

Motion 1

The Government should set up a Child Health Care Voucher Scheme

Child Councilors:

CHAN Yin Wang

CHUNG Hiu Nam

FALI Yasmine

HO Chin Ching

HO Sum Yin

LEE Sai Ying Tisha

LEE Sze Man Sammi

LEUNG Chi Chung

LI Pak Yin Pazu

LI Yeuk Tung

LIE Yung Chui Yoyo

LUI Ka Ching Kerry

SIN Shi Ting

WONG Wing Chi

WU Sze Ching

YIP Wing Sze

YU Hoi Yan Veronica

13 October 2018

(This English translated version is provided by the Centre for Translation in association with the Translation Workshop of the Translation Programme, Hong Kong Baptist University.)

Translators:

CHENG Fung Wing, TSUI Ching Lee, HO Ka King, YEUNG Hok Hei Gladys

Reviser:

CHEUNG Hiu Man

Supervisor & Translation Editor:

Dr. Janice Jun Pan

Introduction

According to Article 24 of the United Nations Convention on the Rights of the Child (CRC), States Parties recognize the right of the child (below the age of 18) to the enjoyment of the highest attainable standard of health. However, having agreed to meet the standards in CRC, Hong Kong has not fulfilled its obligations under the convention.

Hong Kong, as a developed city, boasts the best medical equipment in the world but its health protection for children has remained far from enough over the years. This shortage has led to long waiting times for child medical services, with some children even refraining from medical treatment.

Our Survey

In order to gain further information regarding the problems in child health care, our team conducted an online survey from 21st August to 19th September 2018 to collect opinions from parents, as well as secondary and primary school students. A total of 593 responses were collected. We also interviewed pediatricians, legislators, doctors, and other professionals to learn about their views on the health care voucher scheme for children.

Current Situation

1. Medical expenses impose financial burdens on families, especially the grassroots

Hong Kong families are facing heavy financial pressure when dealing with child medical expenses. According to the results of our survey, up to 40% of parents spent more than an average of HK\$2,000 on medical expenses for each child last year, which accounts for 10% of the current median monthly household income of HK\$20,000. Nearly 90% of our interviewees reported that they did not receive any medical assistance, indicating that child health care poses a certain financial burden on average households.

In addition, according to the Survey Report on Health and Medical Services for Poor Children published by the Society for Community Organization in 2011, despite its 70,000 children with special needs (SEN), the Government in Hong Kong does lack a comprehensive support system. As a result, parents must pay for the expensive treatments in NGOs. In the case of the Supportive Learning Project held by the Heep Hong Society, the service charge is as high as HK\$840 per 50 minutes, posing a heavy financial burden to families with SEN children, whose healthy growth is therefore impeded.

Also, to take the private dental services in Hong Kong as an example, a standard tooth scaling by a dental hygienist costs HK\$500, while the average cost of a simple tooth extraction is HK\$800 per tooth. Our survey results indicate that about 80% of secondary school students or families refused to seek help from costly dental treatment if they do not enjoy free services under the Student Dental Benefit Scheme. This shows that expensive dental services cause a financial burden to most grass-roots families.

2. Overlong waiting time at public hospitals

According to the report issued by the Society for Community Organization, around 80% of the interviewees think that the waiting time for clinical services at public hospitals is too long. The report points out that the waiting time is up to 2 hours for public general outpatient clinic services, more than 3 hours for emergency services and half a year to 2.5 years for specialist services. For instance, the waiting time for new case booking at specialist eye outpatient clinics can be up to 3 years. In this case, not only will the overlong waiting time hinder the process of children receiving medical treatment, but might also reduce their willingness for receiving treatment, which will worsen the condition of the young patients.

3. Students' potential health risks cannot be promptly spotted or cured

Every year the Government provides health services for students. In reference to Government documents, up to 90% of the primary and secondary school students have been participating in the Student Health Service Programme operated by the Government. However, we found out that the Programme failed to provide prompt treatment for curable diseases. There are still a considerable number of students suffering from eye, spinal and mental problems. Newspapers have pointed out that a student, even one evaluated as having “failed” the test for mental health condition, will only receive short-term follow-up services.

Mr. Cheng Wai Chek, President of the Hong Kong Association of Private Practice Optometrists, pointed out that current vision check for students only focuses on eye prescription test while lacking in-depth examination. Moreover, even if eye disease is spotted, the patient needs to wait for a long time until an optometrist can take follow-up actions, missing the optimum time for treatment. Therefore, it is obvious that in order to spot any potential health risk and take corresponding precautions promptly, school children would need more professional body check services.

As shown by the survey results, more than 60% of the interviewees said that they would go for a more comprehensive body check had they had health care vouchers. This shows that a health care voucher scheme for children can help encourage children to get a more comprehensive body check at their own expense so as to take appropriate precautionary measures. Our interviews with experts also suggest that the health care voucher scheme for children should not only focus on treatment but also on providing precautionary measures. As the saying goes, “an ounce of prevention is worth a pound of cure”, meaning it is always better to take precautions before getting sick. In this way, children’s future development (e.g. mental health development) can be supported and guaranteed.

4. Medical expenditure weakens children’s intention to seek medical treatment

According to the results of our online questionnaires, nearly 80% of the secondary school students who did not have the habit of seeking medical treatment would go for it if they had healthcare vouchers. This shows that the provision of health care vouchers can be turned to financial incentives while subsidising children’s medical expenditures. In addition, with the help of the scheme, children will be motivated to seek medical treatment, and be able to choose appropriate medical services according to their own needs.

Suggestions

1. Using the child health care vouchers to encourage preventive body check

In our opinion, the health care voucher scheme for children should not only focus on treatment but also prevention. The Hong Kong Pediatric Foundation pointed out that a child’s prime time for growth is between 0 and 5 years old. If the Government can allocate its resources to support and safeguard children’s health with an emphasis on preventive measures, children’s risks of having diseases can therefore be reduced to a minimum. The money spent on preventive measures will be far less than for the treatment of illness. By doing so, the Government can obtain the maximum economic benefits: its spending on this “ounce of prevention” can help to support and safeguard children’s health in the long run. Therefore, we suggest launching the health care voucher scheme for children, so that children will feel motivated to undergo a regular body examination and be better protected by this preventive action.

2. Suggested annual voucher amount

According to our survey with parents and secondary school students, nearly 80% of interviewees think that a child health care voucher should reach a minimum amount of HK\$2,000 to cover a child's daily medical expense. Data from the Organization for Economic Co-operation and Development (OECD) suggest that people of its member states¹ consult the doctor 6.5 times per year on average. The average cost of private clinics in Hong Kong is about HK\$300 per visit. Therefore, an amount of HK\$2,000 can satisfy a child's medical needs. To avoid over-use, we suggest that an annual voucher amount can be initially set to HK\$2,000, with an accumulative balance of no more than HK\$4,000 and period of no more than two years.

3. The coverage of the voucher scheme

Our interview with Dr. Chan Chok Wan suggests that child health care should cover different levels of treatments and examinations (both mental and physical) as children's mental and physical growth and immune system are not fully developed yet. Therefore, we suggest that the health care voucher scheme for children should cover 10 services, including general out-patient service, medical examination, rehabilitation service, vaccine procurement, speech therapy, vocational evaluation, occupational therapy², etc. After interviewing different age groups of children and their parents, we found that more than half of our respondents hope the scheme can cover five domains of health care services, namely private out-patient services, physical examinations, psychiatric assessment and treatments, dental examinations and ophthalmic treatments. After gathering experts' opinions and child respondents' views on the most demanded service domains, we hope that the health care voucher scheme can cover the five aforementioned service domains to better safeguard children's mental and physical development in Hong Kong.

4. Target users of the voucher scheme

With reference to the principles of fairness and generalization, we suggest that, despite the financial ability of each child's family, the child health care voucher scheme should benefit every Hong Kong citizen under the age of 18. We hope that the scheme can provide children with a choice in opting for suitable measures in preventing and curing diseases and help to safeguard the health of children in Hong Kong.

¹ Mostly developed countries.

² Through motor coordination exercises, occupational therapy can help to cure children with autism, global development delay or specific learning difficulties.

When conducting the interviews and online survey, we found that children cannot receive ideal medical treatments due to financial difficulties. In regards of this, we hope that the voucher scheme can help ease the financial burden of such families in need, and thus provide equal opportunities for all children to receive medical treatments. In addition, the voucher scheme can help middle class or upper-class families to choose better medical services, such as body checks and treatments, based on their children's needs. Therefore, the scheme can cater for the needs of children of different classes.

5. Increased measures to ensure the smooth implementation of the scheme

The implementation of the Elderly Healthcare Voucher Scheme led to unforeseeable misuse, such as medical attendance fee overcharge and unnecessary medication costs. To avoid similar misuse, we propose the following two measures:

1. Setting up a whistle-blowing mechanism: Citizens can report through hotlines and websites in case they see any misuse of the scheme; the Government should issue penalties to create a deterrent effect on staff in clinics and hospitals.
2. Carrying out more impromptu checks: The Government may send officials to clinics and hospitals to monitor the use of the health care voucher.

We believe and suggest that health care voucher for children should be implemented as a pilot scheme for three years. The voucher scheme can help avoid the limitation of children's medical choices attributed to their low financial capability and provide equal opportunities in health care for every child in Hong Kong. Yet, in the long run, the public health care system must be improved and the health care voucher can be used as a transitional policy. Therefore, in order to help children receive appropriate treatments, we suggest that the health care voucher scheme should be used as short-term contingency measure until the public health care system is improved. Prevention is better than cure.

We also suggest that the Government review the effectiveness of the scheme every year and decide whether it should continue after the trial period ends.

Conclusion

Children's well-being deserves our full attention. Every child should be able to enjoy equal medical services despite their family background, age or financial conditions. Everyone deserves a happy childhood, free from the agony caused by illnesses or diseases. The healthcare voucher scheme for children can help children in Hong Kong to receive appropriate treatment and preventive measures so that they can thrive healthily and become the future of our society. For the better prospects of the next generation, the society should put more resources into children's welfare to pave the way for their happy and healthy growth.

References

1. Society for Community Organization and Children's Rights Association (2017). *Survey report on health and medical services for poor children*. Available from: <http://www.poverty.org.hk/node/505>
2. Wen Ying Ying (2016). *Exploring Lights: Schoolchildren's Pressure Burst, Department of Health Only Conduct Survey*. Available from: http://orientaldaily.on.cc/cnt/news/20160416/mobile/odn-20160416-0416_00176_150.html
3. Department of Health (2015). *2013/2014 Annual Report*. Available from: https://www.dh.gov.hk/tc_chi/pub_rec/pub_rec_ar/pdf/1314/ADR2013_14_c.pdf
4. Department of Health (2015). *Department of Health's 2011 Oral Health Survey*. Available from: [http://www.toothclub.gov.hk/chi/pdf/Oral_Health_Survey_2011/Oral_Health_Survey_2011_W_CAG_20141112_\(TC_Full\).pdf](http://www.toothclub.gov.hk/chi/pdf/Oral_Health_Survey_2011/Oral_Health_Survey_2011_W_CAG_20141112_(TC_Full).pdf)
5. CSSA Alliance Strive for Low-income Family Protection (2016). *Response to a Recent Press Release on Public Health Care*. Available from: <https://www.inmediahk.net/node/1041172>
6. hket.com (2018). *Public Hospitals Lack Dermatology Hospitals, Patients Wait up to 3 Years*. Available from: <https://topick.hket.com/article/2101295/>
7. A survey conducted by our group from 21 August to 12 September, 2018

Acknowledgements

Secretary for Food and Health, Professor Sophia CHAN, JP

Legislative Councilor, Hon. SHIU Ka-chun

Legislative Councilor, Prof Hon. Joseph LEE Kok-long, SBS, JP

Legislative Councilor, Dr. Hon. Fernando CHEUNG Chiu-hung

The President of Civic Party, Mr. Alan LEONG Kah-kit

Chairman of Young DAB, District Councilor, Mr. Frankie NGAN Man-yu

Chairman of The Hong Kong Pediatric Foundation, Dr. CHAN C

hok Wan

Representative of Society for Community Organization

Representative of Children's Rights Association

All parents and children that participated in the survey

Survey Respondents (Parents & Children)

Miss Lee Kit Sze

Mr Ho Man Leung

Mr Kan Jin Tou

Miss Chow Nga Wing

Mr Mak Hoi Nang