LCQ15: Making good use of counselling professionals to support mental health services

Following is a question by the Hon Chan Hoi-yan and a written reply by the Secretary for Health, Professor Lo Chung-mau, in the Legislative Council today (October 23):

Question:

It has been reported that according to the information of the Department of Health, both the proportions of students in Hong Kong who planned to commit suicide and who attempted suicide in the 2022-2023 school year hit a record high for the past five years, reflecting the severe challenges faced by Hong Kong's mental health services and support system. There are views that as there are now only some 460 psychiatric specialists in Hong Kong, and people in need may not be able to receive timely support given such limited manpower, Hong Kong can make good use of counselling professionals to share and support its work on mental health services. In this connection, will the Government inform this Council:

- (1) whether it has compiled statistics on the number of subsidised programmes related to the counselling profession offered by tertiary institutions in Hong Kong;
- (2) whether it knows the number of graduates with qualifications related to counselling in each of the past five years and, among them, the number of those who joined the counselling profession after graduation;
- (3) whether it has compiled statistics on public and subsidised mental health service items currently provided by counselling professionals in Hong Kong (set out by public and subsidised services);
- (4) whether it has compiled statistics on the respective numbers of counselling professionals that need to be employed and have been employed by public organisations in Hong Kong at present;
- (5) of the community support services provided to new patients on the waiting list for psychiatric specialist services in public hospitals, and whether the authorities will consider providing additional support to patients with longer waiting time, such as arranging counselling professionals to provide services (including emotional counselling and service referrals) for patients with mild symptoms; if so, of the details; if not, the reasons for that;
- (6) whether the authorities will consider setting up a registration system and the relevant qualifications framework for counselling professionals in Hong Kong, as well as drawing up related professional standards and formulating codes of professional conduct, so as to regulate the relevant

profession; if so, of the details; if not, the reasons for that; and

(7) of the authorities' future planning to make good use of counselling professionals to support mental health services in Hong Kong, as well as the details of the relevant work?

Reply:

President,

Student suicide is a complex social problem involving multiple risk and protective factors which should not be addressed solely through mental health factors or from a medical perspective, and issues on relevant supporting manpower should be tackled through co-ordination between different professionals and supporting personnel.

In consultation with the Education Bureau (EDB), the Hospital Authority (HA), the Labour and Welfare Bureau and the Social Welfare Department (SWD), the consolidated reply in response to the question raised by the Hon Chan Hoi-yan is as follows:

(1) and (2) The eight University Grants Committee-funded universities do not offer publicly-funded counselling degree programmes at present. As regards the self-financing post-secondary education sector, various post-secondary institutions offer a total of 14 locally-accredited self-financing post-secondary programmes that are relevant to the counselling profession in the 2024/25 academic year, including two sub-degree, one undergraduate and 11 taught postgraduate programmes. The number of graduates of relevant programmes in the past five academic years are set out in the table below.

	Academic Year				
	2018/19	2019/20	2020/21	2021/22	2022/23
Sub-degree	104	84	59	37	110
Undergraduate	92	103	90	97	90
Taught Postgraduate	313	378	426	407	466

Note 1: The table above includes programmes with English titles involving the keywords "Counsel" / "Guidance".

Note 2: Sub-degree programmes cover full-time Associate Degree and Higher Diploma programmes.

Note 3: Undergraduate programmes cover full-time first-year-first-degree and top-up degree programmes.

Note 4: Taught postgraduate programmes cover both full-time and part-time Postgraduate Certificate with a minimum duration of one year, Postgraduate Diploma, Master's, and Doctoral degree programmes.

Note 5: Information on the number of graduates for the 2023/24 academic year is not yet available from relevant institutions.

Apart from providing mental health support, counselling staff also

provide appropriate counselling services in other service units, such as family services, schools and the workplace, according to the needs of the service targets.

The EDB does not collect information on the graduates of the abovementioned programmes who have joined the counselling profession.

(3) and (4) Mental health service providers within the structure of the Government and the HA such as doctors, nurses, clinical and educational psychologists and social workers, will consider whether to incorporate the element of counselling in the course of service delivery according to the needs of the service targets. Relevant organisations and the HA will also arrange training for relevant personnel to enhance their counselling skills.

Apart from the aforementioned professional grade staff members, schools and social welfare organisations may employ counselling personnel on a need basis. For welfare service units, subject to their compliance with the requirements of the Funding and Service Agreement as well as the relevant statutory staffing requirements, non-governmental organisations (NGOs) subvented by the SWD may flexibly deploy resources to arrange appropriate personnel, including employing counselling personnel or purchasing counselling services to meet the operational and service targets' needs. For example, Integrated Community Centres for Mental Wellness (ICCMWs) may employ counselling personnel according to their needs to provide services to persons with mental health needs. For schools, the EDB provides comprehensive student quidance services through multi-disciplinary collaboration and the "Whole School Approach". Apart from teachers, school social workers and school-based educational psychologists, schools can also employ additional student quidance personnel or procure related services from organisations according to students' needs, flexibly deploying grants provided by the Government or pooling together other school resources to strengthen the support for students.

(5) The HA has specifically set an additional target for psychiatric specialist out-patient clinics (SOPCs) last year, that is, the overall median waiting time for urgent and semi-urgent new cases should be no more than one week and four weeks respectively. The relevant target has already been achieved, ensuring that patients with urgent needs can receive treatment within a reasonable time. The HA will continue to strengthen its psychiatric SOPC services and improve the waiting time for urgent and semi-urgent new cases, including increasing consultation quotas. The HA will also take care of more psychiatric patients in need by strengthening its manpower and through the Public-Private Partnership Programme, as well as enhancing the services of psychiatric nurse clinics to allow patients to receive follow-up while waiting for SOPC services or follow-up appointments. If there is any change in the mental conditions of patients, they may return to their respective psychiatric SOPCs for re-assessment to determine whether they need to advance their consultation or seek treatment from the accident and emergency services.

The Health Bureau launched the Pilot Scheme on New Service Protocol for Child and Adolescent with Attention Deficit Hyperactivity Disorder and

Comorbidity to provide multi-disciplinary assessment, treatment and support services to children and adolescents with or suspected to have Attention Deficit / Hyperactivity Disorder and Comorbidities while they are waiting for HA services. In addition, the SWD provides subvention to NGOs to operate ICCMWs across the city. Following the Chief Executive's announcement in the 2024 Policy Address that an additional ICCMW will be set up in the first quarter of 2026, the total number of ICCMWs across the city will increase to 25, providing community support services to persons with mental health needs.

(6) and (7) Mental health encompasses various levels and aspects such as social service, school education, community support and medical care. Not all individuals with mental health problems need to seek treatment from psychiatrists. In recent years, mental health services introduced by the Government have, in varying degrees, implemented the concept of stepped care model, under which members of the public are referred to different levels of mental health services according to their mental health needs and severity. For example, the Student Mental Health Support Scheme launched in the 2016/17 academic year has applied the stepped care model to provide multidisciplinary support services to students with mental health needs in schools through tripartite collaboration among the medical, education and social sectors.

The 2024 Policy Address announced that the Government will extend integrated services based on a medical-educational-social collaboration model to promote mental health. The Advisory Committee on Mental Health (ACMH) will formulate a stepped care model for mental health, through developing a multidisciplinary framework with tiers from dealing with general emotional problems in the frontline to handling cases requiring follow-up and more serious mental illnesses cases. The framework sets out the roles of different professionals (such as teaching staff, social workers and healthcare workers, along with other supporting personnel and services providers) and their division of work in the provision of mental health services for cases in each tier, enabling them to work together and perform their respective roles smoothly, with a view to making good use of multi-disciplinary staff to assist in handling various types of cases with mental health needs in a systematic manner.

To ensure the quality and standard of services, the Government will review the appropriate training qualifications and quality assurance requirements for different professionals and support staff according to risk-based needs during the formulation of the stepped care model for mental health. In the process, the Government will also review the relevant personnel providing counselling services. A working group on the stepped care model for mental health has been established under the ACMH to take forward the work and is expected to submit a report by end‑2025.