

Family Council

Minutes of 22nd Meeting held on 29 May 2014

Date: 29 May 2014 (Thursday)
Time: 2:30 p.m.
Venue: Room 3, G/F, Central Government Offices,
2 Tim Mei Avenue, Tamar, Hong Kong

Attendance

Chairman

Prof SHEK Tan-lei, Daniel

Official Members

Ms Florence HUI, Secretary for Home Affairs (Acting)

Ms Doris CHEUNG, Deputy Secretary for Labour and Welfare
(Welfare)1 (*attended on behalf of Secretary for Labour and Welfare*)

Mr Tony TANG, Deputy Secretary for Education (4) (Acting)
(*attended on behalf of Secretary for Education*)

Prof WONG Chack-kie, Member (2)/Central Policy Unit (CPU)
(*attended on behalf of Head/CPU*)

Ex officio Member

Dr CHAN Chun-bun, Bunny, Chairperson of the Commission on Youth

Prof CHAN Cheung-ming, Alfred, Chairperson of the Elderly
Commission

Mrs LAU KUN Lai-kuen, Stella, Chairperson of the Women's
Commission

Non-official Members

Mrs CHU YEUNG Pak-yu, Patricia

Prof LAM Tai-hing

Mr LEE Luen-fai
Dr LI Sau-hung, Eddy
Ms LOO Shirley Marie Therese
Miss TANG Pui-yee, Phoebe
Ms WONG Pik-kiu, Peggy
Miss WONG Siu-ling, Gabriella
Ms YAU Oi-yuen, Irene
Mr YIU Tze-leung, Ivan

Secretary

Ms Aubrey FUNG, Principal Assistant Secretary for Home Affairs
(Civic Affairs) 2

In attendance

Ms Gracie FOO, Deputy Secretary for Home Affairs (1)
Ms Jessica CHENG, Chief Executive Officer (Family Council)

Absent with apologies

Prof AU Kit-fong, Terry
Dr KOONG May-kay, Maggie
Ms LAW Suk-kwan, Lilian
Dr TSUI Luen-on, Gordon

For agenda item 3

Mr Douglas SO, Executive Director, Charities, The Hong Kong Jockey Club
Ms Imelda CHAN, Executive Manager, Charities, The Hong Kong Jockey Club
Ms Macy CHUI, Charities Manager, The Hong Kong Jockey Club
Prof LAM Tai-hing, Principal Investigator, Family Project, School of Public Health, The University of Hong Kong
Ms Alice WAN, Project Administrator, Family Project, School of Public Health, The University of Hong Kong
Dr Brandford CHAN, Research Officer, Family Project, School of Public Health, The University of Hong Kong

For agenda item 4

Prof Sophia CHAN, Under Secretary for Food & Health

Dr Rita HO, Principal Medical & Health Officer (Family Health Service), Department of Health

Dr Rachel CHENG, Senior Medical & Health Officer (Family Health Service), Department of Health

Welcome Remarks

The Chairman welcomed all to the 22nd meeting of the Family Council (the Council).

Item 1 – Confirmation of Minutes of the 21st meeting of the Family Council

2. The minutes of the 21st meeting were confirmed without amendments.

Item 2 – Matters Arising from Last Meeting

3. The Chairman informed the meeting that the Council Secretariat had circulated a progress report as well as the letter to the Chief Secretary for Administration setting out the views of the Council on rehabilitation services for pre-school children. As members had no further comments, the progress report was endorsed.

Item 3 – Presentation of the Family Project by the Hong Kong Jockey Club Charities Trust (Paper FC 15/2014)

4. With a view to building a more harmonious society, The Hong Kong Jockey Club Charities Trust (the Trust) invited the School

of Public Health of The University of Hong Kong (HKU) to collaboratively launch a project entitled “FAMILY: A Jockey Club Initiative for a Harmonious Society” (the Project) in 2007. Upon invitation of the Chairman, Mr Douglas SO (Executive Director, Charities, The Hong Kong Jockey Club) and Prof LAM Tai-hing (Principal Investigator, Family Project, School of Public Health, HKU) took Members through the powerpoint presentations on the Project. In gist, the presentation covered the following salient points –

- (a) through the adoption of a public health approach, the Project brought various sectors and disciplines together to identify the complex underlying factors of family problems in Hong Kong and thus served as a basis upon which long-term prevention strategies could be formulated. To sustain the momentum, the Project would be extended for a further three years starting from 2014 onwards focusing on family holistic health;
- (b) the Project comprised three components including (a) territory-wide family cohort study covering 20,000 households, (b) district-based intervention projects to test different preventive measures to enhance family communication and relationships and (c) health communication and public education programmes to promote family health, happiness and harmony (3Hs) across generations as well as facilitate capacity building and knowledge transfer;
- (c) on family cohort study, a total of 20,964 households were enumerated to collect data on lifestyles (such as eating and physical activities), physical and psychological health, happiness index, family harmony index, religious beliefs, neighbourhood relationships, work status, etc. from 2009 to 2014¹;

¹ The first household visit was conducted from March 2009 to May 2011. The second household visit started in July 2011 and was completed in 2014.

- (d) in partnership with four non-governmental organisations and the Department of Health (DH), five pilot intervention projects² were completed. The pilot projects were designed in accordance with public health principles to achieve the objectives of enhancing family and parent-child relationships. Randomized controlled trial was employed to evaluate the effectiveness of the programmes;
- (e) with a view to promoting 3Hs, community-wide events, including ‘Happy Family Kitchen Project’, ‘Learning Families Project’ were organized. Besides, different media tools (such as newspapers, magazines, television and internet) were used to promote positive attitudes towards 3Hs; and
- (f) the Project would continue its endeavour in promoting family harmony through collaboration with different sectors of the community and would seek collaboration opportunities with the Council in launching community-based participatory projects with themes of parental education and family health. Looking forward, emphasis would be geared towards the promotion of holistic health programmes.

5. Members expressed their views, which were summarized as follows –

- (a) the Project had provided good platform to help promote 3Hs and cherish family relationships. As the Project sought to formulate long-term strategies in preventing family problems, consideration should be given to place

² The five pilot projects include “Effective Parenting Programme” organized by Caritas Hong Kong, “Harmony@Home” organized by Hong Kong Family Welfare Society, “Happy Transition to Primary One” organized by the Hong Kong Sheung Kung Hui Welfare Council, “Hope Oriented Parents Education for Families in Hong Kong” organized by Hong Kong Christian Service and “Share the Care, Share the Joy” organized by the Department of Health.

more focus on the outreach of under-privileged families and involve participation of the business sector in promoting 3Hs; and

- (b) the Trust had played an important role in fostering cross-sectoral collaboration and providing baseline data in understanding the situation of Hong Kong families. In promoting 3Hs across generations and in planning future programmes for the Project, role of the elderly should not be overlooked. The Trust should explore the interface between the Project with the CADENZA initiative³.

6. Mr SO of the Trust also noted Members' views and emphasized that family participation had always been the work focus of the Project. He further undertook to incorporate Members' suggestions in planning future programmes as far as practicable. He also reassured Members that the data collected from the Family Cohort Study would be shared with community stakeholders through reports and web-based Geographic Information System.

7. The Chairman thanked Mr SO and Prof LAM for their presentations and Members for their comments. In strengthening collaborations with the Project, the Council would consider (a) supporting the community intervention projects, (b) uploading the Project materials onto the "Happy Family Info Hub" and (c) utilizing the baseline data by the Family Cohort Study as the basis for the Family Impact Assessment.

³ The Trust had launched a CADENZA public education initiative with Radio Television Hong Kong Radio 5 from January 2009 to July 2010. A range of public interactive events and activities was organised and staged monthly in 18 districts, ranging from health issues to living environment, legal matters, financial arrangements, etc.

Item 4 – Presentation by the Committee on Breastfeeding (Paper FC 16/2014)

8. Upon the invitation of the Chairman, Prof Sophia CHAN, Under Secretary for Food and Health (USFH), and Dr Rita HO of Department of Health (DH) briefed Members on the local breastfeeding scene as well as the work of the Committee on Breastfeeding (the Committee). The presentation covered the following highlights –

- (a) breastfeeding helped reduce infections in babies and young children and the later risks of developing non communicable diseases and brought benefits to mothers, including less postpartum bleeding, reduced risk of breast cancer, ovarian cancer and diabetes in later life, etc;
- (b) according to the survey conducted by DH, while the ever-breastfeeding rate⁴ in Hong Kong had been continuously on the rise, the rate of sustained exclusive breastfeeding⁵ remained relatively low. Major barriers included maternal illness, sucking/latching problems, fatigue, inconvenience, nipple/breast pain, infant illness, etc;
- (c) the aggressive marketing practices of formula milk was also pointed out. In 2013, the trade spent \$2.7 billion on advertising formula milk for children 0 to 36 months which was about 20 times of the spending in 2001; and
- (d) the Committee would advise the Government on appropriate strategies to support breastfeeding on an ongoing basis. Ongoing activities to protect and support breastfeeding included implementation of baby-friendly initiative in healthcare facilities, promoting breastfeeding in public places and breastfeeding friendly workplaces, launching of publicity and public education as well as the

⁴ It referred to the proportion of infant who had been breastfed at least once.

⁵ It referred to the proportion of infant who were exclusively breastfed for a certain period of time.

implementation of the Hong Kong Code of Marketing and Quality of Formula Milk and Related Products, and Food Products for Infants & Young Children⁶ (Hong Kong Code).

9. The Chairman thanked USFH and Dr HO for their presentations. In light of the presentations, Members made the following comments –

- (a) in encouraging breastfeeding, the Government and public bodies alike should play a leading role to implement breastfeeding facilitation measures in the workplace. Specific measures should be formulated and large-scale promotion campaign should be launched to encourage breastfeeding in the community;
- (b) apart from implementation of breastfeeding facilitation measures, the Hospital Authority might consider not to provide formula milk to newborn babies. Besides, it was also worthwhile for the Government to explore whether subsidy should be given to under-privileged families to procure electric pumps and other ancillary equipment so as to make expression of breastmilk more affordable;
- (c) recent press coverage of breastfeeding in the public place was a matter of concern. Whether the community was ready to accept breastfeeding in the public place depended very much on the attitude and mindset of people. In this connection, public education in inculcating a proper attitude through the launching of territory-wide campaign was considered essential to achieve the objective. Besides, the Government should work out a time-table regarding the launch of the Hong Kong Code; and

⁶ The aim of Hong Kong Code is to contribute to the provision of safe and adequate nutrition for infants and young children by (a) protecting breastfeeding and (b) ensuring the proper use of formula milk, formula milk related products, and food products for infants and young children up to the age of 36 months, on the basis of adequate and unbiased information and through appropriate marketing.

- (d) with better medical support and supervision, increasing number of mothers were able to express breastmilk. To facilitate and encourage expressing breastmilk, the Government should formulate supportive measures in a sustainable manner, so that more working mothers were able to express breastmilk in the workplace.

10. In response to Members' comments and suggestions, USFH supplemented with the following information –

- (a) as the first step to become baby-friendly, public hospitals has ceased to accept free infant formula since April 2010;
- (b) Maternal and Child Health Centres had been utilized as a platform to encourage and support breastfeeding to mothers of newborn babies and their families through counseling and providing skills support;
- (c) with an aim to strengthening the promotional efforts, a Working Group on Community Support for Breastfeeding, chaired by Dr Maggie Koong, had been set up to devise appropriate strategies and programmes for promotion of breastfeeding at the community level; and
- (d) Food and Health Bureau would seek to report the progress regarding the implementation of the HK Code to the Legislative Council in July 2014.

11. The Chairman thanked USFH and Dr Ho for their presentation and Members' comments. On the basis of the discussion at this meeting and the promotional work to be done by the Committee, the Council would explore more synergistic opportunities. District-based intervention projects of the Family Project supported by the Hong Kong Jockey Club Charities Trust were possible areas of collaboration.

Item 5 – Progress of Work of the Sub-committees (Paper FC 16/2014)

12. The Chairman invited the Convenors of the two Sub-committees to report work progress.

13. Regarding the work progress on the promotion of family core values and family education, Ms Shirley LOO reported that the content of the family education package for families with newborn babies (the package) had been deliberated by the Sub-committee. The package was expected to be ready in the third quarter of 2014. Besides, the Sub-committee had considered the proposed study brief prepared by the Central Policy Unit on “The Tenth Phenomenon”. Given the difficulties in obtaining evidence-based data, the Sub-committee agreed that a holistic study should be conducted to examine how different parental practices might affect family life.

14. On the Sub-committee on Family Support (the Sub-committee), Mrs Patricia CHU reported that the Sub-committee had given its advice on “Regulatory control over internet computer services centres and other places of entertainment installed with game machines” and “minimum age of marriage without parental consent”.

15. On a separate note, Mrs CHU also briefed Members on the response of Family Summit 2014 (the Summit) held on the International Day of Families (15 May 2014). The Summit was co-organised by the Council, the Social Welfare Department, the Hong Kong Council of Social Service and the Consortium of Institutes on Family in the Asian Region. With more than 500 participants enrolled from different sectors of the community, the Summit provided a platform for various stakeholders to examine family issues from an inter-disciplinary and innovative perspective. Given the overwhelming response in enrolment, ancillary facilities (including lift, number of breakout rooms, etc) of the venue might not be able to fully meet the requirements. Looking forward, it was advisable to consider

an alternative venue with better ancillary facilities to support a large-scale summit.

16. The meeting noted the progress reports made by the Convenors of the two Sub-committees.

Item 6 – Any Other Business

17. There being no other business, the meeting adjourned at 4:30 p.m. The next meeting would be held on 21 August 2014 (Thursday) at Room 2, G/F, Central Government Offices, Tim Mei Avenue, Tamar, Hong Kong.

**Family Council Secretariat
August 2014**