

善導會
SideBySide



自在共融

Everyone
deserves to
belong

Project EMBRACE—
Community-based Drug Treatment And
Rehabilitation Support Service for
Ethnic Minorities+ Pre-Release & Drug Prevention
BDF 210039 (1/4/2022-31/3/2025)



自在共融
Everyone
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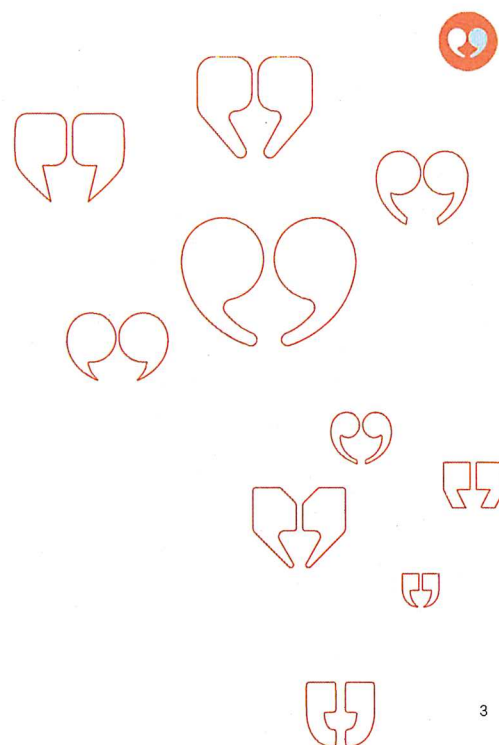
Understanding. Unwavering.

We're SideBySide with excluded people, offering understanding, unwavering support and kindness so they can belong. Our services include Social Rehabilitation, Mental Wellness, Competency Development, Community Education, Cultural Inclusion, and Community Connection.



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- Overview of the project
- Key Challenges
- Service Interventions & effectiveness
- Service Implication & Sustainability



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Overview of Project EMBRACE



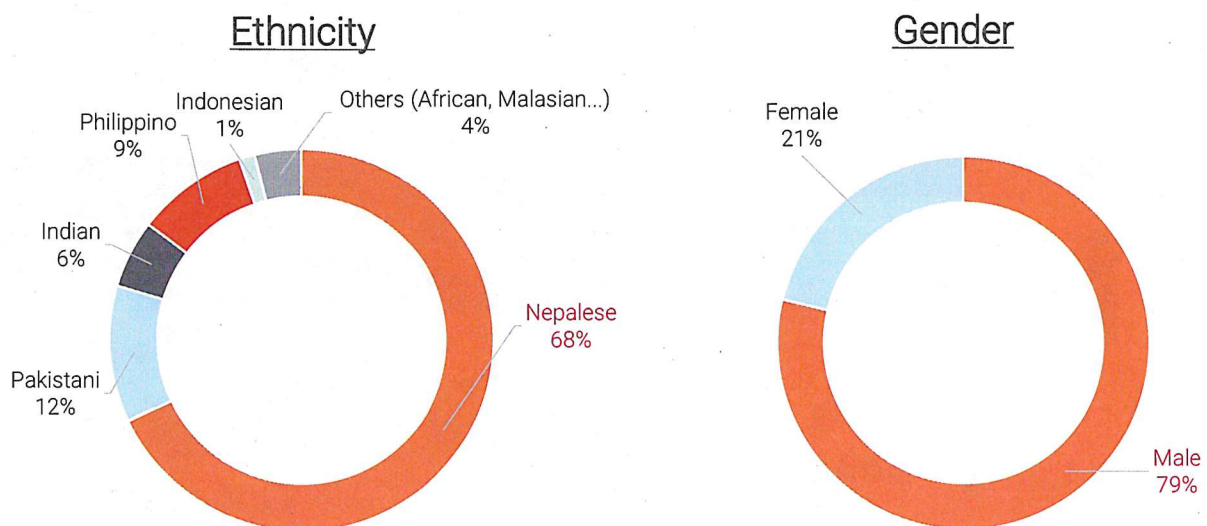
Overview of Project EMBRACE

- Community-based Drug Treatment And Rehabilitation Support Service for Ethnic Minorities + Pre-Release & Drug Prevention
- Target: Ethnically Minority (EM) Groups who have drug addiction background (active drug users and rehabilitees) and their family members
- Territory-wide
- 2 Social Workers and 3 EM Senior Peer Supporters (SPS)



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EM Service Users Background (n=381)

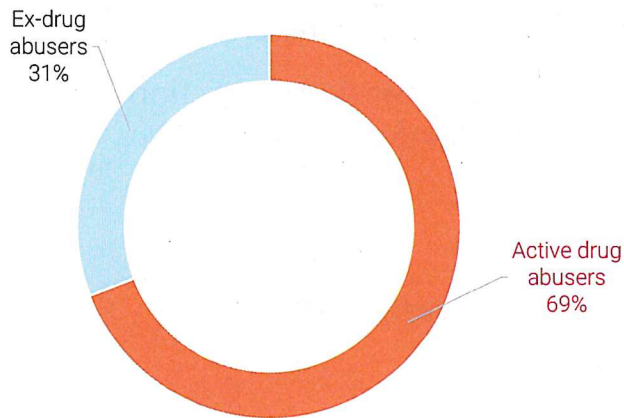


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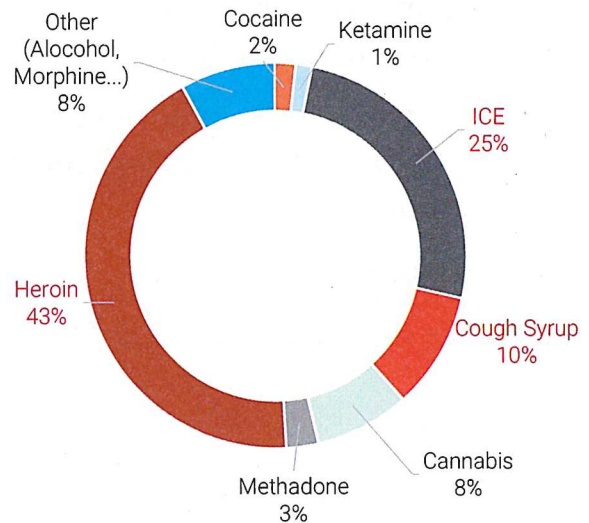
EM Service Users Background (n=381)



Active and Ex-drug abusers



Types of Drug Abused



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Service Model PERMA+

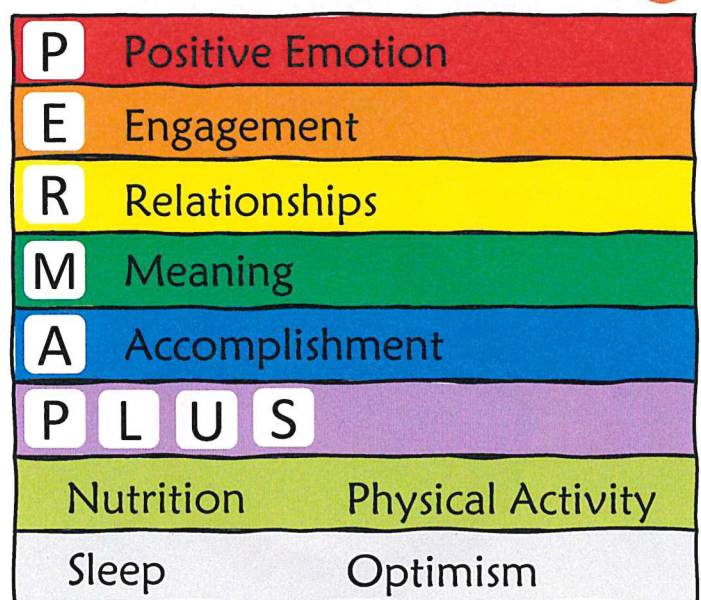
Wellbeing
Framework



Well Being



Risky
Behaviors



正向心理學教授美國心理學會會長 Dr Martin Seligman ⁸

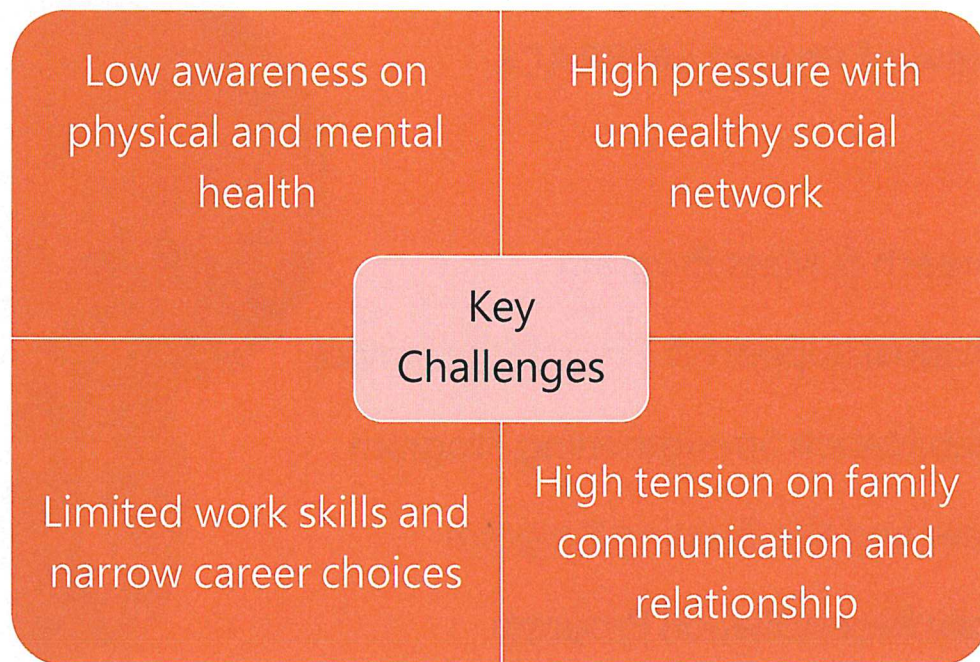
Overview of Project EMBRACE

- Our Service

1. Outreach & Mass Program
2. Individual Support & Pre-release service
3. Rehabilitation Strengthening Program
4. Career and Life Training Program
5. Family Reconciliation Program



Key Challenges



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Service Interventions & effectiveness

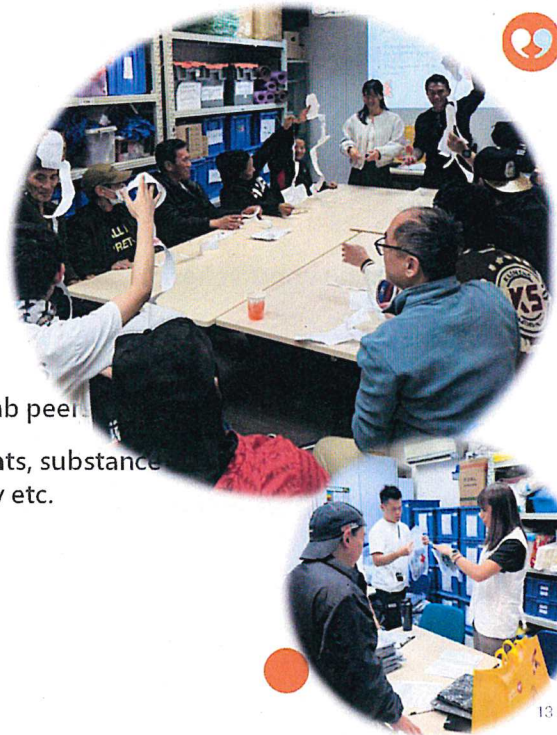
Induction program- Health Support Group & Drop-in Service

Key Challenges

Low awareness on physical and mental health

Intervention and effectiveness

1. Rehab Experience Sharing: Shared by EM SPS and rehab peers
2. Rehabilitation & Health Talk: Hostel and SAC treatments, substance induced mental illnesses, harm reduction, facing guilty etc.
3. Community bonding & refreshment for engagement
4. Highest service output reflecting highest service need (1,073 person-times attendance)



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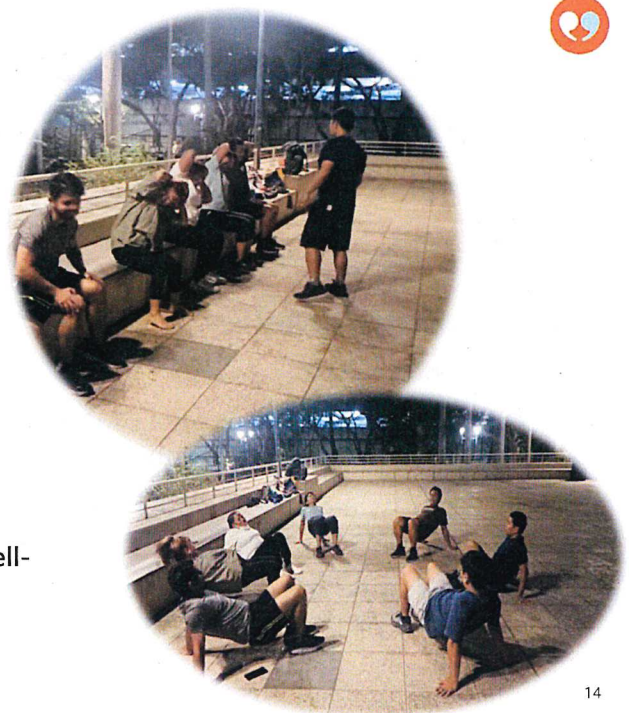
Social Rehabilitation- Wellness Friday Group

Key Challenges

High pressure with unhealthy social network

Intervention and effectiveness

1. Regular exercise training to replace drug abuse for relaxation
2. Rehab peers assisting in the group
3. Positive life attitude learnt from ED SPS colleagues
4. 66% of them show improvement in their general well-being (n=103)



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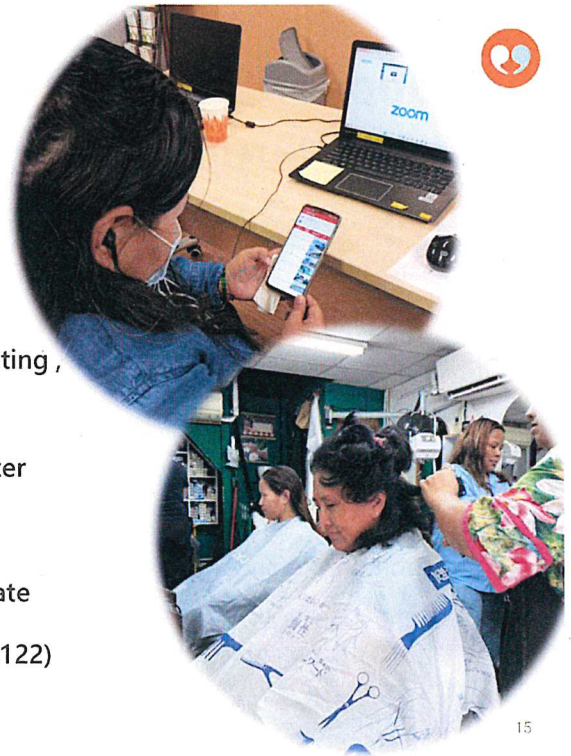
Career and Life Planning Program

Key Challenges

Limited work skills and narrow career choices

Intervention and effectiveness

1. Guided tutor courses for enhancing work skills on hair cutting , car fixing etc.
2. Life skills teaching on Cantonese, Mobile app and computer
3. From learner to helper, forming Rehab Hair Cutting Team
4. Enriching CV by VASK debriefing and completion certificate
5. 73% showed improvement on employment readiness (n=122)



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Family Strengthening Program

Key Challenges

High tension on family communication and relationship

Intervention and effectiveness

1. Family outing and home visit
2. Carers Mutual Support Group - education talk related to handling pressure, positive communication, and mindfulness workshop
3. Guided to different social resources for those family members with language barriers
4. 83.6% of the family members showed improvement on the capacity to support their drug abusing family member (n=140)



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Service Effectiveness

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Service Effectiveness-Outreaching and Mass Program



Output Indicators	Expected Result	Achieved Result
1	Provide 12 sessions of workshop, seminar or sharing for <u>360 person-time ED primary or secondary school students</u>	12 sessions (100%) <u>965 person-times (268.1%)</u>
2A	Provide at least 144 sessions of <u>outreaching</u> activities for <u>2,880 (person-times) ED at-risk individuals</u>	157 sessions (109%) <u>3,285 person-times (114.1%)</u>
2B	Provide at least 144 sessions of <u>outreaching</u> activities for <u>2,880 (person-times) ED at work or at school</u>	149 sessions (103.5%) <u>4,291 person-times (149%)</u>
2C	Provide at least 6 sessions of <u>mass program</u> for <u>600 (person-times)</u> of ED community members	15 sessions (250%) <u>1,224 person-times (204%)</u>

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Service Effectiveness-Case Services

Output Indicators	Expected Result	Achieved Result (completion %)
3	A total of <u>360 (head count)</u> ED drug abusers / rehabilitees receive <u>counselling with Motivational Interviewing</u> and assessment, with 216 (person-times) case plans set for treatment and rehabilitation. Among <u>216 case plans, 60% (or 130 cases plans)</u> will be achieved	<u>381 head count (105.8%)</u> <u>386 (person-times) case plans set (178.7%)</u> Among 386 case plans , <u>266 cases plans achieved (123.1%)</u>
4	Provide <u>ongoing support</u> in treatment (including relapse prevention, discharge preparation and adaptation training) for <u>300 (person-times) rehabilitees</u>	<u>542 person-times (180.7%)</u>

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Service Effectiveness-Rehabilitation Programs



Output Indicators	Expected Result	Achieved Result
5A	A total of <u>1,980 (person-times)</u> drug abusers / rehabilitees attend the <u>Rehabilitation Strengthening Program</u> with the following elements: -<u>induction program</u> <u>600 person-times</u> attendance -<u>parenting strengthening program</u> <u>360 person-times</u> of female attendance -<u>social rehabilitation program</u> <u>600 person-times</u> attendance -<u>lifestyle change program</u> <u>420 person-times</u> attendance	<u>2,672 person-times (134.9%)</u> -106 sessions <u>1,073 person-times attendance (178.8%)</u> -112 sessions <u>520 person-times attendance (144.4%)</u> -208 sessions <u>656 person-times attendance (109.3%)</u> -117 sessions <u>423 person-times attendance (100.7%)</u>

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Service Effectiveness-Rehabilitation Programs

Output Indicators	Expected Result	Achieved Result
5B	<u>180 person-times</u> ED inmates/ rehabilitees receive <u>Pre-release Preparation Service</u>	197 sessions <u>249 person-times (138.3%)</u>
5C	A total of <u>300 (person-times)</u> drug abusers / rehabilitees attend <u>Mutual Support Group</u>	77 sessions <u>503 person-times (167.7%)</u>

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Service Effectiveness-Career and Family Programs



Output Indicators	Expected Result	Achieved Result
6A	A total of <u>360 (person-times)</u> drug abusers / rehabilitees attend the <u>Career and Life Planning Program</u> with the following elements: -<u>peer volunteer program</u> (120 person-times attendance) -<u>vocational skills training</u> courses (18 sessions of training for <u>120 person-times</u> attendance) with <u>60% of (or 72) attendance</u> completed the course -<u>job matching and trial scheme</u> (120 person-times attendance)	<u>804 person-times (223.3%)</u> -148 sessions <u>242 person-times (201.7%)</u> -77 sessions <u>274 person-times (228.3%) with 74 attendance completed the course (102.8%)</u> -100 sessions <u>-288 person-times (240%)</u>
6B	Provide <u>family reconciliation programme</u> for <u>648 (person-times)</u> family members of drug abusers/ rehabilitees	- 287 sessions <u>838 person-times (129.3%)</u>

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Overview of Project EMBRACE



- **Service Outcome**

1. 82.65% of EM drug abusers reduce drug use or stop using drugs after completion of treatment (n=219)
2. 71.3% of EM drug abusers show improvement in motivation to quit drugs (n=223)
3. 66% of EM drug abusers showed improvement in their general well-being (n=103)
4. 73% of EM drug abusers showed improvement on employment readiness (n=122)
5. 83.6% of EM drug abusers showed improvement on their capacity to support the drug abusing family member (n=140)

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Service Implication & Sustainability

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Service Implication and Sustainability



1. Learning from Nepalese rehabilitation and active drug abusers changing living habit, **drop-in service** has developed into **regular service** for better engaging the EM active drug abusers.
2. From SideBySide research and Sports Rehab and Recovery Model and, **Sports Rehabilitation Service** has developed for including also Body-Mind Exercise with psychotherapy education.
3. Career and Life Planning Program helped rehab clients to **break the ceiling** and **worked at two local** property management company and construction **company**.
4. Carers Support Group, EM SPS and SW contributed ideas to publish **Manual for Helping Ethnically Minority Group Substance Abusers** for community education to EM Schools, HA, NGOs. SAC doctors also showed appreciation to our publish and would **share** with nurses

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Service Implication and Sustainability



5. Our EM SPS and SW with **high cultural sensitivity and skills on rehab** help bridging up the EM clients, families, CCPSA, Hospitals, SWD to receive treatments and social resources
Person centred and holistic approach
6. We-feeling support from EM rehabilitated colleague
(Ganesh Gurung, our Senior Peer Supporters working for more than 13 years)
7. Peer System
(Empowering clients with upward mobility)
8. Stability of projects and resources
(lasting for more than 10 years, Apr-Sep 2025 131 head count EM registered our new project)

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