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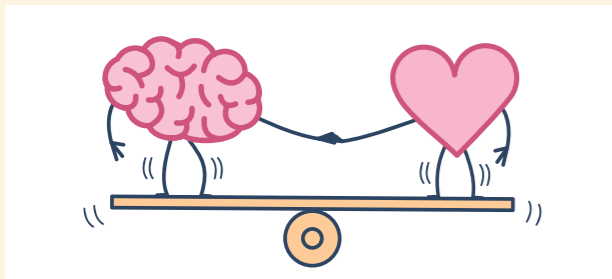
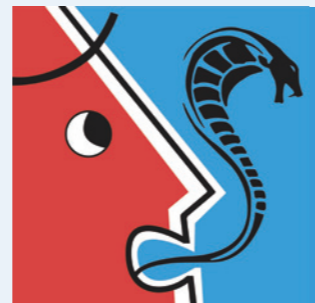
# 正視精神健康問題

Defusing the  
Mental Health Crisis



平等機會委員會  
EQUAL OPPORTUNITIES COMMISSION

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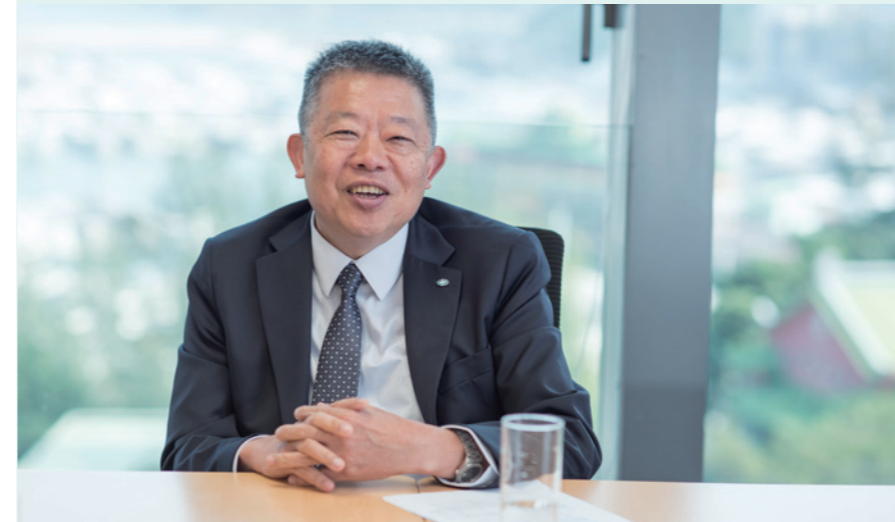
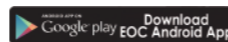


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「危機」二字，甚少出現在官方文獻中。畢竟，太負面的用詞，非施政者所好。

然而，認清事實，並不同散播負能量；要解決問題，必先承認問題存在。

我所指的是香港正面臨的精神健康危機。多項研究均顯示，香港人的精神健康持續惡化，明顯低於學者建議的可接受水平，實在不容忽視。今期刊刊的一篇文章就指出，不少人均受相同因素影響精神健康，例如社會議題、學業和工作等，而部分群體的表現更顯著較差，如年齡介乎15至34歲人士以及男性等。

平機會在其職權範圍內，或許未能就每個成因對症下藥，但我們一直關注受精神問題困擾者和照顧者的困境，致力消除社會對他們的標籤。今期的封面故事便聚焦香港的其中一間精神健康綜合社區中心，除了介紹中心提供的各種支援服務，亦探討各界可如何合力破除大眾對精神病的迷思，進而確保精神健康設施能在社區及時落戶。

公眾教育固然重要，但法律保障和申訴途徑亦不可或缺，尤其當部分人的偏見根深蒂固，公開作出煽動仇恨的言行。期刊的最後一篇文章遂解釋了《殘疾歧視條例》下「中傷」的概念，以加深讀者對法例的認識。

美國女演員格蓮高絲曾說：「守護精神健康，我們需要多一點陽光、多一份坦誠、多一些沒有保留和掩飾的對話。」就讓我們展開對話，轉危為機，建設一個更快樂、更健康、更共融的社會。

平等機會委員會主席

朱敏健, IDS

2019年12月

The word “crisis” rarely makes its way into official rhetoric. After all, policymakers are often trained to steer clear of negative language.

But to be realistic does not mean to be negative. Rather, acknowledging there is a problem is the first step to solving it.

No amount of window-dressing can conceal the looming mental health crisis facing our city. Studies after studies have shown that the mental wellbeing of Hongkongers is taking a nosedive, well below acceptable levels recognised by scholars. As one of our feature articles in this issue reveals, not only are there shared factors (e.g. social issues, pressure at work and school, etc.), but there are also certain groups – people aged 15-34 and men, for instance – who are particularly vulnerable.

While it may not be within the EOC's remit to tackle every single cause of this crisis, we are fully committed to removing the stigma attached to both people affected by mental health problems and their carers. Our cover story therefore zooms in on one of the Integrated Community Centres for Mental Wellness (ICCMWs) in Hong Kong, introducing the services it provides and, more importantly, asking how we can work together to puncture myths around mental illness and facilitate the siting of mental health facilities.

Awareness-raising aside, legal redress ought to be available, especially when prejudice manifests itself in acts inciting public hatred. With that in mind, we end the issue with an overview of the notion of “vilification” under the Disability Discrimination Ordinance, as a quick legal brush-up for our readers.

The American actress Glenn CLOSE once said, “What mental health needs is more sunlight, more candour, and more unashamed conversation.” Let us all pitch in and turn our crisis into an opportunity – to build a happier, healthier and more inclusive society.

Ricky CHU Man-kin, IDS

Chairperson, Equal Opportunities Commission  
December 2019



## 轉危為機：正視精神健康問題 Defusing the Mental Health Crisis

「撕裂」是近年社會的關鍵詞。對於香港為何走到今天、何謂爭取改變的正確方式，社會眾說紛紜。然而，我們或許忘記了在「平行時空」背後，每個人仍存在著一些共同需要，例如疏導負面情緒、保持身心健康。

Our society has been scarred by rifts and tensions in recent years. We find ourselves constantly consumed in debates about how we ended up here and how to find a way out, so much so that we begin to obsess about what divides us, and forget about the things we have in common – the emotional struggles we face in life, for example, and the need to look after our mental wellbeing.

分辨資訊真偽、指導子女處世、走出同溫層，統統費神吃力。但也正正在此情此景下，精神健康不再被視為禁忌或「小眾議題」：港大醫學院的研究早前就獲傳媒廣泛報道，其調查發現，今年6至7月間，港人疑患抑鬱症的比率達9.1%，為十年來最高。

情緒困擾固然已發展成全民問題，但當「精神健康綜合社區中心」（下稱「中心」）等支援精神問題困擾者和康復者的設施需在社區落戶，又能否得到鄰近居民支持？由2010年有屯門

The challenges confronting us these days are no doubt physically and mentally exhausting, whether it is outsmarting fake news, helping our children make sense of what is happening, or talking to someone we disagree with. But it is also at this juncture that we may finally be able to uproot the taboo around mental health – according to a widely-reported study conducted by the Faculty of Medicine of The University of Hong Kong from June to July this year, 9.1% of Hongkongers were suspected to suffer from depression, an unprecedented high in 10 years.

Emotional distress is now a universal issue. The question is, when facilities serving people affected by and recovering

區議員掛橫額，要求中心「遠離湖景邨居民」，到2018年沙田美林邨居民反對中心在美槐樓落戶，更有受訪者表示「斬親人，我一定告到你甩褲」，偏見彷彿根深蒂固，不時導致落戶計劃延誤甚或擱置，部分服務使用者更曾一度需要在快餐店接受輔導。

由新生精神康復會營運、位於東涌逸東邨的安泰軒（離島），於2010年獲社會福利署（社署）安排在祿逸樓設立永久會址，並於2013年如期開放，可謂精神健康綜合社區中心中的異數。今期封面故事，由祿逸樓互委會主席姚太、安泰軒（離島）中心主任梁蕙婷和義工Stella，細說大家為落戶所作的努力、中心的重要性，以至如何改善精神健康政策。

### 勞心勞力 互委會主席充當橋樑

姚太今年70多歲，2009年起一直擔任祿逸樓互委會主席。2004年搬進逸東邨前，她在沙田顯徑邨居住，附近亦有中途宿舍，服務雖有別於精神健康綜合社區中心，她卻從未受過滋擾。得悉安泰軒將落戶那刻，她心中叫好：「有情緒問題其實很正常。我是過來人：我的

小朋友曾因學業煩惱找社工幫忙，我也曾跟同一位社工傾訴家庭問題，慶幸能及時得到支援，所以我非常支持安泰軒落戶。」姚太先和其他委員商討，各人卻意見不一。那時她碰巧要外遊，回港後發現互委會已把消息轉達街坊，準備派發問卷，叫大家申明立場。她急忙在問卷補加兩句，說計劃還在諮詢階段，不妨先了解中心服務。然而居民群起反對，有街坊組隊衝上互委會司庫的單位，質問為何不盡力阻止，更有前互委會主席指罵姚太：「你沒有本事就不要做這個位！」



互委會主席姚太  
Mrs Yiu, Chairperson  
of the Mutual Aid  
Committee

from mental health problems, such as an Integrated Community Centre for Mental Wellness (ICCMW), need to be set up in a neighbourhood, would residents be supportive? Rewind to 2010: when a Tuen Mun District Councillor learned that an ICCMW would be built at Wu King Estate, he displayed banners demanding that it stay away from the residents. In 2018, siting plans in Sha Tin met with the same fierce opposition from residents of Mei Lam Estate. One snapped during a press interview, "If someone gets stabbed, I will sue the hell out of them!" Owing to ingrained prejudice, the construction of some ICCMWs has been delayed and even shelved at times. At one point, fast food restaurants even became temporary sites for counselling.

A rarity is the Wellness Centre (Islands) at Yat Tung Estate in Tung Chung, operated by New Life Psychiatric Rehabilitation Association (NLPRA). In 2010, the Social Welfare Department (SWD) identified a permanent site at Luk Yat House for the centre, which opened in 2013 as scheduled. In this story, we talk to Mrs Yiu, Chairperson of the Luk Yat House Mutual Aid Committee, as well as Zoe LEUNG and Stella, Officer-in-Charge and volunteer of the centre respectively, about the hard work behind the successful siting of the centre, the importance of ICCMWs, and how to improve Hong Kong's mental health policy.

### Representing residents, bridging differences

Now in her 70s, Mrs Yiu has served as Chairperson of the Mutual Aid Committee (Committee) at Luk Yat House since 2009. Before moving to Yat Tung Estate in 2004, she was living at Hin Keng Estate in Sha Tin, near a halfway house. While the facility provided different services than ICCMWs, she didn't recall any "disturbance" in the area. When she found out Yat Tung would soon house an ICCMW, she was delighted by the news: "Emotional problems are more common than we think. I've had my own share of issues. At one time, my child had to seek help from a social worker because of school stress. I talked to that same social worker when I was going through a rough patch with my family. It was lucky that someone gave me a helping hand. So all along, I supported having an ICCMW nearby." Opinions among the Committee members, however, were divided. At that time, she had to leave town for a while, and when she got back, she was surprised that the Committee had shared the news with the residents and prepared a questionnaire for them. She hastily added a few sentences on the form, saying the siting of the centre was still under consultation and that it might be helpful to learn more about its services first. Still, many residents protested vehemently. Some rushed to the apartment of the Committee's

眼見反對者眾，她多次去信房屋署，要求舉行居民大會，但對方初時不太積極：「他們不敢來。」她於是化被動為主動，提出由互委會擇日和主持大會，房屋署派代表出席即可。街坊在會上發言時十分激動，但姚太發現不少意見源於誤解，有人以為落戶的是中途宿舍，有人將精神健康問題與暴力掛勾，有人怕小孩受影響，她嘗試逐一解釋。會後仍有部分街坊激烈反對，但他們其後卻缺席姚太特意为居民安排的請願，最後邨管會通過計劃。雖然米已成炊，姚太仍埋首文宣，手寫公告，呼籲街坊不用看得太負面：「每人都可能受情緒困擾，說不定就住在樓上樓下，若能適時得到輔導，未嘗不是好事。」

那半年，姚太在街坊和政府部門之間不斷奔走，斡旋工作不但無酬，且帶來極大壓力。她曾為街坊申請請願，在朋友建議下到警署備案，翌晨卻有警員上門查問，令她擔驚受怕，「好像做了錯事」。支撐著姚太的，除了對社區的關愛，還有當時安泰軒臨時中心的張偉能主任。「他會定時致電給我，也沒有把自己意見強加在我身上，純粹聆聽我的心聲，一個電話可談上一、兩個小時。」姚太說。

### 深耕細作 消除偏見

現職安泰軒（離島）中心主任的梁蕙婷姑娘強調，在落實會址的過程中，機構與街坊絕非處於對立的位置。早於2010年7至8月，新生會已在東涌擺設街站，率先接觸居民，講解中心服務，並參與嘉年華，派發康復者製作的手工藝品，又與互委會合作，設計攤位遊戲，引入精神健康元素，寓教育於娛樂。



新生會在東涌擺設攤位遊戲  
NLPRA sets up game stalls in Tung Chung

Treasurer, asking why the Committee wasn't doing anything to stop the plan. A former Chairperson of the Committee even jabbed his finger at Mrs Yiu and scolded her, "If you're so useless, just quit the job!"

In light of the vocal opposition from the community, Mrs Yiu wrote to the Housing Department (HD) a number of times to request a residents' meeting, but they didn't seem keen on the idea. "They were too afraid to come," she said. Taking the matter into her own hands, she proposed that the Committee would pick a date and host the meeting, and the HD could send over a representative. So it happened: the residents voiced their views in a heated meeting, and it dawned on her that many of their concerns seemed to stem from misunderstanding. There were people who had mistaken ICCMWs as halfway houses; some equated mental illness with a propensity for violence; others, still, worried their children would be exposed to risk. One by one, she tried to allay their fears. Although a pocket of residents remained defiant afterwards, they did not show up at a petition that she later arranged for them. Eventually, the Estate Management Advisory Committee went on and voted for the plan. Even though a decision had been made, Mrs Yiu continued to reach out, writing notices and telling residents to look on the bright side: "Everyone feels down sometimes. He or she may just live next door. If there is someone here to help us just when we need it, it might be a good thing."

By the time the siting was confirmed, Mrs Yiu had been liaising between the residents and the Government departments for half a year. Not only was she working without pay, but she was also under intense pressure. When residents expressed their wish to stage a petition, she took a friend's advice and went to a police station to notify the police in advance, only to have a few officers knock on her door the next morning, asking for more details. "I was terrified, as if I had done something wrong," she said. It was a gruelling experience, and she was able to live through it because of her deep love for the community, as well as the support she had from the Officer-in-Charge of the temporary Wellness Centre at the time, CHEUNG Wai-nang. "He'd call me from time to time. He'd just listen and listen, without imposing any opinion on me. We could talk for up to one to two hours every time," Mrs Yiu said.

### Uprooting prejudice, cultivating understanding

Zoe LEUNG, currently Officer-in-Charge of the Wellness Centre (Islands), stressed that when an organisation seeks to establish an ICCMW in a neighbourhood, it should not pit itself against the residents. As early as in July and August 2010, NLPRA set up

為進一步釋除居民的疑惑，新生會於2011年舉辦了一連串參觀活動，讓參加者探訪安泰軒的天水圍中心，以及為康復者提供職業訓練的工場和農場。姚太當年也有參與，還喝過學員製作的豆漿。梁姑娘指，近年大眾已漸漸放下偏見，但當精神健康設施需要在社區落戶，不少人仍抱有「NIMBY」心態（not in my backyard，意指「不要在我家附近就可」）。她續說：「公眾教育是深耕細作，必須持續進行。所以，即使安泰軒成功落戶後，我們仍定期擺街站、舉辦參觀。」

### 服務對象廣 社區中心不可取替

自2010年10月起陸續於香港各區投入服務的精神健康綜合社區中心，究竟有何重要？社署網站指，開展中心旨在整合當時已有服務，同時增撥資源，加強支援精神病康復者。其特色在於以地區為本，每間中心均由單一非政府機構營運，提供一站式服務，覆蓋預防、危機介入、復元等

層面。服務對象除了康復者，還包括懷疑有精神健康問題的人士、其家屬和照顧者，以及一般居民。

以新生會轄下的安泰軒為例，中心駐有臨床心理學家、社工、職業治療師、精神科護士、精神健康教育主任、朋輩支援工作人員及活動工作人員。由外展家訪、個案輔導、技能訓練和職業規劃，以至展覽、康樂活動、學校講座和照顧者聚會，中心服務不但有助康復者融入社區、重投職場，更減輕照顧者的壓力，提升下一代的意識。

梁姑娘分享道，有些逸東邨居民一旦察覺到鄰居有情緒困擾，就會說服他們去安泰軒。現實是，公立醫院精神科的服務供不應求，輪候時間或以年計，私家醫生則收費高昂，因此紮根各地



安泰軒（離島）中心  
主任梁蕙婷姑娘  
Zoe LEUNG, Officer-in-Charge of the Wellness Centre (Islands)

street booths in Tung Chung to introduce the services provided by ICCMWs, took part in a carnival to distribute handmade crafts by people recovering from mental illness, and partnered with Mutual Aid Committees to run mental health-themed game stalls.

To further ease concerns, NLPRA organised a series of experiential visits in 2011, inviting residents on a tour to its Wellness Centre in Tin Shui Wai, as well as workshops and farms where people recovering from mental illness receive occupational training. Mrs Yiu, one of the participants that year, has fond memories of drinking the soy milk produced by the trainees. Ms Leung noted that there has been less prejudice around mental illness over the past few years, but when it comes to building mental health facilities, a not-in-my-backyard (NIMBY) mentality seems to persist among some people. "Public education is an ongoing effort. The message takes time to sink in," she said. "That's why we have continued to set up street booths and organise visits on a regular basis, even after our centre opened here."

### ICCMWs: an irreplaceable resource for everyone

ICCMWs have been introduced to all districts of Hong Kong since October 2010. How important are they? As the SWD website explains, the idea of ICCMWs came about as the Government looked to consolidate existing services on the one hand and allocate additional resources, on the other hand, to strengthen support for people recovering from mental illness. District-based and each run by an NGO, these centres are positioned as a one-stop platform integrating prevention, crisis intervention and rehabilitation functions. Their services therefore not only benefit former patients, but also people with suspected mental health conditions, their family members and carers, as well as general residents.

The Wellness Centres under NLPRA, for instance, are stationed with clinical psychologists, social workers, occupational therapists, psychiatric nurses, mental health education officers, peer support workers and event assistants. From family outreach, individual counselling, vocational training and career planning to exhibitions, recreational activities, school talks and gatherings for carers, the centres help people recovering from mental illness reintegrate into society and the job market, while relieving carers of their burden and raising awareness among the next generation.

Ms Leung observed that some Yat Tung residents have developed the habit of referring neighbours with suspected emotional problems to the Wellness Centre. In this sense, ICCMWs can play a vital role in preventing mental health crises, especially

區的精神健康綜合社區中心更顯重要，可謂應對危機的第一道防線。

### 「東涌人凝聚力強」 義工見證社區共融

Stella也是逸東居民，對於中心為何能相對順利地在東涌落戶，她別有一番見解：「我們生活在離島，很多東西靠自己。」事實上，逸東是全港最大型的公共屋邨，由25幢樓組成，不近市中心，過往亦面對物價高、交通不便、設施匱乏等問題。逸東居民佔東涌近一半人口，當中不乏長者、新移民、少數族裔和綜援戶等被邊緣化的社群。

Stella所指的是逸東街坊特別團結一致，鄰舍關係和睦，社區凝聚力強。她在安泰軒做了多年義工，笑言自己是安泰軒的「忠實粉絲」，曾與會員一起參加興趣班做手工，又參與家訪、在嘉年華表演跳舞，深深體會到精神健康是關乎所有人的事：「不論是康復者抑或受精神問題困擾的人，其實都與一般人無異，不應被標籤。」

### 落戶成與敗 還看諮詢策略

現時全港18區均設有精神健康綜合社區中心，但小部分仍於臨時會址提供服務，即使物色了永久會址，卻一直未能落實。港人對精神健康服務的需求與日俱增，如未來要讓更多設施在社區落戶，諮詢工作可如何做得更好？梁姑娘指透明度是關鍵，政府和服務機構宜儘早發放消息，確保所有居民（即不止互委會）知悉計劃、中心確切位置，以及服務性質。姚太坦言作為居民代表，互委會主席不能「怕蝕底」，應主動與街坊溝通，釐清誤解。她亦提議政府可在新開發項目中預留位置，劃定設施會址，讓未來住戶在知情下選擇遷入與否，以避免反彈。



安泰軒（離島）  
義工Stella  
Stella, a volunteer of  
the Wellness Centre  
(Islands)

when the wait for assistance at public hospitals can stretch years, and private clinics remain a luxury for many people.

### “Tung Chung people share a strong bond”: volunteer finds joy in inclusion

A Yat Tung resident, Stella offered a refreshing opinion on why the siting of ICCMW in Tung Chung went relatively smoothly: “We live on an outlying island. We gotta depend on ourselves most of the time.” In fact, the 25-block Yat Tung Estate is the largest public housing estate in Hong Kong. Distant from the city centre, it used to be plagued by problems such as high commodity prices, an inconvenient transport system and a dearth of community facilities. It also houses nearly half of Tung Chung’s population, with a significant portion being marginalised communities, including elders, new immigrants, ethnic minorities and those on the Comprehensive Society Security Assistance Scheme.

What Stella was referring to is the sense of solidarity among Yat Tung residents, the feeling of harmony that defines the neighbourhood, and the cohesiveness of the community. A long-time volunteer, she quipped that she is a “loyal fan” of the Wellness Centre. Having made DIY crafts alongside its service users, joined outreach visits to families and given dance performances during carnivals, she has come to realise that mental health is everyone’s business: “Whether it is people recovering or those currently affected by mental health problems, they are no different from us, and shouldn’t be labelled as such.”

### Siting success hinges on consultation strategy

ICCMWs have been established across all 18 districts of Hong Kong, but a few continue to operate on temporary sites to this day, despite having identified a permanent spot. With Hongkongers’ demand for mental health services set to soar, how can consultation processes be enhanced to facilitate the siting of related facilities? Ms Leung said transparency is the key – the Government and the NGOs involved must get the word out as early as possible, and ensure that all residents (i.e. not only Mutual Aid Committees) are aware of the plan, the exact location proposed, and the nature of the services to be provided. Mrs Yiu added that as neighbourhood leaders, Chairpersons of Mutual Aid Committees must brace themselves for the challenge and proactively engage residents to dispel any misunderstanding. She also suggested that the Government reserve sites for mental health facilities in newly planned developments, so that future residents would be better informed and given a choice before moving into the area, thereby reducing potential opposition.

平機會今年5月發表研究報告，分析有助精神健康綜合社區中心落戶的因素，同樣得出上述結論。報告亦建議政府制訂時間表，最長18個月，分為準備、公眾諮詢／參與和決策三階段，每個階段均設時限。社署可因應持份者意見修改計劃，但應享有最終決定權。此外，現時《香港規劃標準與準則》將「敏感社區設施」分為「甲類」和「乙類」，前者服務「廣大市民」（如懲教設施和殯儀館），後者則為「某些特定類別的使用者」而設，文件列舉了「特殊醫療診所、教育設施及社會福利設施，例如精神病康復者及嚴重弱智人士的宿舍和展能中心」。平機會認為，文件不應指明精神健康設施，宜直接刪除或囊括所有適用例子，以免助長標籤效應。平機會最近就與社署和規劃署會面，相關代表表示將予以考慮，研究如何跟進此兩項建議。

### 精神困擾成因多 政策須更宏觀

梁姑娘說，政府並非沒有推廣精神健康，例如近年就有增撥資源，讓機構加強針對青少年、照顧者和「小家屬」（如康復者的子女）的服務。但她亦指，每個人都是一個「整體」，有著不同身份，情緒亦會受不同因素影響，如社會服務過度切割、各有各做，未必能有效回應：「你有家庭問題？去家庭服務中心吧；你是青少年？找青少年社工吧；有壓力，就來精神健康綜合社區中心……」其實情緒困擾背後，隱藏著教育制度、勞工權益、資源分配等深層問題。她期望不同單位之間能有更多協作，而政策之間亦有更強連繫。

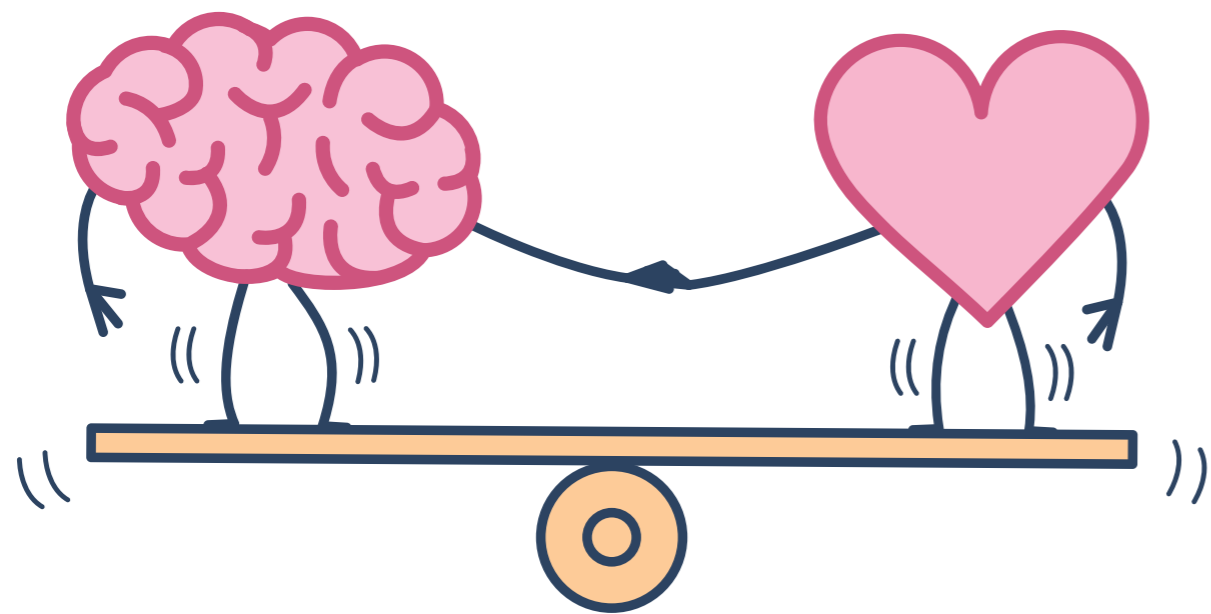
或許，要化解香港的精神健康危機，我們需要的不只是單一的「精神健康政策」，而是將大眾的精神健康定性為施政的基本考量，確保每個政策、每項措施都引入「情緒管理」的角度，切實回應市民的需求和意願。

The EOC drew the same conclusions in its study on the factors behind successful siting of ICCMWs, published in May this year. The report also recommended that the Government formulate a standard timetable, spanning 18 months at most and divided into three stages – namely preparation, public consultation/engagement, and decision-making. A clear time frame should be laid down for each stage. While views from stakeholders may enable the SWD to improve the siting plan, the Department should be able to make the final decision. Another issue relates to the Hong Kong Planning Standards and Guidelines, in which the designation “Sensitive Community Facilities” covers two groups of facilities: “Group A” serves the “wider public” (e.g. correctional facilities and funeral parlours), whereas “Group B” is designed for “specific client users”. The document lists examples of the latter as follows: “special medical and health clinics, education facilities and social welfare services, such as hostels and day centres for discharged mental patients and severely mentally handicapped persons.” The EOC is of the view that by singling out mental health facilities, the document may have a labelling effect; to avoid this, either the reference should be removed, or all applicable examples should be listed under the category. The SWD and the Planning Department have agreed to consider these recommendations in a recent meeting with the EOC.

### Towards a holistic mental health policy

Ms Leung said that in recent years, the Government has provided additional resources for NGOs to strengthen their services for youth, carers and children with parents recovering from mental illness. While acknowledging the Government’s effort to promote mental health, she pointed out that every person is a tapestry of identities, where emotions can be affected by a myriad of factors. When social services remain fragmented and compartmentalised, they are bound to fail: “You got problems in the family? Go to a Family Service Centre. You’re a teenager? Get in touch with a youth worker. Feeling stressed? Visit an ICCMW...” The truth is, underneath every emotional struggle runs a deeper issue, whether it is the education system, labour rights, or the distribution of resources within society. She looks forward to closer collaboration between different service units, and stronger connection between different policies.

To defuse Hong Kong’s mental health crisis, perhaps, what we need is not just a “mental health policy” per se, but rather a fundamental change in policymaking, an approach that ensures every policy, every measure is designed with the emotional health of citizens at its heart, one that truly addresses the needs and wishes of the people.



# 全港精神健康指數調查 2019

## Hong Kong Mental Health Index

每年十月，平機會均會聯同其他公營機構及多個復康團體合辦「精神健康月」，透過全港性的活動，喚起大眾對精神健康的關注。「全港精神健康指數調查」是重點項目之一，而香港中文大學已於今年6月21日至7月4日完成最新調查，用電話訪問了1,009位15歲或以上的人士，結果發現港人精神健康水平明顯下滑，平均得分再次低於世界衛生組織「五項身心健康指標 (WHO-5)」的可接受水平，情況令人憂慮。

Every October, the EOC joins hands with other public bodies and rehabilitation groups to organise the territory-wide campaign "Mental Health Month" to raise awareness of mental health issues. One of the campaign's highlights is the Hong Kong Mental Health Index study, the latest edition of which was conducted by The Chinese University of Hong Kong from 21 June to 4 July this year. Sampling 1,009 individuals aged 15 or above, the telephone survey produced worrying findings – Hongkongers' mental health has taken a sharp turn for the worse, scoring once again below acceptable levels on the World Health Organization's Five Well-Being Index (WHO-5).

### WHO-5問卷 The WHO-5 Questionnaire

過去兩星期內： Over the last two weeks:	所有時間 All the time	大部分時間 Most of the time	超過一半時間 More than half of the time	少於一半時間 Less than half of the time	有時候 Some of the time	從未試過 Never
感到快樂、心情舒暢 I have felt cheerful and in good spirits	5	4	3	2	1	0
感到寧靜和放鬆 I have felt calm and relaxed	5	4	3	2	1	0
充滿活力、精力充沛 I have felt active and vigorous	5	4	3	2	1	0
睡醒時感到清新， 得到足夠休息 I woke up feeling fresh and rested	5	4	3	2	1	0
每天生活充滿有趣的事 My daily life has been filled with things that interest me	5	4	3	2	1	0

學術研究建議的標準  
Standards recommended by past research

分數總和  
Total Raw Score

× 4 =

精神健康指數  
Mental Health Score

<52 差  
Poor

52-68 尚可  
Fair

≥72 好  
Good

港人平均分  
How did Hongkongers score on average?

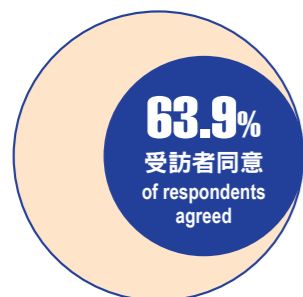
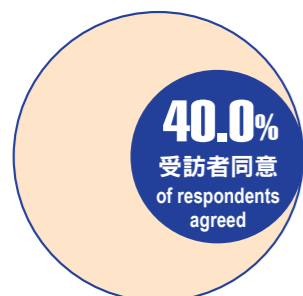
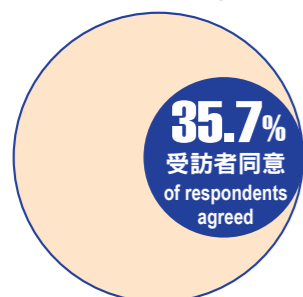
50.2  
2018

46.41  
2019

連續兩年不合格  
Failing score two years in a row

表現明顯較差的組別  
Groups faring particularly poorly



對精神健康造成非常  
/ 頗負面影響的因素Factors with an extremely /  
fairly negative impact  
on mental health對自殺的標籤和迷思  
Labels and myths around suicide自殺絕對是不負責任的行為？  
Is suicide an irresponsible act?自殺行為無法預防？  
Is suicidal behaviour impossible to prevent?談論自殺的人其實不會自殺？  
When a person talks about committing suicide,  
s/he wouldn't actually do it?

## 如何處理自殺念頭 Handling suicidal thoughts

>50% 受訪者指一定 / 多數不會向他人透露  
said they definitely/probably wouldn't let others know原因：  
Here's why:>45% 不想其他人擔心  
didn't want others to worry>33% 認為其他人幫不到自己  
thought others  
couldn't help>24% 認為可靠自己停止念頭  
believed they could stop the  
thoughts themselves

各界不能自說自話，必須展開真正交流、求同存異，合力就不同社會議題尋求出路。

All sectors must engage in genuine dialogue, identify common ground and work together to find a way out for different social issues.

學校應為老師和社工加強培訓，並及早識別需要情緒支援的學生，訂定策略協助學生減壓，提升抗逆能力。

Schools should strengthen training for teachers and social workers, identify students who need emotional support in a timely manner, and devise strategies to help students de-stress and enhance their resilience.

## 建議

## Recommendations

較高比例的長者和教育程度較低者在出現自殺念頭時不願告訴他人，故政府應提供針對性的宣傳教育及求助途徑。

Since elderly people and those with lower education level are more unlikely to confide in someone when having suicidal thoughts, the Government should tailor its education efforts and support channels for these groups.

政府應定期進行大型調查，了解不同群組的精神健康狀況，監察變化，確保政策以實證數據為基礎，減少資源錯配。

The Government should conduct large-scale surveys on a regular basis to monitor changes in the mental health of different groups, ensure its policies are supported by empirical data, and avoid misallocation of its resources.

讀好「精神健康月」Facebook專頁：  
Like "Mental Health Month" on  
Facebook:何謂  
「殘疾中傷」  
What is  
"Disability Vilification"

言論自由常被喻為香港的核心價值、民主的試金石。對於言論自由是否絕對的權利、何謂合理的限制，社會卻鮮有討論。《公民權利和政治權利國際公約》第19條便列明，為確保他人權利得到尊重，言論自由需受到一定程度的制約。舉例而言，如有人擺街站，公開表示殘疾人士是社會負累，呼籲途人破壞復康設施……如此行使言論自由的做法，又應否受到限制？

事實上，上述例子或符合本港《殘疾歧視條例》下「中傷」甚至「嚴重中傷」的定義，有機會屬違法行為。

Freedom of speech is often heralded as a core value of our city, a touchstone of democracy. There seems to be far less discussion, however, about whether it is an absolute right, and what kinds of limits are legitimate. According to Article 19 of the International Covenant on Civil and Political Rights, the exercise of freedom of speech may be subject to certain restrictions necessary for respect of the rights of others. For instance, should a person be allowed to set up a booth in the streets, state publicly that persons with disabilities (PWDs) are a social burden, and call on passers-by to wreak havoc on rehabilitation facilities?

In fact, the act in the example above may be unlawful under Hong Kong law, as it is likely to constitute "vilification" or even "serious vilification" under the Disability Discrimination Ordinance (DDO).

## 法律定義 How the Law Defines It

### Vilification

### 中傷

- 公開活動，可包括講話、展示通告、穿衣等
- 煽動仇恨、嚴重的鄙視或強烈的嘲諷
- 針對一位 / 某類殘疾人士
- An activity in public, such as speaking, displaying notices, wearing clothing, etc.
- Inciting hatred, serious contempt or severe ridicule
- Against a PWD or members of a class of PWDs

### Serious Vilification

### 嚴重中傷

- 包含構成「中傷」的元素，且屬故意
- 威脅損害該位 / 該類殘疾人士身體 / 其處所或財產 / 可進出的處所或可享用的財產，或煽動他人作出上述威脅
- Includes elements constituting “vilification” and is intentional
- Involves a threat of physical harm towards a PWD or members of a class of PWDs / their premises or property / premises or property they have access to, or incitement of others to make such a threat

是否有人確實被煽動，並非定義的一部分。  
It is immaterial whether a person is actually incited.

「殘疾」的法律定義廣闊，較少人聯想到的一些例子包括：  
Disability is defined broadly under the DDO. Some lesser-known examples include:



影響情緒的任何疾病  
(如抑鬱症)  
An illness that affects a person's emotions  
(e.g. depression)



學習困難  
(如自閉症)  
Learning difficulties  
(e.g. autism)



體內存有可引致疾病的有機體  
(如愛滋病毒)  
Presence in the body of organisms capable of causing disease  
(e.g. HIV)

法例亦將曾經存在 / 將來可能存在 / 被認為存在的殘疾包括在內。

The DDO includes disabilities that previously existed; may exist in the future; or is imputed to a person.

## 法律後果 Legal Consequences

### Vilification

### 中傷

- 法庭可命令被告作出賠償及 / 或道歉
- The court may order compensation and/or apologies

### Serious Vilification

### 嚴重中傷

- 屬刑事罪行，最高可判處港幣10萬元罰款及監禁2年
- A criminal offence liable to a maximum penalty of a fine of HK\$100,000 and imprisonment for 2 years

## 條例解惑 Myths vs. Facts

### 《殘疾歧視條例》中有關「中傷」的條文是否侵犯了言論自由？

區域法院在 *Tung Lai Lam* 訴梁健文案 (DCEO 1/2011) 的判詞中指，條例不容許「中傷」行為，是為了保障殘疾人士不被歧視，能夠在一個與其他社會人士融和平等的環境中生活；同時，這是對言論自由的一種制約，所以輕微瑣碎的事情不應被禁，否則言論自由將被過度收緊，因此條例才在定義中用上「嚴重」、「強烈」等字眼。

以該案為例，身為屯門區議員的被告在區內懸掛寫上「要求精神病服務中心遠離湖景邨居民」的橫額，並聲稱是為了表達居民意見。法庭不但重申被告人的意圖對於行為是否有煽動成份沒有必然關係，亦指出相關橫額所能激起的厭惡感是強烈的，因為一個人對其他人或事物如沒有強烈的厭惡感，是不會要求那些人或事物「遠離」自己的；橫額煽動的，可說得上是一種仇恨。

### 如言論純屬主流或大眾看法，有何不妥？

上述案件的被告再三強調，他所表達的是大多數居民的意見。然而，法庭在判詞中明言：「大多數人的意見不能凌駕少數人的權益。防止歧視的條例，亦正正是為了保護少數人的權益而設立的。作為社會領袖，被告人應有獨立思考，不要因為取悅羣眾而放棄正確價值。」

### Do provisions on vilification under the DDO impinge on freedom of speech?

In *Tung Lai Lam v Leung Kin Man* (DCEO 1/2011), the District Court acknowledged in its judgment that while the DDO's prohibition against vilification is intended to protect PWDs from discrimination and enable them to live in an inclusive environment on an equal basis with others, it places a limit on the freedom of speech. To avoid excessive restriction on this freedom, trivial acts should not be prohibited. Hence the use of qualifiers, such as “serious” and “severe”, in the definition of vilification under the DDO.

The Defendant, a District Councillor in Tuen Mun, displayed banners reading, in Chinese, “We demand that the Integrated Community Centre for Mental Wellness move away from Wu King Estate”, and argued that he just wanted to express the views of the residents. The Court pointed out that there was no necessary correlation between the intent of the Defendant and whether the act constituted incitement, and considered that the effect of disapproval or dislike incited by the banners was severe, since a person would not ask someone or something to stay away from him/her, if that person himself/herself does not have a severe sentiment of disapproval or dislike against that person or thing. Indeed, the sentiment incited by the banners could be regarded as hatred.

### What's wrong with expressing a majority opinion?

The Defendant in the case cited above stressed that he was just expressing the opinion of the majority of the residents. However, in its judgment the Court made it clear that the views of the majority should not override the rights of minorities, the safeguarding of which is precisely the objective of the anti-discrimination ordinances. It added that as a leader in society, the Defendant should have exercised independent thinking, instead of pleasing the crowd and abandoning the right values.

# 平等機會多元共融行動2020

## Equal Opportunities Diversity Project 2020

### 主題 Themes:

種族平等、傷健共融、兩性平等及尊重別人的家庭崗位  
Racial equality, inclusion of persons with disabilities, gender equality and accommodation for persons with family status



### 香港電台第二台 RTHK Radio 2 (FM94.8-96.9)

#### Made in Hong Kong 李志剛

嘉賓專訪：討論平等機會議題  
(逢星期四下午二時)

廣播劇：宣揚平等機會信息

Interviews with guests on equal opportunity issues (Every Thursday 2pm)

Radio drama to spread messages of equal opportunity

#### 晨光第一線 Morning Suite

宣傳環節：介紹不同族裔人士的文化生活特色  
(2020年2月至3月)

Radio segments on culture and lifestyle of ethnic minorities (Feb-Mar 2020)

#### 通識60秒 1-minuter

介紹反歧視條例和推廣平等機會信息

Enhance public understanding of anti-discrimination ordinances and promote equal opportunity



平等機會委員會  
EQUAL OPPORTUNITIES COMMISSION



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電郵Email: [eoc@eoc.org.hk](mailto:eoc@eoc.org.hk)  
網址Website: [www.eoc.org.hk](http://www.eoc.org.hk)