



Position Statement on Children and Youth Health in Special Situations

According to the definition of World Health Organization (WHO), "child" refers to any individual with age between 0-18 years old. This group of children and youth are entitled to enjoy their rights under the United Nations Convention on the Rights of the Child (UNCRC) and should be protected from harmful acts irrespective to their age, gender, race, economic status or social background. Hong Kong, being a member of UNCRC under China, should have the obligation to ensure the protection for children and youth. Child Health covers physical, mental, social and education aspects. Children's health in family or in community settings is not our only concern, we also care about the health of children in special situations such as children living in institutes, temporary placement, hospital setting, correctional services or other children related areas.

The Legislative Council has discussed on "Children's Rights in Correctional Homes and Institutes" in the Child Health Panel Meeting recently. Stories of some ex-juvenile inmates being unfairly treated in prison were also covered in media which has exposed the health challenges of young people in special situations. The Surveillance Group of the Child Health Policy for Hong Kong has conducted a non-political, non-judgmental and non-punitive review on the health challenges of these young people and the possible recommendations with the aim to improve the health of youth even at adverse situations.

Literature review indicated that youth in Correctional Services have higher health risks

Youth in Correctional Services are generally more prone to high-risk behaviours such as drug abuse, alcoholism, early and unprotected sexual behaviour and violence. They also have higher risk of other health problems such as seizures, respiratory diseases, malnutrition and other health related issues than their counterparts. Studies have shown that 45% -75% of youth in the juvenile justice system have a diagnosable mental health condition. They have a higher rate of depression, self-harm behaviour, and stress-related symptoms. If these conditions are not properly handled or treated, there will be serious long-term detrimental effects. Hence, correctional service should provide young inmates basic health assessment and health education. Child healthcare professionals have an important role to care for and to educate these young people as well as to coordinate the continuity of care between community and institutional facilities.

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Youth Justice should be based on the children's rights with the goal of treatment and rehabilitation rather than punishment. Identifying the root causes of juvenile delinquency can prevent reoffending.

Juvenile inmates should have the same legal protection as other young people in the community. Judicial system should respect children and youth of different races, disabilities, poverty and social classes. The best interests of the child should be the primary consideration with special concern of unique health needs of each individual. Stigmatization, isolation and desocialization should be avoided. It is important to review the root causes of the crime committed and identify the risk factors to avoid reoffending. Judicial system should address the consequences of their crimes in accordance with the developmental characteristics of children and adolescents, balancing public safety and the specific needs of youth. Multidisciplinary approach involving family participation, coordination with community youth organizations and child health professionals should be the most effective strategy to help young people to build up resilience, resume their normal life and reintegrated into the community.

"Youth justice" is a more widely adopted concept in USA, Europe and Australia in recent years with emphasis on rehabilitation and treatment rather than punishment. It is helpful to let juvenile inmates understand the responsibility of their crime and the impact to the victims. Governments of many countries have actively revised the policy of correctional services with special focus on youth justice and the physical and mental health of juvenile offenders.

Here are the recommendations after multidisciplinary professional review and discussion:

- 1. All child health institutes including correctional homes and institutes should provide appropriate health care resources to children and youth.
- 2. Health care should cover emergency, acute and chronic physical and mental conditions of young people as well as their dental care.
- 3. Every young person should undergo a basic health check in the first 24-48 hours of admission to child health facilities to exclude emergencies, infectious diseases and to assess the need for continued use of drugs. A full health check-up and psychiatric assessment should be provided within one week after arriving at the child health facility. Sexually active young people should be screened for sexually transmitted diseases in order to provide appropriate treatment and referral.
- 4. All institutes should provide timely mental health services to address acute and chronic mental health conditions and emotional problems, including screening for suicidal risk and taking appropriate preventive measures. If young people are taking psychiatric drugs or having history of substance abuse, they should be provided with timely mental health assessment to review the need for continued drug treatment.

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- 5. Correctional homes and institutes should regularly evaluate the safety of the activities of detainees, including exercise program in hot weather, safety of water sports and climbing equipment. In addition, the use of physical restraints and force restrictions to detainees should be carefully reviewed.
- 6. Timely education and training should be provided to young people in detention, including those on trial or unsentenced. It is also a prime time to provide youth inmates health education to reduce future health risks.
- 7. Judicial system should address the consequences of their crimes based on children's rights and the developmental characteristics of children and adolescents and with emphasis on treatment and rehabilitation.
- 8. It would be more cost-effective to coordinate with community youth organizations and healthcare professionals and assign a case manager for each inmate to facilitate the follow-up measures and continuity of care for young inmates after release.
- 9. An independent and transparent monitoring and complaint system should be set up to deal with comments and complaints. The communication between the young inmates and the staff of the Correctional Service should be reinforced.
- 10. The rights of babies born in prison from female inmates should be ensured including their rights to have breastfeeding and bonding with mothers. The developmental needs and long-term care plan for these babies should be appropriately addressed in coordination with child care authorities.
- 11. A comprehensive Child Health Policy for Hong Kong should be formulated to direct further development of child health and create a better future for our children and youth.
- 12. An independent Children's Commission should be set up under the lead of a Children's Commissioner to look after all the child health related issues and to supervise the implementation of the Child Health Policy.

The Hong Kong Paediatric Society and Hong Kong Paediatric Foundation are professional bodies dedicated on child health and child advocacy. We hope that all child health facilities and authorities could respect the rights of children and take care of their wellbeing and special health care needs during special situations so that they can resume their normal life upon return to the community or home.