the needs of women who have suffered a miscarriage and their families, and the Government has failed to provide appropriate support to those people. In this connection, will the Government inform this Council:

(1) of the number of miscarriage cases in each of the past 10 years; whether the Government will proactively provide the following information to women who have suffered a miscarriage and their families: follow-up medical

procedures after having miscarriage, approaches and procedure for handling abortuses, the rights of the parents of abortuses, and matters requiring attention after having miscarriage and related support services; if so, of the details; if not, the reasons for that;

(2) whether it will establish a website to provide comprehensive knowledge and information about miscarriage to enable members of the public to learn how to console relatives and friends who have suffered a miscarriage and their families; if so, of the details; if not, the reasons for that;

(3) whether it will allocate additional resources to provide support for women who have suffered a miscarriage (including a counselling hotline and home visit service); if so, of the details and the timetable; if not, the reasons for that;

(4) whether it has issued work guidelines to medical staff and social workers as well as provided them with training on counselling skills, to enable them to express appropriate care for women who have suffered a miscarriage and their families; if not, of the reasons for that;

(5) as some studies have revealed that alternative medicine, such as massage, psychological counselling and herbal medicine, may relieve symptoms of depression and anxiety experienced by women who have suffered a miscarriage, whether the Government will allocate funds for studying the development of services on alternative medicine, and whether it will, by making reference to the practice of hospitals in the United Kingdom, provide medical certification to parents of abortuses of less than 24 weeks' gestation to facilitate them to arrange burial for the abortuses and, upon request, provide parents of abortuses of late miscarriages (of 14 to 24 weeks' gestation) with photos as well as hand and foot prints of the abortuses for commemorative purpose; if so, of the details and the timetable; if not, the reasons for that; and

(6) as the Government has indicated that for abortuses of less than 24 weeks' gestation, where feasible and provided that relevant legal requirements and such conditions as public health have been met, the Hospital Authority (HA) will allow the parents concerned to claim the abortuses, whether it knows the criteria adopted by HA for determining the "feasible" conditions; whether the Government will expeditiously amend the legislation and simplify the relevant procedure so as to allow parents of abortuses of less than 24 weeks' gestation to claim the abortuses as quickly as possible for arranging burial; if so, of the details and the timetable; if not, the reasons for that?

Reply:

President,

My reply to the various parts of the question raised by the Dr Hon Elizabeth Quat is as follows:

(1) to (5) The table below sets out the number of discharges of inpatients

admitted for abortion annually from 2007 to 2016:

Year	Number of discharges of inpatients admitted for abortion *
2007	10 186
2008	10 648
2009	10 147
2010	10 374
2011	11 696
2012	12 130
2013	9 817
2014	9 539
2015	9 271
2016	9 166

\* "Abortion" includes spontaneous abortion and medical abortion. The above statistics include discharges of inpatients from hospitals of the Hospital Authority, correctional institution hospitals and private hospitals. For details, please refer to the [Tables on Health Status and Health Services](#) published by the Department of Health.

The Maternal and Child Health Centres (MCHCs) of the Department of Health (DH) collaborate with the obstetrics departments of the Hospital Authority (HA) to provide antenatal care for pregnant women. Medical staff of the MCHCs will refer pregnant women showing signs of miscarriage to the obstetrics and gynaecology departments of the HA for further assessment and follow-up consultation.

Bereavement counselling teams are set up in the obstetrics and gynaecology departments of the HA to take care of parents who have experienced a miscarriage or baby loss through the provision of emotional support and counselling services to help them recover from bereavement.

The healthcare staff taking care of the abortuses will clean them, dress them in specially-made angel gowns and beanies, or the clothing prepared by their parents, and put them in a purpose-made basket or baby cot for them to meet their parents. Parents may cuddle them and spend some time with them before bidding farewell. Healthcare staff will take photos for them and prepare memorial cards with their footprints for their parents' commemoration. If necessary, the counselling team concerned may keep the memorial card for a period of time for the mother to decide whether or not to take the card back in the follow-up consultation.

Individual parents who want to claim the abortuses may express their wishes to the counselling team concerned before discharge. Their requests will be referred to the Patient Relations Officer for follow-up action and assistance as appropriate. The bereavement counselling team will also refer cases to medical social workers or clinical psychologists in the light of

individual circumstances.

In addition, the 65 Integrated Family Service Centres and the two Integrated Services Centres operated by the Social Welfare Department (SWD) or non-governmental organisations provide individuals and families in need, including women who have suffered a miscarriage, in specific localities with a spectrum of preventive, supportive and remedial welfare services, which include counselling or support/mutual help groups (please visit the [SWD's website](#) for details). Understanding the pressure on women who have suffered a miscarriage and their physical and mental well-being, social workers will conduct comprehensive assessment on the needs of each service user. If necessary, home visits, interviews and clinical psychological services will be arranged. In general, they provide appropriate services for individuals and families in need through different work strategies, such as early identification and intervention, service integration and partnership with other service stakeholders.

People in need (including women who have suffered a miscarriage) may call the 24-hour SWD hotline at 2343 2255 to seek immediate counselling or referral to appropriate service units for support, consultation and follow-up services.

Having received training on professional counselling skills, social workers of the SWD provide the necessary psychological counselling for women suffering a miscarriage and their families to help them overcome their emotional problems or distress arising from the miscarriage and render them emotional support service. If psychotherapy is required, the social workers will make referrals for those in need to receive clinical psychological service. Advanced counselling courses are organised by the Staff Development and Training Section of the SWD from time to time to enhance the professional counselling skills of its social workers.

In addition, the Family Health Service of the DH and the HA have jointly compiled health information on miscarriage, which has been uploaded to the webpages of the DH (note 1) and the HA (note 2) respectively.

(6) As for abortuses of less than 24 weeks' gestation stored in public hospitals, parents will be allowed to claim the abortuses according to their wishes where feasible and provided that relevant legal requirements and such conditions as public health have been met. The hospitals will cater for the needs of the parents as far as possible and remind them of the matters requiring attention in the handling of abortuses, including public health requirements and burial arrangement considerations.

The Food and Health Bureau is actively examining options of legislative amendments to facilitate better handling of abortuses. The HA will also consider simplifying the claim procedure so that parents will be able to collect their abortuses as early as possible.

Note 1: [www.fhs.gov.hk/english/health\\_info/woman/15681.html](http://www.fhs.gov.hk/english/health_info/woman/15681.html)

Note 2: [www3.ha.org.hk/ntwc/csc/health/Leaflet/0&G/0&G07.pdf](http://www3.ha.org.hk/ntwc/csc/health/Leaflet/0&G/0&G07.pdf) and [www3.ha.org.hk/ntwc/csc/health/Leaflet/0&G/0&G06.pdf](http://www3.ha.org.hk/ntwc/csc/health/Leaflet/0&G/0&G06.pdf) (Only Chinese version is

available.)

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## Operators fined for illegal club operations

Two men and a woman were fined from \$2,000 to \$6,000 at the Kowloon City Magistrates' Courts today (June 13) for contravening the Clubs (Safety of Premises) Ordinance.

The courts heard that in November last year, officers from the Office of the Licensing Authority (OLA) of the Home Affairs Department conducted inspections at three clubs on Nathan Road, Dundas Street and Portland Street in Kowloon which had been operating with certificates of compliance (CoCs).

During the investigation in the club on Nathan Road, the OLA officers posed as customers and patronised the club for food and drinks without being asked to show their membership status or being invited to join the club as members. Also, the club was found to have a layout that deviated from the registered drawings and the number of people at the club during the inspection exceeded the maximum allowable capacity as stipulated in the CoC. Conditions 3, 6 and 19 of the CoC were breached.

The club on Dundas Street also served non-members. Condition 19 of the CoC was breached.

The club on Portland Street served non-members and the OLA officers also found that the exit route had been obstructed. Conditions 12 and 19 of the CoC were breached.

The men and the woman, being the CoC holders of the clubs, were charged with contravening section 21(2) of the Ordinance.

A spokesman for the department reminded all CoC holders to comply with the conditions as stipulated therein. Enforcement action will continue to be taken against illegal club operations.