

LCQ21: Support for families of suicide victims and relevant associate professionals

Following is a question by the Hon Tang Fei and a written reply by the Acting Secretary for Health, Dr Libby Lee, in the Legislative Council today (May 29):

Question:

It has been reported that according to the data released by the Hong Kong Jockey Club Centre for Suicide Research and Prevention of the University of Hong Kong in September last year, the suicide rate in Hong Kong in 2022 was 14.5 (meaning that 14.5 persons died by suicide per 100 000 persons), representing a 17.9 per cent increase over the figure of 12.3 in 2021. Moreover, in the first 11 months of 2023, there were 31 suspected fatal student suicide cases reported to the Education Bureau by all primary and secondary schools in Hong Kong. There are views that despite the upward trend in the number of suicide cases, the support provided by the community for families of suicide victims and relevant associate professionals is inadequate. In this connection, will the Government inform this Council:

(1) how the existing policy takes care of and satisfies the demand of families of suicide victims for mental health and community support; whether it will formulate programmes or measures targeted at this group of people;

(2) of the targeted public education programmes in place to dispel public prejudice and misconceptions about families of suicide victims, and to promote empathy and support for them;

(3) whether it will formulate new measures to prevent suicide, particularly in terms of early identification and intervention in respect of people at high risk of suicide, and whether their families will be covered by such measures; if so, of the details and the support provided for them;

(4) how resources are currently allocated and optimised to strengthen the support for relevant associate professionals in suicide prevention work; whether it has plans to introduce new relevant professional training programmes or improve the existing programmes, so as to enhance the capability of relevant associate professionals to identify and deal with people at risk of suicide; and

(5) regarding interdepartmental co-operation, how the Government improves co-ordination among various relevant government departments and non-governmental organisations, so as to form an effective support network to help relevant associate professionals carry out suicide prevention work more effectively?

Reply:

President,

Suicidal behaviour is a complex social phenomenon affected by a multitude of factors. The Government attaches great importance to suicide prevention and has been providing multi-disciplinary and cross-sectoral support to persons with suicidal tendency and their families through co-ordination and co-operation among various bureaux and departments (including the Education Bureau (EDB), the Health Bureau (HHB), the Department of Health (DH), the Labour and Welfare Bureau, and the Social Welfare Department (SWD)), non-government organisations (NGOs) and other stakeholders in the community. Family members of suicide victims in particular need multi-faceted support and assistance in adapting to the change brought about by the death of a loved one and coping with grief, so as to tide over the difficult period.

In consultation with the relevant bureaux and departments, the reply to the question raised by the Hon Tang Fei is as follows:

(1) To address the mental health and needs of family members of suicide victims, different government bureaux and departments, the Hospital Authority (HA) and government-subsidised NGOs have been providing mental health support and community support to family members of suicide victims, including:

(a) if the school is aware that a student is a family member of a suicide victim, the school's multi-disciplinary team, including guidance personnel, school social workers, school-based educational psychologists, will provide appropriate support according to the student's needs, maintain communication with the parents to understand the student's emotional condition, and provide further assistance where necessary, including referral of the student in emotional distress to professionals for bereavement counselling services;

(b) the SWD provides suicide prevention services through subsidising NGOs, such as the Suicide Crisis Intervention Centre (SCIC) of the Samaritan Befrienders Hong Kong, to provide outreaching, immediate risk intervention and intensive counselling services for persons in need (including family members of suicide victims). The SCIC also proactively engages internet users with suicidal tendency, with a view to calming their negative emotions and rendering timely support;

(c) the HA and the SWD's medical social workers also provide appropriate assistance for patients and their family members in need (including family members of suicide victims), including financial assistance, counselling services, connection with community resources, in order to facilitate their recovery and re-integration into society;

(d) the HA's Mental Health Direct provides support on mental health issues to members of the public (including family members of suicide victims). The hotline operates around the clock and is answered by psychiatric nurses offering professional advice; and

(e) the HHB's 18111 – Mental Health Support Hotline provides one-stop, round-the-clock emotional and mental health support for people with mental health

needs (including family members of suicide victims). Callers will be provided with service information or referred to appropriate service organisations based on their individual needs.

(2) The Government has earmarked a recurrent annual funding of \$50 million to embark on an ongoing mental health promotion and public education initiative to enhance public understanding of mental health, including eliminating prejudice of the public against persons with mental health problems and promoting public sympathy, understanding and support for suicidal persons and their families. In particular, the "Shall We Talk" initiative disseminates mental health-related messages, including the promotion of suicide prevention knowledge and skills and relevant help-seeking information to tie in with the "World Suicide Prevention Day", through various channels such as its one-stop website (shallwetalk.hk), social media pages, TV and radio programmes, offline events.

(3)-(5) In terms of suicide prevention, different government bureaux and departments, the HA and government-subsided NGOs have been providing suicide prevention services targeting suicidal risks through a number of measures, and the multi-disciplinary and cross-sectoral teams providing the services have all received relevant professional training. Relevant services include:

(a) the EDB is committed to providing "gatekeeper" training for teachers, parents and students to enable their early identification and support for students with mental health needs (including those with suicidal risks). There are professionals in schools, including guidance personnel, school social workers and school-based educational psychologists, who provide appropriate support and referral services to students with mental health needs. The HHB, in collaboration with the EDB, the HA and the SWD, has also launched the Student Mental Health Support Scheme to provide appropriate support services for students with mental health needs. In view of the rising trend of student suicide cases in 2023, the Government has immediately taken a number of actions and implemented the Three-Tier School-based Emergency Mechanism through cross-departmental collaboration from December 2023 to December 2024 in all secondary schools in Hong Kong, working together with schools, parents and other stakeholders in society, as well as the schools' multi-disciplinary team, off-campus support network and medical services, to ensure early identification of and support for students at high risk;

(b) the SWD set up five Cyber Youth Support Teams in 2018 to proactively search and approach at-risk and hidden youths through online platforms commonly used by young people and provide timely intervention, support and counselling service through online and offline modes to youths in needs (including those who are emotionally unstable and have suicidal thoughts). The SWD also provides subventions to an NGO to operate the "Hotline Service for Youth at Risk" which provides appropriate counselling and referral services through telephone contacts for at risk groups such as children and youths who are emotionally unstable, have suicidal thoughts or attempt to commit suicide;

(c) through subvention to NGOs, the SWD operates 24 Integrated Community Centres for Mental Wellness across the city to provide one-stop and district-

based community support services, ranging from prevention to risk management for persons in mental recovery, persons with mental health needs and their families or carers. These services include public education, day training, counselling services, outreaching visits, case referrals and peer support services; and

(d) targeting elderly with suicidal risks, the HA has implemented the Elderly Suicide Prevention Programme (ESPP) since 2002 to provide timely and appropriate psychiatric diagnosis and treatments for elderly suspected to have suicidal tendency, with a view to reducing the suicidal risk of the elderly concerned. Under the ESPP, elderly assessed to be at suicidal risk will be immediately referred to the HA's psychiatric services by the SWD, NGOs, social workers or doctors for further diagnosis and treatment.