

Better life for the needy

SOCIAL welfare services in Hongkong went wholesale this year in the Government offering long-term planned services for the rehabilitation of the handicapped and several proposals of long-term services for the aged, the young and the working men.

Voluntary agencies providing these services are also expecting changes in the way their service are subsidised by government funds.

Also starting from this year, all nurseries and child-care centres must be registered with the Social Welfare Department before they can operate.

After years of preparation for both the Government inspectorate and nurseries/child-care centres operators, the Child-Care Centre Ordinance came into effect in June.

Under this ordinance, child-care centres taking care of more than five children must be registered and meet certain requirements set down by the Social Welfare Department.

Starting on June 1 this year, inspectors from the Social Welfare Department went out to check on nurseries and child-care centres which are not registered or going through the registration process.

So far, they have discovered five such centres operating in sub-standard conditions and four operators have been convicted and fined while one is still being prosecuted.

Up to date, there are totally 184 registered nurseries and child-care centres, 97 of which are Government subvented ones run by voluntary agencies and the rest private run. All together, they provide 2,924 places for

children in both day-care and residential care in properly managed nurseries and child-care centres.

Besides putting child-care centres on their toes in the services they provide, the Government is anxious in providing more such services.

The Government has set aside \$16 million in organising and running child-care centres mostly to be managed by voluntary agencies.

It is planning to extend such service to residents in certain densely-populated temporary housing areas after making a beach-head in public housing estates.

Kowloon Bay and Harkwaichung temporary housing areas are the first to have their own child-care centres and the Government planned to extend this service to other areas as well.

In mid-October, the long awaited white paper on rehabilitation services for the disabled was published in which the Government proposed to commit \$1,760 million in its implementation over the coming decade.

These services can be roughly divided into four different scopes each closely related with the others and each enhancing the other in the provision of services.

The Government aimed at early detection of any disability in children and has planned for multi-disciplinary assessment centres and a centre registry to carry out this purpose.

The Medical and Health Department will start off with a comprehensive observation scheme next year screening children from birth to five years old for any hint of disability.

Schools and educational institutes will take over and all the assessment will be

registered with the Central Registry for the Disabled in the Social Welfare Department.

Also beginning next year, a Central Health Education Unit will be set up in the Medical and Health Department to provide professional advice on health education to government departments and other organisations which are interested in carrying out health education programmes in their special fields.

In addition, simple principles of rehabilitation, the importance of prevention and the need to seek early professional help in the event of accident or illness will be included in the curriculum of primary, and secondary schools and other educational institutions.

by Rita Alano

On education and training, the Government planned to provide all disabled children with nine years of education.

And vocational training will be available beyond normal school-leaving age to help them to achieve their potential.

For disabled children who cannot receive education in ordinary because of the degree of disability, special schools, classes and peripatetic services will be provided.

Special pre-school education and training will be given to the more severely disabled children.

The number of special education places for the disabled will be increased from 12,165 in April this year to 50,000 by 1986.

There will be an increased output of trained staff from all levels and consideration is being given

to the possible establishment of full-time training courses for teachers in special education and of specialised courses.

The Education Department will provide brailled text books in both English and Chinese as from April 1 next year and will improve the quality and coverage of the existing resource teaching services for blind students.

On medical treatment and rehabilitation services, the Government planned for a complete network of medical rehabilitation services for the physically-disabled with a fully-equipped centre at each of the regional hospitals.

The centres will be specifically designed to provide intensive in-patient rehabilitation and out-patient services.

Additional psychiatric hospitals have also been planned and considerations have been given to increase the number of beds planned for district as well as regional major hospitals.

An orthoptic unit has been planned to be established next year to provide children with treatment for defective eye-movements.

The Government will also initiate a comprehensive training programme in paramedic courses to staff hospitals and other related Government departments with the properly trained staff.

The White Paper has also plans for finding gainful employment, suitable residential accommodations, providing suitable recreational facilities for the disabled.

The Social Welfare Department and voluntary agencies will continue to provide social welfare services, including

counselling, to the disabled with strengthened funding allocation from the Government.

A Rehabilitation Development Co-ordinating Committee, chaired by Legislative Councillor and a pioneer in this field, Dr Harry Fang, has been established to co-ordinate and supervise the implementation of the plans laid down in the White Paper.

Soon after the publication of the White Paper on rehabilitation services, the Government published three green papers proposing long-term services for the aged, the youth and the working men.

The green paper on welfare services for the elderly was published in mid-November proposing for an old aged supplement aged over 60 but not yet eligible for the infirmity allowance.

This old age supplement has been pegged at \$90 a month temporarily pending the establishment a more realistic method to calculate a living index related to the specific needs of the elderly.

It also proposed to progressively lower the qualifying age for the infirmity allowance, which is to be renamed old age allowance, from 75 to 73 and then 70.

It also outlined plans to expand medical and health services for the elderly to be provided by medical institutes as well as community nurses.

Housing provisions for the elderly has also been planned and it has been proposed that the old age allowance should be extended to those living in institutions.

Special consideration is being given to home help services because the over-all purpose of this green paper is to promote the well-being of the elderly in all aspects of their living by providing services that will enable them to remain members of the community for as long as possible, and to provide residential care suited to the varying needs of the elderly.

The second green paper published also in mid-November contained wide-ranging proposals to improve Hongkong's social security development.

The proposals in this green paper included improvements in the public assistance scheme, extension of welfare allowance scheme to those in residential institutional accommodation, and the establishment of an appeal board.

The introduction of a sickness, injury and death benefit scheme was also proposed by the green paper geared to be established by the end of 1980.

In the third and last green paper published in November the Government has earmarked \$131 million to provide better and more comprehensive personal social care for young people in schools, on the streets and in the family.