Notes of the Fifth Meeting of the Commission on Children

Date : 16 August 2019

Time : 2:30 p.m.

Venue: 5/F, West Wing, Central Government Offices

Present

Chairperson

Mr Matthew Cheung Kin-chung Chief Secretary for Administration

(CS)

Vice-chairperson

Dr Law Chi-kwong Secretary for Labour and Welfare

(SLW)

Ex-officio Members

Dr Christine Choi Under Secretary for Education (USED)

(for Secretary for Education)

Dr Chui Tak-yi Under Secretary for Food and Health

(for Secretary for Food and Health)

Mr Jack Chan Under Secretary for Home Affairs

(for Secretary for Home Affairs)

Miss Rosanna Law Deputy Secretary for Constitutional

and Mainland Affairs (1)

(for Secretary for Constitutional and

Mainland Affairs)

Mr Lam Ka-tai Acting Director of Social Welfare

Mr Howard Yam Assistant Director (3), Home Affairs

Department

(for Director of Home Affairs)

Dr Thomas Chung Consultant Community Medicine

(Family and Student Health Services),

(ConCM(F&SHS))

Department of Health

(for Director of Health)

Ms Chan Yuen-han Chairperson of Women's Commission

Prof Daniel Shek Tan-lei Chairperson of Family Council

Non-official Members

Mr Peter Au Yeung Wai-hong

Mr Chow Wai-chung

Ms Kathy Chung Lai-kam

Mr Dennis Ho Chi-kuen

Dr Patrick Ip

Dr Sanly Kam Shau-wan

Mr Edwin Lee

Mrs Priscilla Lui Tsang Sun-kai

Ms Shalini Mahtani

Ms Susan So Suk-yin

Ms Michelle Tam Chi-yun

Dr Sandra Tsang Kit-man

Mr Gary Wong Chi-him

Dr Lilian Wong Hiu-lei

Ms Kathy Wong Kin-ho

Dr Wong Kwai-yau

Secretary

Miss Karen Shing Acting Principal Assistant Secretary

for Labour and Welfare (Welfare) 1

In attendance

Chief Secretary for Administration's Private Office

Miss Carrie Chang Administrative Assistant to Chief Secretary

for Administration

Ms Veronica Wong Press Secretary to Chief Secretary for

Administration

Labour and Welfare Bureau (LWB)

Miss Leonia Tai Acting Permanent Secretary for Labour and

Welfare / Deputy Secretary for Labour and

Welfare (Welfare) 1 (DS(W)1)

Ms Terry Cheung Chief Executive Officer (Commission on

Children)

Food and Health Bureau (FHB)

Mr Chris Fung Principal Assistant Secretary for Food and

[For item 3 only] Health (Health) 3 (PAS(H)3)

Hospital Authority (HA)

Dr Lee Tsz-leung Hospital Chief Executive of Hong Kong

[For item 3 only] Children's Hospital

Dr Lee So-lun Chief of Service (Paediatrics and Adolescent

[For item 3 only] Medicine), Queen Mary Hospital

Ms Vivian To
Senior Executive Officer (External Relations For item 3 only)
& Donation Management), Hong Kong

Children's Hospital

Education Bureau (EDB)

Mr Martin Mui Senior Specialist (Special Education Support

[For item 4 only] 4) (SS(SES)4)

Ms Christine Ng Senior Inspector (Special Education Support

[For item 4 only] 3)1

Census and Statistics Department (C&SD)

Ms Iris Law Assistant Commissioner (Social)

[For item 5 only] (AC(S))

Mr Matthew Wong Senior Statistician (Census Planning)1

[For item 5 only]

Social Welfare Department (SWD)

Ms Pang Kit-ling
Miss Chan Lai-chu

[For item 4 only]

Assistant Director (Family & Child Welfare)

Chief Social Work Officer (Rehabilitation and

Medical Social Services)1 (CSWO(RM)1)

Department of Health (DH)

Dr Florence Lee Consultant Paediatrician (Child Assessment

Service)

Member absent with apologies

Miss Bakar Fariha Salma Deiya Miss Cheng Hui-kiu Ms Janus Cheng Mr Kenny Ng Kwan-lim Dr Halina Poon Suk-han

Item 1: Confirmation of the Notes of the Fourth Meeting held on 23 May 2019

The draft notes of the fourth meeting were circulated to Members for comment on 8 August 2019. Taking on board Members' comments, revised notes with amendments made to paragraphs 3(e), 4 and 7(a) were circulated to Members before the meeting. <u>CS</u> and <u>Members</u> confirmed the revised draft notes without further amendment.

[Post meeting note: Ms Susan So declared interest to the Chairman and Members on 20 August 2019 for agenda item 5 "Provision of School Social Work Service at Primary Schools and Pre-primary Institutions" of the fourth meeting as her organisation was one of the service providers of the first and second phases of the Pilot Scheme of Provision of Social Work Services for Pre-primary Institutions.]

Item 2: Matters arising

- 2. On <u>CS</u>' invitation, <u>DS(W)1</u> briefed Members on the progress of the matters arising from the last Commission meeting
 - (a) a list of follow-up actions for monitoring of progress had been circulated to Members on 15 August 2019. The Secretariat would update the list after each Commission meeting and circulate it to relevant bureaux/departments (B/Ds) for comments and follow-up actions. The updated list would be issued to Members, together with other meeting materials, before each Commission meeting;
 - (b) as discussed at the Commission meeting on 23 May 2019, a children summit might be included as one of the series of summits to be chaired by the Chief Executive in 2020. The Commission would be consulted in due course on the best timing for this and the specific theme(s) to be covered; and
 - (c) the Secretariat was also following up on the decision of organising a smaller scale forum in November 2019 to engage stakeholders on the work of the Commission, and a brainstorming session with Members. The Secretariat would brief Members on the detailed arrangements in due course.

3. Prior to the meeting, a Member had suggested discussing four additional items, viz. (i) the Commission's role in safeguarding children's general well-being in the recent social unrest; (ii) draft revised "Procedural Guide on Protecting Children from Maltreatment"; (iii) the Child Fatality Review Panel and its reports; and (iv) children summit proposed for end 2019. CS suggested and Members agreed that items (i) and (ii) could be discussed under "Any Other Business" (AOB) while item (iii) would be reported under Agenda Item 6 on Reports of the Working Groups (WGs), as the matter was discussed at the last meeting of the WG on Research and Public Engagement. As for item (iv), the latest progress was reported under Agenda Item 2 "Matters Arising" (i.e. paragraph 2(b) above referred).

Item 3: Early Childhood Intervention and Development and Child Assessment [Paper No. 10/2019]

- 4. A copy of the "Journal of Adolescent Health" was tabled at the meeting by <u>Prof Daniel Shek</u> for Members' reference.
- 5. <u>Mr Peter Au Yeung</u> declared interest for this item as his organisation had been providing assessment service for children who were suspected to have developmental disorders.
- 6. <u>CS</u> invited <u>PAS(H)</u> to brief Members on the services provided by Department of Health (DH) and Hospital Authority (HA) on the screening, assessment, diagnosis and intervention for children and adolescents with developmental disorders.
- 7. Members' views and suggestions were summarised as follows
 - (a) Regarding the overall policy and provision of services
 - (i) the coordination among B/Ds in providing assessment, rehabilitation and welfare services should be enhanced. Members pointed out that repeated child abuse and other forms of maltreatment were commonly found in death cases of children with disadvantaged background, revealing that the existing services might have failed to reach out to this high-risk group of children. The Government should improve multi-disciplinary and cross-sectoral coordination (e.g. social work, medical, legal) in identifying and supporting the high-risk families;

- (ii) a central registry of children and adolescents with special needs should be set up to facilitate the provision of one-stop service (from stages of assessment, diagnosis to rehabilitation) for them;
- (iii) healthcare manpower planning should be improved, including increasing the manpower supply and strengthening the training for healthcare professions. A study to analyse the situation of children with special needs with a view to identifying the manpower and resources needs might be considered;
- (iv) the Government should expedite the implementation of the accredited registers scheme for healthcare professions not subject to statutory regulation (AR Scheme). The accreditation would enable parents to make informed choices on professional healthcare services for their children;
- (v) quality stimulation to children was very important to their development. The Government should strengthen parent education to encourage and foster good parent-children relationship. Besides, parents should be involved in the assessment and intervention process for children to facilitate the rehabilitation treatment at home; and
- (vi) additional resources should be provided for the research and development of tailor-made assessment tools to meet the needs of children in Hong Kong;
- (b) On the provision of assessment and intervention services
 - (i) supplementary information on the waiting time of various services (especially child assessment service) by region (i.e. Hong Kong Island, Kowloon and the New Territories) should be provided;
 - (ii) the waiting time for child assessment service was long because the current assessment mechanism relied mostly on doctors to make the diagnosis. Other specialists, such as educational psychologists (EP) could share the workload in respect of certain types of developmental problems of individual children. Taking into account the latest service needs, the Government should review the child assessment mechanism which was launched decades ago;

- (iii) the Government should provide interim support for children awaiting assessment service, such as training subsidies to the families and children concerned. Consideration might be given to launch a health voucher scheme for parents to use the training and assessment services provided by non-governmental organisations (NGOs) and other service operators in the market;
- (iv) services similar to the annual health check of the Student Health Service under DH should be provided to pre-school children;
- (v) children in foster care / institutions were likely to have behaviour disorder, but their participation in assessment and follow-up services was comparatively low. The Government could consider extending On-site Pre-school Rehabilitation Services (OPRS) to children with special needs living in foster care family and children's home;
- (vi) play, physical activities, rest, eye and oral health as well as avoidance of early and excessive use of electronic devices, etc. were important to the development of children. The KeySteps@JC programme which provided comprehensive support to children in various aspects could be a reference for the Government in planning for services for children with development delay/disorders; and
- (vii) follow-up support for children after assessment was not sufficient. The waiting time for HA's specialist service was long and children with only one type of disability were not eligible for pre-school rehabilitation service. The Government should consider how to bridge the service gap;
- (c) On the service support to ethnic minorities (EM) children
 - (i) the assessment for EM children should be conducted in their native language as far as possible and preferably by healthcare professions without the help of interpreters. DH should also provide training to the healthcare staff to strengthen their understanding on the cultural and linguistic needs of the EM population;

- (ii) some EM children with special educational needs (SEN) were asked to leave the private schools where they were studying. EDB should look into these cases for any discrimination and violation of the Government's policy of ethnic integration; and
- (iii) FHB and DH were requested to provide the statistics on children receiving various types of services by ethnicity and gender;
- (d) for the sake of comprehensiveness, there should be more thorough discussion on various supporting services, including social and health services on early intervention and development. It was suggested to have a separate agenda item for discussion at a future Commission meeting; and
- (e) members requested that, in preparing meeting papers in the future, B/Ds should present comprehensive statistical information for outcome evaluation, for example, comparison on service output in respect of pre- and post-enhancement measures could be included.
- 8. <u>SLW</u> said that OPRS could provide training for children with special needs who were awaiting the assessment service. OPRS places would be increased to 7 000 in the 2019/20 school year. The Government was also exploring ways to pilot the provision of appropriate services for children with signs of special needs (i.e. Tier 1 children).

9. <u>PAS(H)3</u> made the following responses –

- the Government established a Steering Committee in 2012 to conduct a strategic review on healthcare manpower and professional development. FHB issued the report of the review in 2017. Among the various recommendations, the Steering Committee recommended to conduct healthcare manpower planning and projections once every three years. For forward manpower planning, FHB had kicked-start the manpower survey on 13 healthcare professions, and the results would be available in Q4 of 2020. To cope with the service demand, the Government would also explore ways to increase the supply of paediatricians, including attracting overseas specialist doctors to work in Hong Kong;
- (b) FHB had established a working group to discuss matters on case referral for children with developmental disorders. The Government would also explore the feasibility of a Member's proposal of providing health voucher for using training and

assessment services offered by service operators in the market;

- (c) FHB shared Members' views on the need for better coordination among different B/Ds in the support of children with special needs. To coordinate the efforts of various B/Ds, FHB in collaboration with EDB, HA and SWD launched the "Student Mental Health Support Scheme". Under the Scheme, a multi-disciplinary team comprising teachers, EP, school social workers and psychiatric nurses was formed in each participating primary/secondary school to provide appropriate support services, including identification of needs and provision of rehabilitation services for the students;
- (d) for the AR Scheme, the accreditation process of audiologist and speech therapist professions had been completed, while the accreditation process of dietitians, EP and clinical psychologists was expected to be completed in August/September 2019; and
- (e) FHB would reflect Members' views to the Advisory Committee on Mental Health (ACMH) with a view to formulating measures to strengthen the support services to reach all children in need. The ACMH would also roll out a large-scale mental health promotion and education campaign to target both the general public and specific sectors such as healthcare professionals.
- 10. Con CM (F&SHS) said that DH would consider how best to enhance child health service for pre-school children through, for example, more collaboration with pre-school organisations. DH acknowledged the need to improve the understanding of the cultural and linguistic needs of the EM population in order to provide better services. They would also consider measures to improve the waiting time and completion rate of assessment for child assessment service.
- 11. <u>Ms Vivian To</u> of HA said that translation service was available for EM parents and children who did not speak Cantonese or English. She shared Members' views that it was preferable to arrange medical health staff speaking the native language of EM parents and children to conduct assessment as far as possible.
- 12. Taking into account Members' views, <u>CS</u> said that FHB should brief Members on any development in due course.

[Post meeting note: <u>Ms Susan So</u> declared interest to the Chairman and Members on 20 August 2019 for this agenda item as her organisation was

operating a number of Kindergarten-cum-Child Care Centres (KG-cum-CCCs), standalone CCCs and pre-school rehabilitation services for supporting children with SEN.]

Item 4: Enhanced Support for Children with Special Needs [Paper No. 11/2019]

- 13. At CS' invitation, <u>USED</u> gave an opening remark and <u>SS(SES4)</u> briefly introduced the enhanced support provided by the Government for children with special needs.
- 14. Members' views and suggestions were summarised as follows
 - (a) in providing support for children with special needs, reference should be made to, in addition to the United Nations Convention on the Rights of the Child, the Convention on the Rights of Persons with Disabilities and the Salamanca Statement and Framework for Action on Special Needs Education. The latter stressed the importance of inclusive education and early identification and intervention strategies. Services should also be provided to children with special needs free of charge as far as possible;
 - (b) on the provision of support services to pre-school children
 - (i) noting that the implementation of OPRS in KGs or KG-cum-CCCs had created additional administration work to the teachers, the Government should consider providing additional resources to pre-school institutions for implementing integrated education (IE) and engaging additional staff (such as the Special Educational Needs Coordinator (SENCO)) as in the case of primary and secondary schools in order to ease the burden on teachers:
 - (ii) SWD should consider enhancing the services provided by occupational therapists under OPRS to meet the high demand, and waiving the household income limit for the Training Subsidy Programme for Children on the Waiting List of Subvented Pre-School Rehabilitation Services (TSP);
 - (iii) currently, apart from the Integrated Programme (IP) in KG-cum-CCCs, there was no other education support for pre-school children who were suspected to have SEN. Consideration

- might be given to provide "treat and test" service in pre-school institutions. For the IP, it was suggested to enhance the professional support for the Special Child Care Workers;
- (iv) pre-school support for children with special needs, such as Early Education and Training Centre (EETC) (for age 0 to 3), Special Child Care Centre (SCCC) (for age 2 to 6), IP (for age 2 to 6) and OPRS (for age 2 to 6) should be reviewed to facilitate better policy planning, service integration and resource reallocation. Coordination between EDB and SWD should be improved to cope with the surging demand for pre-school rehabilitation services and in enhancing the smooth transition for children from KG to primary school. Efforts should also be made to cultivate the sense of social inclusion in the pre-school environment; and
- (v) accommodation for KGs should be carefully planned taking into account the requirement of extra rooms for provision of OPRS, social workers and other related support services;
- (c) on the implementation of the policy of IE
 - (i) psychological support service to schools with students with SEN should be enhanced as the implementation of IE had created much pressure for teachers;
 - (ii) regarding the enhancement measures implemented in public sector ordinary schools, it appeared that the additional resources from the Government were only provided to government and aided schools but not the schools under the Direct Subsidy Scheme (DSS);
 - (iii) EDB should better communicate with schools before launching any new policies/measures. Also, training for inspectors of EDB should be strengthened for better support of IE implementation in schools; and
 - (iv) noting that the IE programme had been implemented since 1997, Members considered that there was a pressing need to conduct a comprehensive review on the policy taking into account the experience gained. The review should cover but not limited to the referral mechanism of children with special needs to receive special education, age-specific measures for students, support for schools with students with SEN, manpower requirement of

various healthcare professionals, as well as resources for research and development;

- (d) on support for non-Chinese speaking (NCS) EM children
 - (i) with the EM population growing, the Government should work out a plan to cater for the need of EM children with particular reference to language and cultural issues. At present, there were just two EETCs providing limited service in the English language only. There was no SCCC service in English to support EM children with severe needs and all the special schools in Hong Kong were Cantonese-speaking;
 - (ii) the school drop-out rate for EM children with SEN at the age of 14 to 15 was high. Private international schools and DSS schools with English as their first teaching language should take in more EM children with SEN. The amount of grant for supporting NCS students with SEN of \$100,000 for schools with one to nine NCS students with SEN enrolled was not adequate. Training for teachers should also be strengthened;
 - (iii) the teachers of KGs and primary schools might not have the professional skill to identify EM children with language delay and make timely referral for assessment. The Enhanced School-based Speech Therapy Service was expected to help early identification of and follow-up service for these children; and
 - (iv) the School-based Educational Psychology Service (SBEPS) and mental health-related support service would not be effective if the psychologists or the multi-disciplinary team did not speak the EM languages or understand their cultural issues. Consideration might be given to contract out the service to better serve the EM community;
- (e) on parent support at community level, there was insufficient after school care service for primary school students with SEN. The service provided by NGOs was limited due to the high carer-to-children ratio and there was also limited service available from the private service operator. The Government should consider providing additional allowance to NGOs for employment of additional staff to enhance the service;

- (f) with the increasing number of children with autism spectrum disorders and attention deficit/hyperactivity disorder (AD/HD) in the past few years, the Hong Kong Jockey Club had run two projects in collaboration with the University of Hong Kong, EDB and some NGOs to provide school-based support for students, teachers and parents. Noting the positive feedback received, EDB was suggested to regularise these projects upon their completion in about two to three years' time;
- (g) supplementary information on the number of children waiting for relevant assessment and medical/other support services should be provided; and
- (h) a lead bureau should be identified to coordinate and oversee polices and the work of different B/Ds on the provision of support for children with special needs. Besides, relevant stakeholders, including families of children with SEN, should be involved.
- 15. <u>USED</u> thanked Members for their valuable comments and undertook to take them into account when conducting continuous review for improvement. EDB's responses to Members' comments were as follows
 - (a) the Government had been allocating more resources to implement the following enhanced measures in public sector ordinary schools
 - SBEPS which covered remedial, (i) the preventive developmental work at the school system, teacher and student support level to cater for students' diverse educational needs had been enhanced progressively. Since the 2016/17 school year, the SBEPS had been extended to cover all public sector ordinary primary and secondary schools. In schools with a comparatively large number of students with SEN, the EP-toschool ratio had been enhanced to 1:4 and EPs would pay more frequent visits to the schools concerned to deliver comprehensive and regular follow-up and intervention services. This enhanced SBEPS would be extended to about 20% of schools in the 2019/20 school year. It was targeted that by the 2023/24 school year, it would be extended to about 60% of schools;
 - (ii) starting from the 2017/18 school year, EDB provided funding for each school to create a SENCO post, by phases in three years, to support the implementation of IE. In addition, from the 2019/20 school year onwards, funding for about 1 000 regular

teaching posts entitled as Special Educational Needs Support Teacher (SENST) would be provided to schools with a comparatively large number of students with SEN. With both SENCO and SENST provisions in schools, the communication and cooperation between teachers and parents of students with SEN would be enhanced;

- (iii) starting from the 2019/20 school year, EDB would create school-based speech therapist posts, by phases in three years, to support students with speech and language impairment;
- (iv) NCS students with SEN had benefitted from the support and services pertaining to both NCS students and students with SEN provided by EDB. In addition, starting from the 2019/20 school year, EDB would provide the Grant for Supporting NCS Students with Special Educational Needs to enable schools to flexibly employ teaching assistants, procure translation services, provide social and emotional management training etc. to better support these students to adjust to school life and make transition through different learning stages; and
- (v) SENCOs were required to have special education training, such as having completed the Basic, Advanced and Thematic (BAT) Courses on supporting students with SEN commissioned by EDB, or holding equivalent qualifications. Furthermore, they were required to complete the professional training courses for SENCOs. EDB was also conducting a review on the special education teacher training and would liaise with the local tertiary education institutions to enhance the training programme with due regard to the views of the stakeholders;
- (b) EDB had been providing relevant resources to support IE in DSS schools. As agreed with the Hong Kong Direct Subsidy Scheme Schools Council, from the 2019/20 school year, the Learning Support Grant would be provided as a separate subsidised item so as to ensure that DSS schools admitting a comparatively large number of students with SEN would be provided with a corresponding amount of additional resources. Besides, DSS schools would also be required to deploy a teacher as SENCO to provide better SEN support;
- (c) EDB acknowledged the importance of communication with schools and parents before implementation of any new policies and initiatives and had been making effort on improving the communication. For

example, in respect of the IE enhancement measures, a series of consultation sessions and briefing sessions had been conducted before they were implemented in the 2019/20 school year;

- (d) EDB shared Members' view that IE should be reviewed and, in fact, the review had been on-going. The Task Force on Integrated Education in Mainstream Schools was set up in 2005 to review the Views and concerns of schools were implementation of IE. collected through regular meetings. EDB would also pay visits to schools to provide timely feedback on the proper use of resources. There had also been continuous improvement in the Government's policies and initiatives, and more resources had been provided to schools to strengthen professional support in different disciplines. On cross-bureaux collaboration, EDB and LWB had included IE as part of the review under the Rehabilitation Programme Plan. Members' suggestion, EDB would also review the services in KGs in one go for better synergy; and
- (e) on transition from KG to primary school, a mechanism has been put in place to transfer electronically the developmental progress reports of students from pre-school rehabilitation service units to their primary schools for timely follow-up action.

16. CSWO(RM)1 said that –

- (a) OPRS had been regularised in the 2018/19 school year and the number of service places would be increased to 7 000 in the 2019/20 school year. Based on the recommendations of the evaluative study on the Pilot Scheme on OPRS, SWD would enhance the manpower of each inter-disciplinary service team by increasing the number of Speech Therapist from 1 to 2 given the marked prevalence of speech impairment among pre-school children with special needs, and the number of Assistant Social Work Officer from 1 to 1.5 to strengthen the support to parents. The requirement of Occupational Therapist and other manpower would be kept in view. One of the existing OPRS operators serving NCS pre-school children specifically would increase its service places from 50 to 100 in October 2019;
- (b) at present, there were two types of training subsidy for applicants of the TSP. Children on the waiting list of SCCC would receive a non-means-tested higher-level subsidy of \$6,075 per month while children on the waiting lists of EETC, IP and OPRS would receive a normal-level subsidy of \$3,050 per month subject to a means test.

As the implementation of OPRS as well as other new and on-going welfare initiatives had already brought a high manpower demand for paramedical professionals, the lifting of means test for normal-level subsidy under the TSP warranted careful consideration of the manpower and service supply in the market;

- (c) with reference to the experience of some NGOs, SWD would launch a pilot project of Tier 1 support services for pre-school children with signs of special needs or borderline developmental problems who were currently not covered by OPRS. Early intervention would be provided to address the diverse needs of these children through enhancement of learning support and individual/group training as appropriate; and
- (d) SWD had launched a longitudinal study in June 2019 which aimed to keep track of the performance and adjustment of the children who had received OPRS service and would get into primary school in the 2019/20 school year and explore how to enhance the transitional support for these students if necessary.

[Post meeting note: <u>Ms Susan So</u> declared interest to the Chairman and Members on 20 August 2019 for this agenda as her organisation was operating a number of KG-cum-CCCs, standalone CCCs and pre-school rehabilitation services for supporting children with SEN.]

Item 5: 2021 Population Census: Thematic Report on Children [Paper No. 12/2019]

- 17. Members' views and suggestions on the proposed thematic report on children to be published by Census and Statistics Department (C&SD) in early 2023 were summarised as follows
 - (a) the survey would be a good opportunity to learn more about the views and concerns of adolescents. Members suggested that apart from collecting basic statistical data (such as demographic, educational and household characteristics), more in-depth questions specific to children of different age groups could be included;
 - (b) a number of data topics, including children with special needs/ requiring special care, duration of KG schooling (half-day, full day, long full day), medical and religion background, were suggested for inclusion into the survey;

- (c) careful consideration should be given to how the EM population was to be included in the thematic report. It was noted that in previous thematic reports published by C&SD, "White", which was a race, had been included as one of the ethnicities, while "Arabic" had been mistaken as an ethnicity. Also, for instance, Indians, as compared with other South Asian minority population in Hong Kong, had a significantly higher medium income and other distinct socioeconomic characteristics, which should be presented separately in the thematic report; and
- (d) consideration might be given to commission a separate survey to obtain more data on adolescents.

18. In response, $\underline{AC(S)}$ said that –

- (a) the definition of children in the thematic report was proposed to be persons aged below 18, broken down into four age groups to tie in with the school age of the population. Age-specific questions were included, for example, for children aged 15 to 17 which might be part of the working force, to provide information on their income and working hours;
- (b) the major objective of a census was to collect up-to-date benchmark information on the socio-economic characteristics of the population for studying the direction and trend of population changes. Given the sizable scale of census, the results could support detailed analyses for population sub-groups and small geographical areas. There would be 46 data topics in the 2021 Population Census (21C). In order to keep the length of interviewing time reasonable, data topics which did not require statistics with refined breakdowns, say, at district level, or questions that were complicated/sensitive in nature would not be included in census. For children with special needs/requiring special care, more detailed information would be sought from a territory-wide survey on persons with disabilities and chronic diseases conducted by C&SD in 2019-20. The report would cover nine types of disabilities, including AD/HD and intellectual disability;
- (c) questions concerning religion normally would not be featured in the survey conducted by C&SD as they might be considered too sensitive;

- (d) EM were defined as persons with non-Chinese ethnicity under the census conducted by C&SD. C&SD would take into account Members' comments as well as international practices in reviewing the classification of ethnicity; and
- (e) the Commission might consider hiring service in the market to conduct thematic survey on selected topics. C&SD would provide advice on the contract-out work if necessary.

Item 6: Reports of the Working Group on Children with Special Needs, the Working Group on Promotion of Children's Rights and Development, Education and Publicity and the Working Group on Research and Public Engagement [Paper No. 13/2019]

19. At <u>CS'</u> invitation, <u>DS(W)1</u> briefed Members on the progress reports of the three WGs. After deliberation, Members endorsed the recommendations on the applications under the Funding Scheme for Children's Well-being and Development 2019-20 and the proposal to revise the name of the WG on Children with Special Needs to WG on Children with Specific Needs. Having regard to their importance, Members also agreed to discuss the subjects of the Reports of Child Fatality Review Panel and cyber bullying at a Commission meeting for a more thorough deliberation.

Item 7: Any Other Business

- 20. Due to the special access arrangement at the Central Government Offices, the meeting ended at 6:30 p.m.
- 21. <u>CS</u> said that a separate meeting would be arranged to continue the discussion of the outstanding items under AOB.

[Post meeting note: A tea gathering was held on 18 September 2019 to complete the discussion of the outstanding items under AOB.]

Commission on Children Secretariat October 2019