

_About the CRDA

The CRDA provides relevant drug abuse statistics for monitoring changes in drug abuse trends and characteristics of drug abusers to facilitate the planning of anti-drug strategies and drug abuse programmes in Hong Kong. It collates information regularly on drug abuse cases reported by law enforcement departments, treatment and welfare agencies, hospitals and clinics, and tertiary institutions. All information collated is used only for statistical analyses and research purposes.



A drug treatment centre of a voluntary agency



Methadone clinic



Medical staff interview a patient in a drug treatment centre.

nformation on individual abusing drugs is provided to the CRDA on a voluntary basis and with the full co-operation of the reporting agencies.



The CRDA compiles and releases latest drug abuse statistics on a quarterly basis. All the reports published by the CRDA are statistical in nature and contain no information that could lead to any individual drug abuser being identified.

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A customs officer and his drug detector

All information supplied in the CRDA record sheets is handled in strict confidence and is accessible only to the people who are directly involved in the operation of CRDA, workers of reporting agencies and who are required to observe the rule of confidentiality. The confidentiality of all records held by CRDA and its reporting agencies is safeguarded by the Dangerous Drugs Ordinance (Chapter 134) and the Personal Data (Privacy) Ordinance (Chapter 486).

Points to Note When Reporting

1. Definition of drug abuse adopted by CRDA

or the purpose of CRDA reporting, a drug abuser is defined to be a person who has taken any kind of substances which harms or threatens to harm the physical or mental health or social well-being of an individual, in doses above or for periods beyond those normally regarded as therapeutic in the <u>last four weeks</u>, irrespective of the number of takings. Alcohol and tobacco are, however, not regarded as drug abuse.

Most of the substances can be broadly classified into narcotic analgesics (e.g. heroin, opium, morphine, physeptone/methadone)

and psychotropic substances. Psychotropic substances include hallucinogens (e.g. LSD, magic mushroom, PCP), cannabinoids, stimulants (e.g. amphetamine, cocaine), sedatives-hypnotics (e.g. barbiturates, benzodiazepines), volatile solvents (e.g. glue, thinner) and other substances (e.g. ketamine, cough medicine). Some common

substances liable to abuse are listed at Annex 1.

Notes on completing a record sheet

When reporting agencies come into contact with a person who is suspected (say, who shows withdrawal symptoms of drug addiction) or claims to have abused drugs (including persons on first admission and readmission to treatment programmes) during the last four weeks, please complete a Chinese version (or an English version if the drug abuser has English name only) of record sheet in respect of every individual drug abuser, making reference to the notes given in the following diagram.

Only one record sheet needs to be completed for each drug abuser each quarter, regardless of the number of contacts with the same abusers during the same period.

3. Delivery of completed record sheets

Wherever possible, agencies should arrange a personnel to deliver the completed record sheets for each month within the first two weeks of the following month to the CRDA office by hand (Address: Statistics Unit, Security Bureau, Government Secretariat, 30/F, High Block, Queensway Government Offices, 66 Queensway, Hong Kong). If by hand delivery cannot be arranged, agencies should send the record sheets under "confidential" cover by post in sealed envelopes. Upon receipt of the record sheets, the CRDA office will acknowledge the receipt by sending either an e-mail or a fax to the respective agency within two working days so as to confirm if the number of record

sheets received tallies with that sent out.

4. The new CRDA e-submission system

The new CRDA e-submission system has been in use since late April 2005. After registration with the CRDA to

become a user, reporting agencies can access the system via the Internet to perform electronic data submission by using an e-form. The system also allows registered users to enquire both the index of e-records submitted by respective agencies and concerned aggregated statistics for management purpose. More detailed information on the e-submission system can be viewed at the URL http://www.nd.gov.hk/crda.htm.

Notes on Completing CRDA Record Sheet

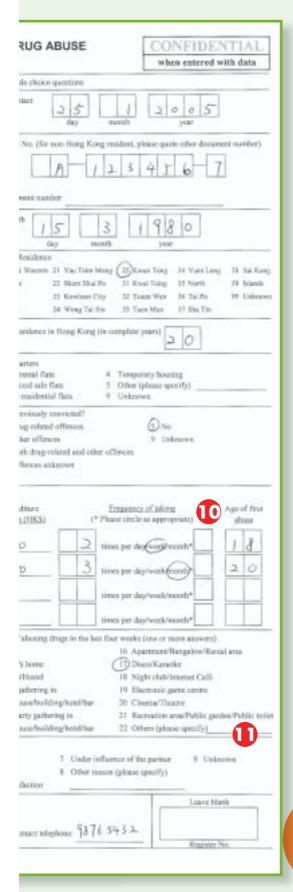
- The name of the office / branch of the reporting agency completing the record sheet must be filled.
- Police/Customs: date of arrest Correctional Services Department: date of admission to prison or DATC

Treatment agencies: date of admission or consultation

Welfare agencies /Hospitals / Academic institutes: date of noticing that the client is a suspected drug abuser or who claims to be a drug abuser.

- (i) Refers to the Chinese name of the drug abuser as shown on his/her identity card.
 - (ii) If the abuser has English name only, then fill in the English name as shown on his/her passport or other identity document.
- Refers to Certificate of Identity, travel document or other identity document number.
- 5 Examples include Pakistani, Nepalese, African and Australian.
- (i) Refers to the date of birth calculated by Western reckoning.
 - (ii) If the exact date of birth of the drug abuser is not known, please fill in his/her approximate age here or in the space provided for additional information at the bottom of record sheet.
- Refers to if the abuser has been convicted of a criminal offence in Hong Kong or elsewhere.
- 8 (i) For each type of substances abused, fill in the respective usual method of taking, usual expenditure for each taking, frequency of taking and age of first abuse.
 - (ii) If an abuser has taken methadone/physeptone obtained from Methadone Clinics, record heroin here.
 - (iii) If it is impossible to know the type of substances abused by the abuser, write down "unknown" and leave all other respective columns in Q.16 blank.

CENTRAL REGISTRY OF D RECORD SHEET Please circle appropriate answer for multi-Leave shaded boost in blank 2. Date of Co. Reporting Agency Office/Branch ABC organisation 2 Tai fo 4. HKID Carl Name (in Chinese characters; if non-Chinese, in English) 11- 199 4 Other does 2 Forale Date of Bir (11) Chinese 12: Other (please specify) Il their inv 6 District of Married Status II Consl-[1] Never married 2 Marriad/Cobabition 12 Was Ch Widowed 4 Divercel/Separated 9 Unknown U Esseni 14 Southern Did your partner take drugs in the last four weeks? 2 No. 3 Not applicable D. Years of R. 1 Yes 10. Educational Attainment (the highest level attained, regardless if the course 14. Type of Qu was completed or not) 1 No schooling/Kindergartes (4) Upper secondary (S4-S7) Public 5 Terriary 2 Printry Sulmid (3) Private 3 Lower secondary (\$1-\$3) 9 Unknown 11. Activity Status. 15. Whether p Fall-time worker 4. Student 1. Ves. di (2) Ciesali Port-timo worker T Ration! 2 Yes, o 3 Yes, b Worker in illicit trade 8. Other (please specify) 4. Unemployed 4 Yes, o 9. Unknown 5 Horse-maker 16. Type of substances abused in the last four weeks Usual exper-Type of sabstances method of taking for each taking \$20 Heroin Feterine \$ 15 17. Place of abusing drugs in the last four weeks (one or more answers) 18. Locality of (1) Hong Kong SAR 21 Axists countries (please specify) (1) Hone 12. Macau SAR 12 Priend (1) Mainland of China - Shorehen. 31 Other countries (planse specify) 13 School 4 Mainland of China - Conngdong 14 (Parry) Province (other than Sheration) 09 Unknown club h 15 Nan-p 15 Mainland of China - other province club h 19. Reason(s) for current drug sac (one or more answers) 1. Curionity # For self-resolication (2) Peer influence/To identify with peers 5. Avoid disconsfort of its absence (6) To suck aughoria or sensory satis 3 Relief of boredors/depression/stress Additional information Cose reference number : ≤ O 0 | Reported by Ms NEAY GS/ND6 (1/05)



- In general, there are five different methods of taking, including:
 - (1) Injection
 - (2) Smoking
 - (3) Fume inhaling
 - (4) Oral ingestion
 - (5) Sniffing

If the method taken is different from the above, please specify it in details.

- Refers to the age at which the drug abuser used the drug for the first time, but not the number of years that the drug abuser has used the drug.
- Do not just put down 'divan' since its meaning is not clear. Choose the appropriate answer according to the given classification.

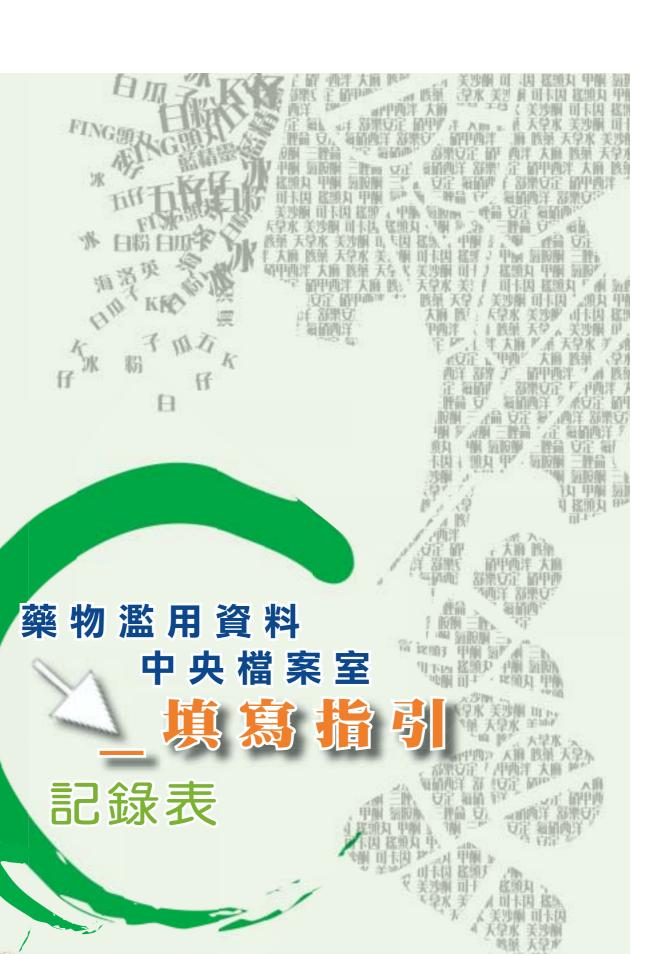
Data Confidentiality

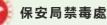
Statutory protection to the confidentiality of all records maintained by the CRDA and reporting agencies is provided by the Dangerous Drugs Ordinance (DDO). The DDO stipulates that any person who discloses any record of confidential information which is kept by the Registry or a reporting agency, or supplies to any person information obtained from any such record, or permits access to any such record, commits an offence.

Contact the CRDA Office

If there is any further enquiries about this guideline or interest in applying for using the CRDA e-submission system, please contact staff of the CRDA office by phone (phone no. 2867 1079) or by fax (fax no. 2537 2575) or by e-mail (e-mail address: sb_stat@sb.gov.hk).

Revised by Statistics Unit, Narcotics Division, Security Bureau in March 2005





__有關檔案室

物濫用資料中央檔案室提供有關濫用藥物統計數字以監察本港藥物濫用趨勢,

以便政府制定適合香港的禁毒策略和計劃。檔案室負責整理由執法機構、戒毒治療和福利機構、醫院及診所和大學院校呈報的濫用藥物者資料。所有經檔案室整理的資料,只會作統計分析和研究用途;



志願機構的—所戒毒中心



主沙嗣於后



在一間藥物治療所醫護人員接見病人情況



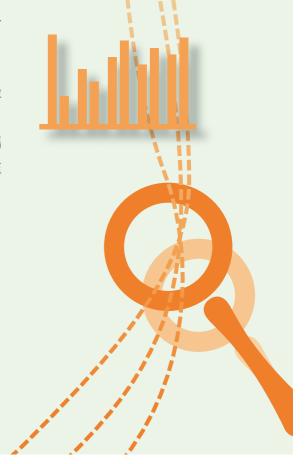
海關人員與緝毒犬工作情況

當 案室的資料由當事人自願提供,經由呈報機構合作收集;



案室每季編製及公布最 新濫用藥物統計數字。 檔案室發表的報告,內容純屬 統計數字,並無資料可識別濫 用藥物者的身分;

序 有提供予檔案室的資料絕對保密,只有直接負責檔案室工作的人員、呈報機構的員工及須遵守保密規則的人士才可取閱。《危險藥物條例》第134章及《個人資料(私隱)條例》第486章規定,檔案室和呈報機構所備存的記錄必須保密。



二呈報須知

1. 檔案室採用濫用藥物的定義

作為呈報的準則,濫用藥物人士是指不論服用次數,在過去四星期內曾經服用危害或可能危害個人身體、精神健康、或其家庭和社會關係的物質的人士,而劑量或服用期超過正常的治療劑量或服用期。酒精及煙草不被列作濫用藥物。

新分物質可歸納為麻醉鎮痛劑(如海洛英、鴉片、嗎啡、菲仕通/美沙酮)及精神藥物。精神藥物包括迷幻劑(如麥角酸二乙胺(LSD)、魔茹、

苯環利定/苯環已哌啶)、大麻類藥物、興奮劑(如安非他明/苯丙胺、可卡因)、鎮靜催眠藥(如巴比妥酸鹽、苯二氮萃類)、揮發性溶劑(如膠水、季水)和其他物質(如氯胺酮、咳藥)等。附件1列載及簡介一些較常被濫用的物質。

2. 填寫記錄表應注意事項

呈報機構在過去四星期內接觸到懷疑(如發現有毒癮發作徵狀)或自稱是濫用藥物的人士(包括初次或再次接受戒毒治療人士),請就每一位濫藥人士按下圖的説明填寫一份中文版記錄表(若濫藥者

只有英文姓名,則可用英文本填寫)。

無論呈報機構每一季與某一濫用藥物者接 觸多少次,只需為每一名濫用藥物者填寫 一份記錄表。

3. 送遞填妥的記錄表

全 呈報機構單位每月填妥記錄表後,請於次月 首14天內安排專人送交已填妥的記錄表到檔 案室辦事處(地址:香港金鐘道66號金鐘道政府合署 高座30樓政府總部保安局統計組)。如未能安排專人 送遞,則應把記錄表密封郵寄到檔案室辦事處,並 在信封上註明"機密"。檔案室收到郵寄的記錄表 後,會在兩個工作天以內以電子郵件或傳真通知有 關呈報機構,確認收到記錄表的數目與有關機構寄 出的數目是否相符。

4. 新設的藥物濫用資料中央 檔案室電子資料呈報系統

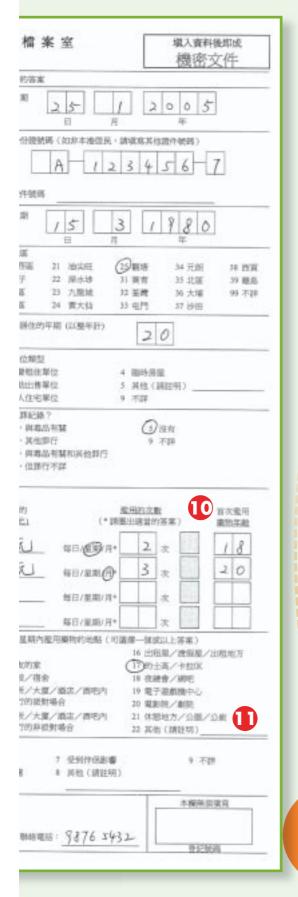
指案室新設的電子資料 呈報系統已於二零零五 年四月下旬起運作,呈報機

構只需先向檔案室登記成為系統用戶,便可於互聯網上進入系統,填報電子版記錄表進行電子資料呈報。系統並提供登記用戶查詢有關該機構電子呈報的記錄索引及管理統計數據等服務。更詳盡電子資料呈報系統的資料可於以下網址:http://www.nd.gov.hk/c_crda.htm閱覽。

填 寫 記 錄 表 _應 注 意 事 項

- 必須填寫呈報機構屬下提供有關資料的辦事處/分處名稱。
- 2 警方/海關:指拘捕的日期。 懲教署:指入獄或入住戒毒所的日期。 戒毒治療機構:指首次或再次接受治療的日期。 福利機構/醫院/學術機構:指發現服務對象懷疑或自稱 是濫用藥物者的日期。
- (i) 指濫藥者身分證上的中文姓名。
 - (ii) 如濫藥者只有英文姓名,請填上其護照或其他身分證明文件上的英文姓名。
- 4 指身份證明書、旅遊證件或其他身份證明文件號碼。
- 5 例如巴基斯坦人、尼泊爾人、非洲人及澳洲人。
- (i) 以西曆計的出生日期。
 - (ii) 若出生日期不詳,請在此或記錄表底部其他附加 資料列註明估計年齡。
- 🜈 指有否在香港或其他國家犯刑事罪行而被定罪。
- (i) 就每種濫用物質,請逐一填寫其通常服用的方法、通常每次的開支、濫用的次數及首次濫用藥物年齡。
 - (ii) 若濫藥者曾服用美沙酮 / 菲仕通,以減輕海洛英毒癮發作的徵狀,請於此填寫海洛英。
 - (iii) 若無法得知濫藥者濫用哪些物質,請註明"不 詳",而Q16內相關的其他欄均不用填寫。





- 一般來說,服用藥物有五種不同的方法,包括:
 - (1)注射方式
 - (2)放入香煙中吸食
 - (3)吸入煙霧方式
 - (4)口服
 - (5)用鼻子吸服

如使用的方法與上文所述的不同,請加以註明。

- 10 指濫藥者第一次濫用藥物的年齡,注意並非其濫用藥 物的年數。
- 注意不要填寫"煙格/棚仔",因其意思太含糊,需按已設定的答案分類選擇合適的答案。

呈報資料的保密 .規定

《 定 險藥物條例》已就檔案室和呈報機構所備存的記錄的保密授予法定保障。《危險藥物條例》規定,任何人如披露由檔案室或呈報機構備存的任何機密資料記錄,或向任何人提供從任何該等記錄得到的資料,或准許任何人取用任何該等記錄,即屬違法。

與檔案室聯絡

對本指引或填報記錄表尚有查詢,或欲申請使用檔案室的電子資料呈報系統,呈報機構單位工作人員可致電(電話號碼:2867 1079)、傳真(傳真號碼:2537 2575)或發電郵(電子郵址:sb_stat@sb.gov.hk)聯絡檔案室職員。

保安局禁毒處統計組 二零零五年三月修訂