

## Chapter 2

### EXISTING TREATMENT AND REHABILITATION SERVICES AND OTHER ANTI-DRUG INITIATIVES

2.1 This chapter provides an overview of the existing treatment and rehabilitation (T&R) services, as well as other anti-drug initiatives. Progress and achievements on various fronts since the issue of the ninth Three-year Plan for 2021 to 2023 are also covered hereunder.

#### (A) Existing T&R Services - Multi-modality Approach

2.2 Hong Kong adopts a multi-modality approach in providing drug T&R services. Drug abusers can receive the services that best meet their needs to help them overcome addiction, quit drugs, and reintegrate into the society. A list of major T&R service units in Hong Kong can be found at **Annex B**.

2.3 There are various types of drug T&R services in Hong Kong involving different service providers, such as Government departments, the Hospital Authority (HA), non-governmental organisations (NGOs) as well as private practitioners. There are residential-based or community-based T&R services, some with religious backgrounds and some without; some are operated or subvented by the Government while others operate on a self-financing basis. People with drug abuse problem may receive the services that most suit their needs on a voluntary basis. Convicted drug-dependent persons may be ordered by the court for admission to Drug Addiction Treatment Centres (DATCs) operated by the Correctional Services Department (CSD) on a compulsory basis or receive services in other drug T&R residential or community-based units under court or probation orders.

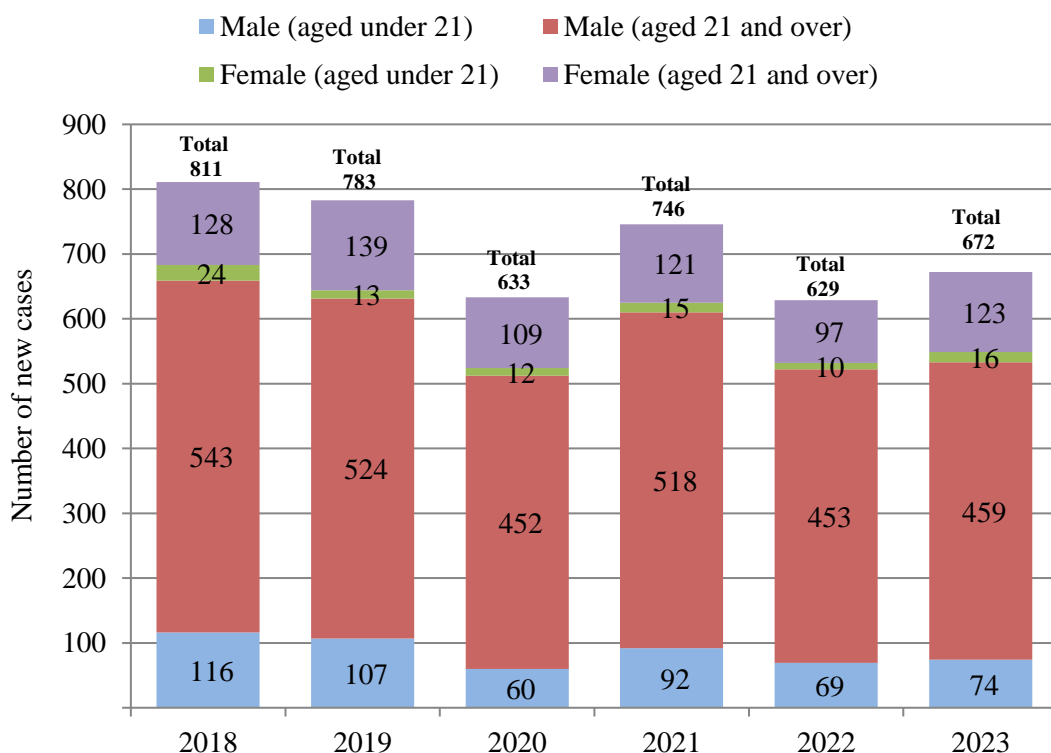
#### (i) Drug Treatment and Rehabilitation Centres (DTRCs)

2.4 DTRCs, currently all operated by NGOs, provide a drug-free residential environment to drug abusers to help them quit drugs. The centres also offer support services (e.g. vocational and/or life skill training) to facilitate rehabilitees to reintegrate into the society after leaving the

centres. Education programmes are available in some DTRCs for young residents having regard to their personal growth stage, learning diversity, and interests. Some also offer vocational training and career counselling. To help rehabilitees maintain abstinence from drugs, there are different types of aftercare services of DTRCs such as continuous monitoring, counselling, and mutual support groups after completion of their residential drug treatment programmes. To better support the recovery of drug rehabilitees, counselling services for the family members of rehabilitees are provided.

2.5 Currently, there are 37 DTRCs run by 16 NGOs, 19 of which are subvented by the Department of Health (DH) or the Social Welfare Department (SWD) whereas 18 are self-financing. Some DTRCs offers T&R programmes that cater to the needs of specific groups of drug abusers, in particular the specific groups set out in paragraphs 4.21 to 4.33 in Chapter 4. Some DTRCs provide free residential T&R programmes, while others charge a monthly fee.

Figure 1: Number of new admissions to DTRCs



*Table 1: Number of persons under treatment in DTRCs or on aftercare by DTRCs as at 31 December of each respective year*

	<b>2018</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>
Age under 21	340	315	272	274	249	206
All ages	2 549	2 523	2 422	2 545	2 627	2 711

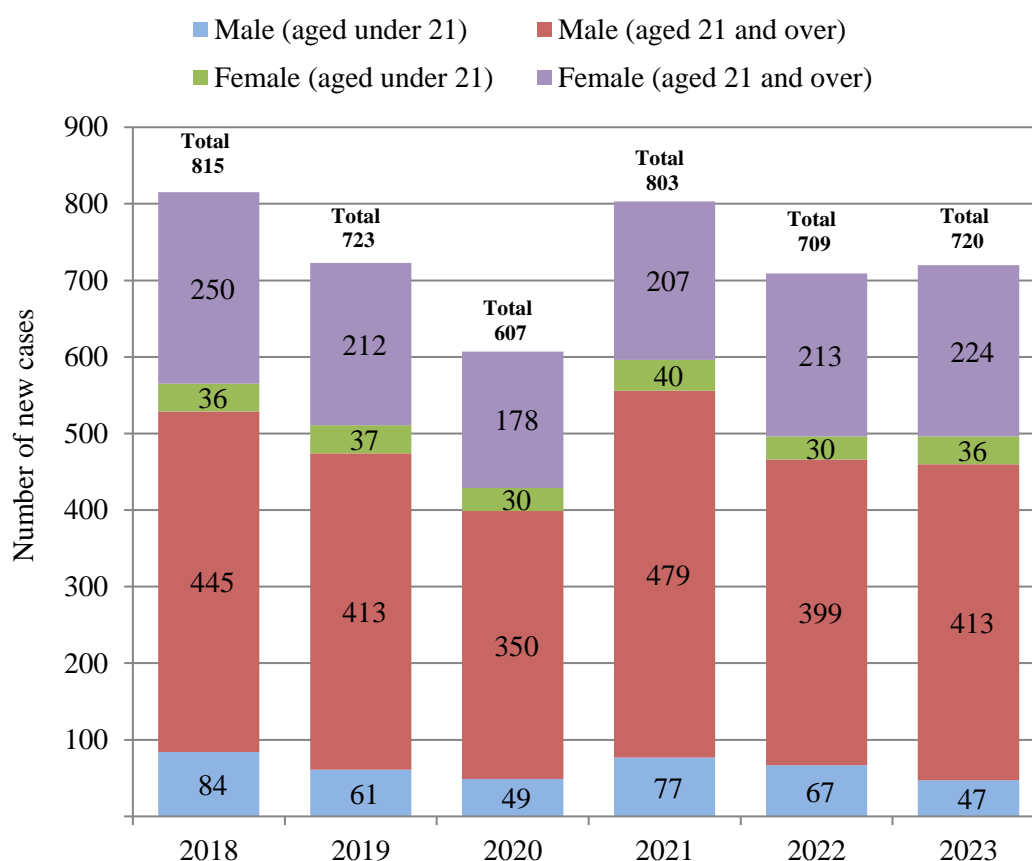
*Remark: The figures for 2020-2023 should be viewed with caution as they might have been affected by the local COVID-19 pandemic since its outbreak in early 2020.*

(ii) Counselling Centres for Psychotropic Substance Abusers (CCPSAs)

2.6 CCPSAs offer counselling and support services to psychotropic substance abusers (PSAs) and their family members with a focus on community-based drug treatment and recovery. To facilitate early medical intervention, CCPSAs provide on-site medical support services such as body checks and drug tests, as well as motivational interviews and drug-related consultations. In cases where more intensive medical care is needed, CCPSAs will refer individuals to Substance Abuse Clinics (SACs) run by HA and other medical specialists. In addition, CCPSAs provide aftercare services for individuals discharged from DTRCs, ex-probationers, and discharges from CSD's facilities. There are currently 11 district-based CCPSAs operated by seven NGOs, and they are subvented by SWD.

2.7 CCPSAs also conduct anti-drug preventive education and publicity programmes in the community, secondary schools, post-secondary education institutions as well as workplaces to enhance knowledge and awareness of drug abuse problems. For professionals who may come across PSAs in the course of their work, such as teachers, medical and health professionals, police officers and social workers, CCPSAs offer professional training to them at district level via talks and seminars, group activities, etc. with a view to enriching their knowledge and capacity to render assistance to PSAs.

Figure 2: Number of new cases of CCPSAs



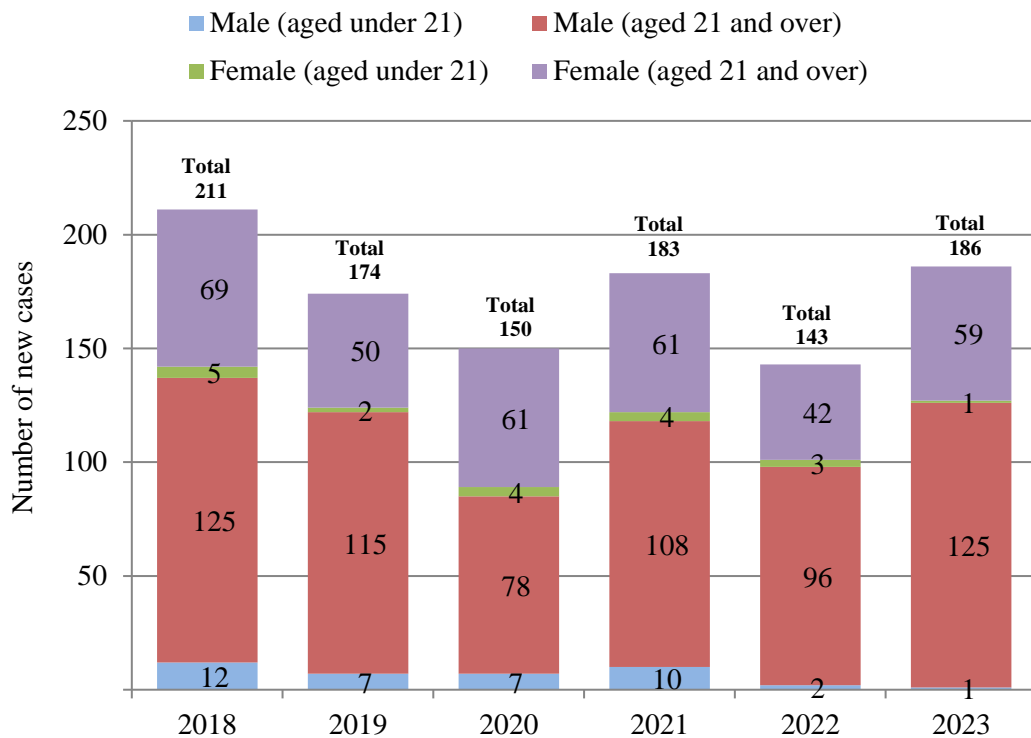
Remark: The figures for 2020-2023 should be viewed with caution as they might have been affected by the local COVID-19 pandemic since its outbreak in early 2020.

(iii) Centre for Drug Counselling (CDC)

2.8 CDC, subvented by SWD, has two sub-bases<sup>3</sup> to provide territory-wide community-based T&R services to help drug abusers quit drugs, and assist drug rehabilitees maintain abstinence. While the target clients of CDC were mainly heroin abusers when the centre was first established in the 1960s, CDC has broadened its focus to cover PSAs and their family members to keep pace with evolving drug trend. Individual counselling, group activities and support for drug abusers and their family members as well as on-site medical support service are provided to identify and motivate drug abusers to seek T&R services.

<sup>3</sup> Namely, the Hong Kong Centre in Wanchai and the Kowloon Centre in Wong Tai Sin operated by Caritas Lok Heep Club

Figure 3: Number of new cases of CDC

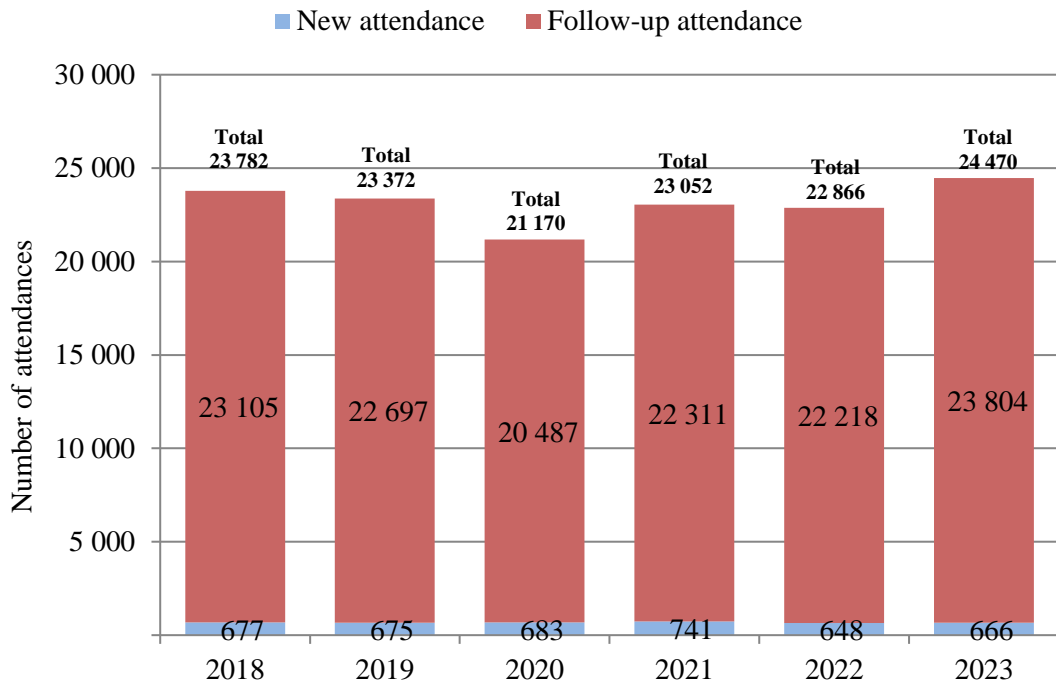


Remark: The figures for 2020-2023 should be viewed with caution as they might have been affected by the local COVID-19 pandemic since its outbreak in early 2020.

(iv) Substance Abuse Clinics (SACs)

2.9 SACs, operated by HA, offer outpatient medical consultation and treatment by psychiatrists to drug abusers with psychiatric problems, and provide other supporting services by occupational therapists, clinical psychologists and social workers. SACs accept referrals from T&R service units, relevant NGOs and medical practitioners. Apart from striving to offer first consultation sessions to new cases within four weeks, SACs exercise flexibility in advancing medical appointments, arranging consultation sessions in shorter intervals and/or offering immediate preliminary assessments by psychiatric nurses to address the needs of individual patients having regard to their medical conditions. There are currently nine SACs under the seven hospital clusters operated by HA.

Figure 4: Number of new and follow-up attendances at SACs



Remark: The figures for 2020-2023 should be viewed with caution as they might have been affected by the local COVID-19 pandemic since its outbreak in early 2020.

2.10 In addition to the specialist outpatient services offered by SACs, HA provides inpatient psychiatric treatment to drug abusers in need among other service users. Comprehensive range of treatment is provided, including physical care, medication, psychotherapy, individual and family education and counselling, rehabilitation and psychosocial intervention. Furthermore, Psychiatric Day Hospitals operated by HA provide multidisciplinary assessment, continued care and rehabilitation services to psychiatric patients (including drug-taking patients). Besides, Community Psychiatric Services of HA and its 24-hour “Mental Health Direct” hotline offer support and advice to psychiatric patients including those drug-taking ones, their carers and relevant stakeholders.

(v) Methodone Treatment Programme (MTP)

2.11 Using methadone as a maintenance agent in the treatment for abusers of opiate drugs is currently recognised as one of the most effective treatments by the international medical community and is endorsed by organisations such as the United Nations Office on Drugs and Crime (UNODC) and the World Health Organization.

- 2.12 Launched in 1972, the voluntary out-patient MTP adopts an open-door policy, where people in need may attend any methadone clinic voluntarily to receive services. Currently, DH operates a total of 18 clinics in Hong Kong. MTP adopts an integrated treatment approach, offering professional counselling and social welfare support to provide holistic care alongside the provision of methadone as a maintenance agent. There are also medical check-ups by doctors before a patient receives treatment under the Programme.
- 2.13 MTP provides a legal, effective, affordable and readily accessible alternative to illegal opiate drugs to people who are dependent on opiates; reduces crime and anti-social behaviour arising from drug abuse; enables drug abusers to lead a more productive life and continue their work; and prevents the spread of blood-borne diseases through reduction of intravenous drug taking and needle-sharing. Methadone works by controlling the withdrawal symptoms of opiate abusers when they go through abstinence from illicit opiate drugs, and prevent them from falling prey to temptation of taking drugs again and even committing crimes. There are aftercare services which last for 18 months for participants who have completed the detoxification programme for prevention of relapse.

*Table 2: Utilisation of MTP*

	2018	2019	2020	2021	2022	2023
Attendance rate:						
Effective registration	5 782	5 247	5 298	4 861	4 329	4 018
Daily attendance	4 383	3 876	4 077	3 683	3 197	2 995
Average daily attendance rate	75.8%	73.9%	77.0%	75.8%	73.9%	74.5%

*Remark: The figures for 2020-2023 should be viewed with caution as they might have been affected by the local COVID-19 pandemic since its outbreak in early 2020.*

(vi) Drug Addiction Treatment Centres (DATCs)

2.14 CSD operates compulsory drug addiction treatment programmes in its four DATCs. Where the courts consider suitable, drug dependent persons aged 14 or above who are convicted of relevant offences, not necessarily drug-related, will undergo the treatment programmes in DATCs with a view to preparing them for reintegration into the society and maintaining abstinence from drugs. The programmes incorporate structured and market-oriented vocational training programmes for inmates to help them achieve recognised qualifications and equip themselves with work skills. Mindfulness-based psychological treatment is also provided to minimise relapse.

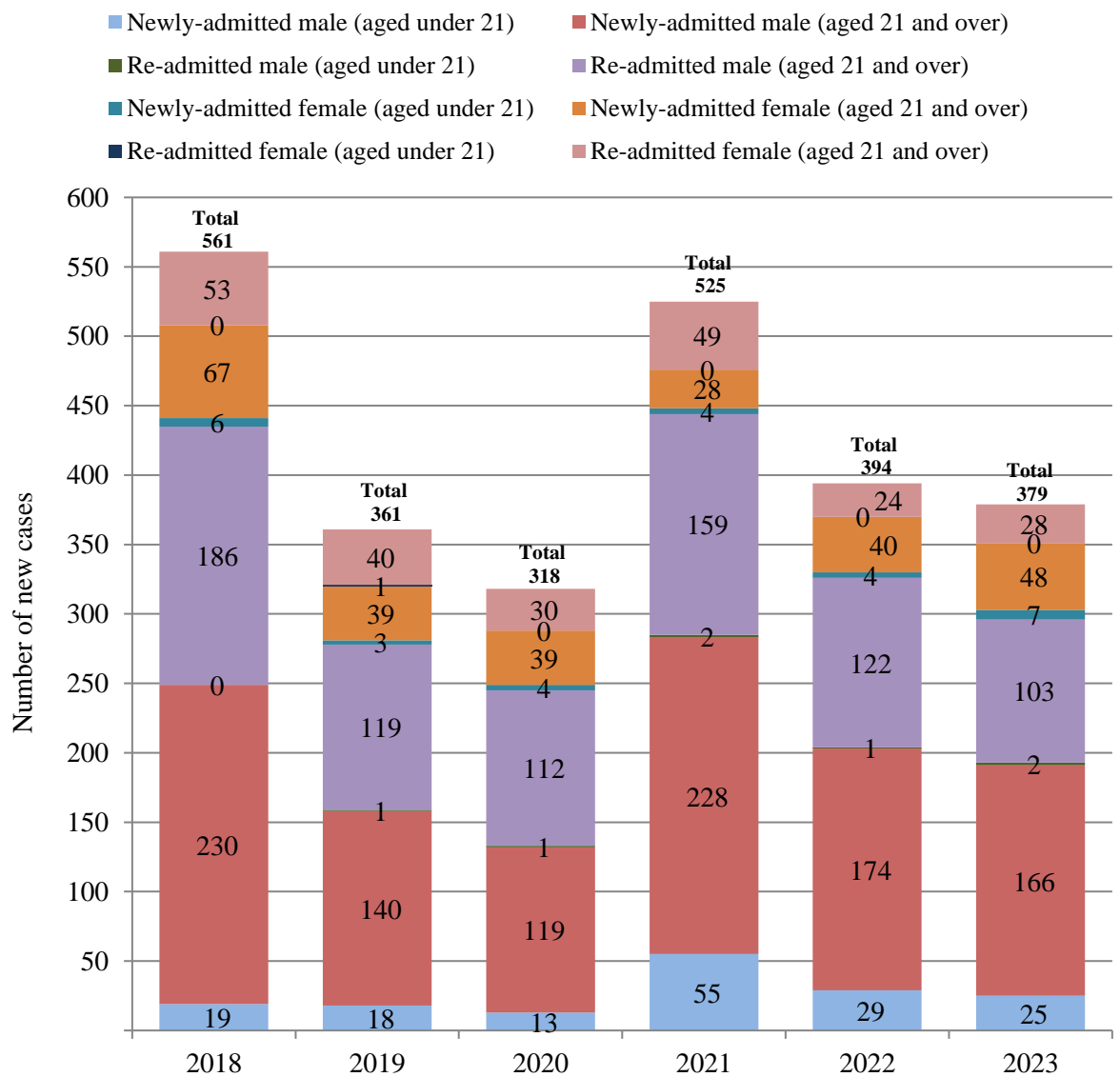
2.15 In 2023, a trial programme called the Enhanced DATC Programme was implemented in the male adult DATC, specifically in the Hei Ling Chau Addiction Treatment Centre, with the aim of strengthening the therapeutic aspects of the existing “3T” (therapy, talent, and target) treatment programme in DATC. This trial programme incorporates the principles of the Good Lives Model, which assists in establishing positive life goals and identifying and addressing the underlying causes of drug relapse. As part of this trial programme, cardiovascular exercises and mindful stretching practices are organised for inmates to improve their physical fitness and enhance their emotional well-being. The inmates’ health indicators are measured periodically to monitor their progress in terms of health improvement and to be regularly reviewed by individual Health Index Card. Additionally, the introduction of the Good Lives Model encourages inmates to set personal life goals. To support these goals, appropriate institutional and NGO services are provided to each inmate based on their specific needs and objectives.

2.16 Upon release from DATCs, continuous care and guidance are given to the dischargees through a 12-month statutory supervision. During the supervision period, supervising officers work closely with the dischargees and their families to help them overcome challenges on their return to the community. Supervising officers pay frequent visits to the dischargees’ homes and workplaces to maintain regular contacts with them. Drug tests are also arranged to ensure the dischargees remain drug-free. Furthermore, under the Enhanced DATC Programme mentioned in paragraph 2.15 above, there is an initiative, namely Companion Programme, which allows NGOs to build connections with the inmates



while they are still in custody and provide social support to inmates at their early stage of statutory supervision to facilitate their reintegration into the community and help them maintain abstinence from drugs. Besides, since 2004, CSD has collaborated with CDC to implement the “Continuing Care Project” to provide additional aftercare support to discharges who require ongoing assistance by CDC after the completion of their statutory supervision.

Figure 5: Number of admissions to DATCs



*Table 3: Number of discharges and number of persons under treatment and supervision in DATCs as at 31 December of each respective year*

	<b>2018</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>
Dischargees*	610	506	242	439	467	401
Treatment <sup>#</sup>	413	201	272	335	273	250
Supervision <sup>#</sup>	551	511	199	351	394	335

\* The numbers represent the total number of dischargees for the whole year but exclude those transferred to other correctional programmes.

<sup>#</sup> The numbers represent the people under treatment/supervision as at 31 December of the respective years.

*Remark: The figures for 2020-2023 should be viewed with caution as they might have been affected by the local COVID-19 pandemic since its outbreak in early 2020.*

(vii) Enhanced Probation Service (EPS)

2.17 Illicit possession and consumption of dangerous drugs are criminal offences under the Dangerous Drugs Ordinance (Cap. 134). For those having committed drug-related offence, the courts have the discretion to give probation supervision among a range of sentencing options including custodial sentence. When a probation order is given, individuals with drug-related issues are normally required to undergo anti-drug counselling and treatment under the statutory supervision of a probation officer (PO).

2.18 Since 2009, SWD has been operating EPS for suitable individuals aged below 21 who have been convicted of drug-related offences. SWD has raised the age limit of EPS to below 25 since September 2022 so that more young drug offenders would be benefitted from the programme. PO will assess the suitability of individual offenders for receiving EPS during social investigation. The goal of EPS is to provide a more focused, structured, and intensive treatment program for young offenders. Under EPS, POs provide more frequent and intensive interview sessions with probationers and their families. Surprise home visits and school or employment checks are also arranged to assist probationers in staying on the right path. In addition, more frequent and random urine tests are conducted to ensure that probationers remain drug-free. Structured thematic therapeutic programs and training are also

arranged to meet the rehabilitation needs of individual probationers. EPS has been proven effective in preventing drug relapses and reducing reconviction rates of young offenders during the probation supervision period.

*Table 4: Number of probationers placed under EPS*

	<b>2018</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>
No. of new cases	41	30	38	67	56	68
No. of completed cases	38	39	33	29	70	58

*Remark: The figures for 2020-2023 should be viewed with caution as they might have been affected by the local COVID-19 pandemic since its outbreak in early 2020.*

(viii) District Youth Outreaching Social Work Teams (YOT) and Overnight Outreaching Teams for Young Night Drifters (YND)

2.19 Subvented by SWD, YOT/YND teams seek out and engage young people aged 6 to 24 who do not normally participate in conventional social activities and are vulnerable to negative influence and delinquency risks including drug abuse. Through on-the-spot contacts and immediate intervention, social workers establish trustful relationship with youngsters through rapport building, which is conducive to cultivating and maintaining motivation to quit and stay away from drugs. This facilitates early identification of at-risk youths and those who are already abusing drugs. Other services such as drug counselling and rehabilitation are also offered as appropriate, and cases may be referred to appropriate service units for follow-up. At present, there are 19 YOT teams and 18 YND teams.

**(B) Anti-drug initiatives and progress made between 2021 and 2023**

2.20 After extensive consultation with stakeholders, service providers and relevant committees, including the Action Committee Against Narcotics (ACAN), its Sub-committee on Treatment and Rehabilitation (T&R Sub-committee) and the Working Group on the Three-year Plan (2021-2023), ND promulgated the Three-year Plan covering the period from 2021 to 2023 in March 2021 which sets out recommendations on various fronts.

Since the issue of the Three-year Plan (2021-2023), relevant Government bureaux and departments (B/Ds), HA and different anti-drug service units have been responding to the strategic directions set out in the Three-year Plan by implementing new anti-drug initiatives and refining their services and programmes. Major efforts and progress made are summarised in the ensuing paragraphs.

(i) Continued and enhanced multi-disciplinary and cross-sectoral collaboration

- 2.21 The importance of collaboration among different sectors and disciplines has been highlighted as a vital approach to achieving effective delivery of T&R services in order to cater for the different backgrounds and varying needs of drug abusers. Through joint case conferences, established referral mechanisms, joint programmes and regular meetings, collaboration among relevant Government B/Ds, anti-drug service units, other welfare service units, medical service units in both public and private settings and community organisations has been continuously strengthened at different levels.
- 2.22 To forge further cross-sectoral and cross-disciplinary collaboration at the district level, ND has continued to share the latest drug trend and exchange views on the major anti-drug work with different service units and community stakeholders through different channels. ACAN and T&R Sub-committee meet regularly to discuss and review various anti-drug initiatives, including those taken forward by various NGOs using subvention, the Beat Drugs Fund (BDF) and other resources. The Drug Liaison Committee (DLC) convened by ND also meet at least three times a year to foster closer collaboration amongst Government departments and service units.
- 2.23 Specific to the social services sector, the meetings of district coordinating committees (DCCs) arranged by SWD serves as a focal point for sharing of information among different NGOs in districts. In 2021 and 2022, ND joined 11 meetings of DCCs covering all districts in Hong Kong to brief members on the recent drug trend of the time and encourage closer cross-sector/service collaboration. Relevant anti-drug service units have also been invited to join the meetings to promote their work and programmes. In addition, various anti-drug service units have been actively participating in different coordinating committees, working groups and

network in the districts that they are serving. Case referral mechanisms are maintained not only among anti-drug service units, social service units and medical service units, but also with other professionals and community stakeholders such as lawyers, school principals and ethnic minority leaders.

2.24 Within the anti-drug sector, ad hoc visits, experience sharing workshops and information exchange sessions have been organised to encourage closer ties among service units. For example, community-based T&R service units jointly organised a one-day experience sharing seminar on T&R services in December 2022 with more than a hundred frontline practitioners to exchange views on a diverse range of subjects, including anti-drug work against cannabis abuse, training and development for peer counsellors, as well as promoting a mutual support network amongst practitioners. Furthermore, anti-drug service units and community stakeholders worked together to implement joint activities and programmes such as –

- joint outreaching services by CCPSAs, YOT and YND;
- the Companion Programme for discharges from DATC as set out in paragraph 2.16 above launched by CSD in collaboration with NGOs;
- relapse prevention groups by POs of SWD and CCPSAs; and
- joint training programme on working with young drug abusers and their families for POs, CCPSAs and DTRCs.

(ii) Wider use of technology

2.25 To prepare for unexpected circumstances including public health situations and help ease the tremendous workload of DTRCs arising from escorting service users to attend medical appointments, ND has been working closely with HA and pressed ahead with a pilot project of providing online medical consultation for drug abusers attending T&R programmes at selected DTRCs who are diagnosed with psychiatric issues. The pilot project was launched in June 2022. SACs of HA have been making continuous efforts to identify more suitable patients to join the pilot project and further expand the project to cover more DTRCs.

- 2.26 Meanwhile, anti-drug service units have been accumulating more experiences in using different innovative means and technology in their service delivery amid the COVID-19 epidemic, e.g. online counselling, adopting virtual reality for counselling, online outreaching through social media, online educational programme for promoting the harms of cannabis, etc.
- (iii) Continued provision of targeted services for specific groups of drug abusers

*Ethnic minority drug abusers*

- 2.27 To cater for the service needs of the ethnic minorities, the NGOs providing T&R services to drug abusers contacted the three outreaching teams for ethnic minorities (OTEMs) commissioned by SWD to enhance collaboration in working on the ethnic minority drug abusers. In November 2021, ND invited SWD and one of the OTEMs to share their work with DLC and exchange views on areas for collaboration. SWD also organised sharing sessions in December 2021 and January 2023 for social workers and healthcare professionals from anti-drug service units and OTEMs to improve their sensitivity, skills and knowledge in handling drug abuse problems among ethnic minorities. With funding support of the BDF Regular Funding Scheme (RFS), an NGO organised a training on handling drug abuse problem of the ethnic minority communities to frontline practitioners of the anti-drug sector and tertiary students of related disciplines.
- 2.28 For early identification of drug abuse problem among the ethnically diverse population, some anti-drug service units have conducted targeted outreach programme and set up mobile health check stations in hot spots. Anti-drug information were provided in their languages to raise their awareness and facilitate understanding. Some anti-drug service units have been proactively working with outreaching teams to conduct targeted joint outreaching services and anti-drug promotion for ethnic minorities. There was also a tailor-made BDF project targeting youngsters of this population to strengthen their resilience and self-efficacy to resist drugs and develop positive personal growth. Besides, some anti-drug service units have engaged drug rehabilitees of different ethnicities as peer counsellors or social workers to cater to the specific needs of ethnic minority drug abusers. With the support of BDF, a DTRC

operator has run a project to provide vocational training courses for their ethnic minority residents to prepare them for reintegration into the society. Furthermore, under that project, drug abusers and their family members were provided with professional counselling services to improve the capability of family members to support drug rehabilitees in maintaining abstinence.

*Pregnant drug abusers and drug-abusing parents*

2.29 For pregnant drug abusers and drug-abusing parents, the *Chief Executive's 2022 Policy Address* stipulated that manpower at subvented community-based T&R service units would be strengthened, and the Government has injected extra funding to CCPSAs and CDC on a recurrent basis from FY2023-24 onwards. After consulting the service units concerned on relevant arrangements, including adjustments to the Funding and Service Agreements, SWD has implemented the initiative in June 2023. The additional resources supported pregnant drug abusers and drug-abusing parents to strengthen their motivation to quit drugs and continue to receive drug treatment, thereby reducing their risk of relapsing into drugs. More support has been provided to attend to the needs of drug-abusing parents with newborns or pregnant drug abusers to attend medical check-ups and treatments. More tangible support and training in pre-natal care, childcare, post-natal care and escort services have also been provided. Not only would this measure prevent inter-generation drug abuse, but also help the prevention of other family and children problems.

*People who abuse drugs in the context of sex (including men having sex with men (MSM) with drug abuse problem)*

2.30 Both residential-based and community-based T&R services have been provided and strengthened to address the specific needs of MSM with drug abuse problem. With the funding support of BDF RFS, dedicated counselling groups and mutual support groups have been formed in different anti-drug service units to provide a platform for candid sharing as well as a space for healing where service users feel supported and encouraged. Some service units offered therapeutic and lifestyle activities, e.g. art, horticulture, meditation and sports, to help drug abusers of this group to develop positive interests and take a break from drug as well as the stress faced in their daily lives. A DTRC has promoted an inclusive culture and the importance of privacy protection

that cater to the needs of MSM drug rehabilitees. Furthermore, a service unit organised a four-day course on narrative therapy for frontline practitioners to share experiences in adopting such therapy for this specific group of drug abusers. The service unit concerned has also maintained a standing referral mechanism with HIV clinics in Hong Kong for mutual referral of patients with drug abuse problems.

(iv) Capacity building

*Cannabis and other types of drugs*

2.31 In response to the prevalence of cannabis abuse, ND organised a “Capacity Building Online Seminar on Cannabis Abuse” on 24 September 2021 to enhance the knowledge of frontline staff on debunking myths concerning cannabis use and its harms, as well as strengthen their capacity in encouraging help-seeking of cannabis abusers. More than 500 frontline practitioners, including social workers of various fields, peer counsellors, medical and allied health professionals, personnel from the education sector, tertiary students of related disciplines, etc., joined the seminar. Moreover, SWD and anti-drug service units have organised various seminars/workshops on cannabis for social workers, school personnel and teachers of tertiary institutions and secondary schools, medical students and social work students of tertiary institutions, leaders of uniformed groups, etc. while ND has requested its commissioned contractors which provided anti-drug training to school personnel to incorporate information on cannabis and other emerging drugs into the training materials.

2.32 In view of the potential resurgent of some drug types, ND also invited HA’s Hong Kong Poison Information Centre to give a presentation on less commonly abused drugs such as gamma-hydroxybutyrate (GHB), gamma-butyrolactone (GBL) and lysergic acid diethylamide (LSD) at the DLC meeting of 24 November 2021.

*Relevant personnel involved in the anti-drug efforts*

2.33 As regards medical professionals and allied health professionals, HA has continued to provide relevant training to their doctors, nurses and allied health professionals. For example, a two-day training programme on “Motivational Interviewing from Substance Abuse to a Wider Application of Motivational Interviewing in Mental Health Service” was held in January 2023 with more than 240 participants, including



psychiatrists, psychiatric nurses, clinical psychologists and occupational therapists. Separately, an anti-drug service unit has also collaborated with HA to organise a professional training session for family doctors, which covered drug trend, characteristic of drug abusers and basic motivational interviewing skill. Some anti-drug service units have organised capacity building workshops on substance abuse related topics for tertiary students studying medicine and nursing.

- 2.34 In respect of teachers, school personnel and parents, ND has been providing anti-drug training programmes for them through various channels, including regular parental talks and training sessions for teachers and school personnel. Meanwhile, ND, the Education Bureau (EDB) and the Hong Kong Police Force (HKPF) have been collaborating closely to enhance professional knowledge and capacity of school personnel in promoting anti-drug education. EDB invited ND and HKPF to the seminar on “Promotion of Anti-drug Education in schools” in June 2022, and HKPF to the seminar on “Curriculum planning and strategies of promoting Anti-drug Education and Healthy Lifestyle in schools” in November 2022. Through these two seminars, the latest drug trend and drug-related offences were shared with over 300 principals and teachers. EDB has organised experiential learning workshops on anti-drug education for teaching staff of primary and secondary schools, where the participants would join the guided tours of the Hong Kong Jockey Club Drug InfoCentre (DIC) commissioned by ND. EDB and HKPF have jointly held seminars on “Promotion Strategies and Learning & Teaching Resources for Promoting Anti-drug Education in Schools”. In addition, some anti-drug service units have provided training to primary and secondary school teachers while an anti-drug service unit has delivered anti-drug sharing with kindergarten teachers to enhance their capacity in identifying drug-taking parents and the associated risks to children.
- 2.35 SWD organised a structured training course for peer counsellors in December 2022 to enhance their knowledge of the latest drug trend and basic counselling skills. Meanwhile, with the support of BDF, an anti-drug service unit organised the first round of “Peer Counsellor Advanced Course” for 30 peer counsellors. This service unit also launched another round of course named “Foundation Certificate in Peer Counsellor Training” which is recognised by the Employees Retraining Board. Some anti-drug service units have, with support from BDF or other funding sources, organised training courses for tertiary students of related disciplines, such as medical, nursing and social work, to prepare

them for handling of drug abusers and patients who abuse drugs in their future career. Furthermore, under a BDF project, a tertiary institution has collaborated with an anti-drug service unit to provide anti-drug training for more than 200 students who would become teachers upon graduation.

- 2.36 As for parents, ND, with the participation of HA, organised a series of public education campaigns against cannabis use among youth in early 2022, under which an online seminar was held particularly for parents in January 2022. With BDF's funding support, an anti-drug service unit has organised a programme for raising the health and anti-drug awareness of both Chinese and non-Chinese speaking parents through anti-drug parenting workshops and production of booklets for parents in Chinese and four other ethnic minority languages.

*Therapeutic approaches and interventions*

- 2.37 In light of the changing drug scene and feedback of stakeholders, SWD has endeavoured to provide training of diverse drug-related topics to social workers. For instance, a training course on using trauma-informed care practice in working with youth with traumatic experience was organised in January 2023 to strengthen social workers' ability in the application of trauma-informed care practice in providing counselling for youth with trauma. Under the support of BDF, a number of service units have also organised training courses and sessions on different effective therapeutic interventions to better equip social workers and relevant personnel of the anti-drug sector to render T&R services to drug abusers.

(v) Others

*Strengthened Preventive Education and Publicity (PE&P) efforts*

- 2.38 On PE&P, ND held a large-scale anti-drug TV publicity event and launched a new overarching theme, including a new logo, a new slogan "Let's Stand Firm. Knock Drugs Out!" and two anti-drug ambassadors, Agent Don't and Agent Hope, in September 2022. A new set of corresponding TV and radio Announcements in the Public Interest (APIs) was also premiered at the same time. In view of the new legislation to control cannabidiol (CBD) as a dangerous drug with effect from February 2023, a dedicated publicity campaign has been launched with promotions through different channels (such as street banners, social media advertisements, TV advertisements, in-flight video,

dissemination of leaflets and posters at boundary control points, fairs for the relevant trade, etc.). On cannabis, ND continued to broadcast a set of TV and radio APIs about the harms caused by cannabis abuse, with an emphasis on “cannabis is a drug”. A series of animated infographic videos highlighting the misconceptions of cannabis were also uploaded onto the social media platforms. Besides, given the rise in the number of reported cocaine abusers in recent years, apart from launching an animated video on the harms of cocaine, ND produced a new set of TV and radio APIs which was launched in January 2024. This indeed has echoed the *Chief Executive’s 2023 Policy Address* that “ND would strengthen publicity and education on the harms of cocaine through a range of activities so as to prevent the spread of drug harms”. ND would continue the best endeavour to combat cocaine abuse in the community through various PE&P initiatives.

*Graphic 1: Anti-drug ambassadors Agent Don’t and Agent Hope*



2.39 On the front of schools, ND has continued to implement two school-based PE&P initiatives, namely the “Healthy School Programme with a Drug Testing Component” and “Beat Drugs with Sports” Programme. Both programmes aim to enhance the physical and mental health and well-being of secondary school students and foster their resolve to refuse drugs, thereby promoting the cultivation of healthy and drug-free school culture. Participating schools reflected that most of their teachers, students and parents agreed that the programmes helped foster a drug-free culture in schools and raise their anti-drug awareness, enhanced their knowledge on drugs, and strengthened students’ resolve to stay away from drugs and develop healthy lifestyle. With concerted efforts of the Government and the education sector, the programmes are expanding over the years and they have now become the signature and most popular school-based anti-drug education programmes led by the Government. In the 2023/24 school year, the number of participating schools reached

285, accounting for about 55% of the 519 secondary schools in Hong Kong.

2.40 Apart from the above PE&P efforts, DIC has become the hub and focal point of anti-drug information and activities following the large-scale revamp completed in end-2022. The revamp has equipped DIC with new multimedia exhibits and facilities. Apart from the hardware, various anti-drug-related events have been hosted inside DIC, including anti-drug training, seminars, exchange sessions, workshops, parental talks, and thematic exhibitions and activities for parents, teachers, social workers and tertiary students of related disciplines. Some NGOs and other stakeholders of the community have also made good use of the venue to host different anti-drug and related events.

*Graphic 2: Hong Kong Jockey Club Drug InfoCentre*



*Wide array of research projects supported by BDF RFS*

2.41 On the front of research, studies on different drug-related topics have continuously been encouraged and conducted, such as collating good practices or protocols, drug harms, as well as characteristics of PSAs. For instance, a research project aiming at formulating a set of guidelines to evaluate the efficacy of T&R programmes with reference to the results and outcomes of previous BDF RFS projects was supported. There were also various research projects on therapeutic approaches which provided insights to evidence-based T&R services. Under the Funding Exercises of BDF RFS in 2021-2023, 12 researches were supported. Some BDF

grantees have, in addition to organising anti-drug prevention or T&R programmes, engaged academics to assist in evaluating the effectiveness of their programmes and protocols. To ensure that stakeholders and service units would benefit from the latest findings from research, ND has been inviting research teams to share their findings on suitable occasions.

*Continued assistance and support to DTRCs concerned*

- 2.42 The Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance (Cap. 566) (the Ordinance) came into operation in April 2002 for the protection of well-being of drug dependent persons undergoing residential T&R programmes. For DTRCs which had been in operation before the commencement of the Ordinance but were unable to comply fully with the licensing requirements, they were issued with Certificates of Exemption (CoEs) for continued operation. To fully meet the licensing requirements, those DTRCs would need to carry out in-situ upgrading (e.g. removal of unauthorised building structures) or redevelopment on other sites which are suitable for long-term operation. In this regard, ND has continued to assist DTRCs operating on CoEs in meeting the licensing requirements under the Ordinance. In addition to the funding support offered by the BDF Special Funding Scheme, ND provides assistance in various practical areas including identifying potential sites for reprovisioning of DTRCs, facilitating DTRCs in making necessary funding applications for related works, and coordinating with relevant Government departments to resolve land use or planning issues, etc.
- 2.43 With the coordination of ND with relevant Government departments such as SWD, the Architectural Services Department and the Buildings Department, the DTRC of Glorious Praise Fellowship (Hong Kong) Limited completed their in-situ upgrading works and obtained a licence under the Ordinance in April 2021. Currently, 27 out of 37 DTRCs have already been licensed under the Ordinance. ND, SWD and relevant Government departments will continue to render support to the 10 DTRCs operating on CoEs in taking forward their in-situ redevelopment, upgrading or non in-situ reprovisioning works for obtaining the required licences under the Ordinance.

### *BDF Projects*

- 2.44 Established by the Government and governed by the Beat Drugs Fund Association (BDFA), BDF has a capital base of \$3.35 billion and has been providing funding support to worthwhile anti-drug projects. Projects funded include those providing T&R services to people with drug problems, organising PE&P programmes targeting the general public and/or specific groups, conducting researches on drug abuse problem, or a combination of the above components. BDFA, taking into account the drug situation and the advice of ACAN, specifies priority areas in the annual exercise of BDF RFS to encourage interested applicants to plan suitable anti-drug projects that can respond to the latest drug problems.
- 2.45 In 2021 to 2023, the priority areas for T&R projects in the RFS exercises have reflected the strategic directions set out in the last Three-year Plan to encourage more projects to deliver services accordingly. A total of 105 T&R, research and mixed-type (with T&R and/or research elements) projects were approved in 2021 to 2023. To facilitate exchange and sharing of experiences on the implementation of BDF projects with a view to enhancing the T&R services provided to drug abusers, BDF grantees were invited to present their projects and share their findings with the anti-drug sector through various platforms such as ACAN, T&R Sub-committee and DLC.
- 2.46 A list of the T&R, research and mixed-type projects approved in the 2021 to 2023 RFS exercises as well as the respective priority areas can be found on ND's website by scanning the QR code at **Annex C**.

Table 5: BDF RFS Projects

	<b>2021</b>	<b>2022</b>	<b>2023</b>
Total approved grant amount	\$142.4 million	\$99.2 million	\$90.8 million
Grant amount for T&R projects <i>(% of total approved grant amount)</i>	\$57.2 million (40.2%)	\$34.1 million (34.4%)	\$14.3 million (15.7%)
Grant amount for research projects <i>(% of total approved grant amount)</i>	\$8.7 million (6.1%)	\$4.9 million (4.9%)	\$2.4 million (2.6%)
Grant amount for mixed-type projects with T&R and/or research elements <i>(% of total approved grant amount)</i>	\$57.4 million (40.3%)	\$41.2 million (41.5%)	\$59.5 million (65.5%)
Total number of approved projects	69	53	46
Total number of approved T&R projects, research projects and mixed-type projects with T&R and/or research elements <i>(% of total)</i>	46 (66.7%)	32 (60.4%)	27 (58.7%)