

Booklet **11**

Social Welfare System

S4 – Concepts and Framework

Booklet (1) Personal development

Booklet (2) Health and well-being

S4 – Holistic Health

Booklet (3) Physical

Booklet (4) Mental

Booklet (5) Social

S5 – Macro Level

Health Management

Booklet (6) (8) (9) (10)

Social Care

Booklet (7) (11)

Round-up : Booklet(13) Health and Social Care Policies

Macro Level

Health Management

Social Care

Disease Prevention / Medical Care

Health Promotion

Booklet 7
Caring Community

Booklet 11
Social Welfare System

Booklet 6
Healthy Community

Booklet 10
Healthcare System

Booklet 8
Ecology and Health

Booklet 9
Building a Healthy City

ILL BEING

WELL BEING

Learning Targets

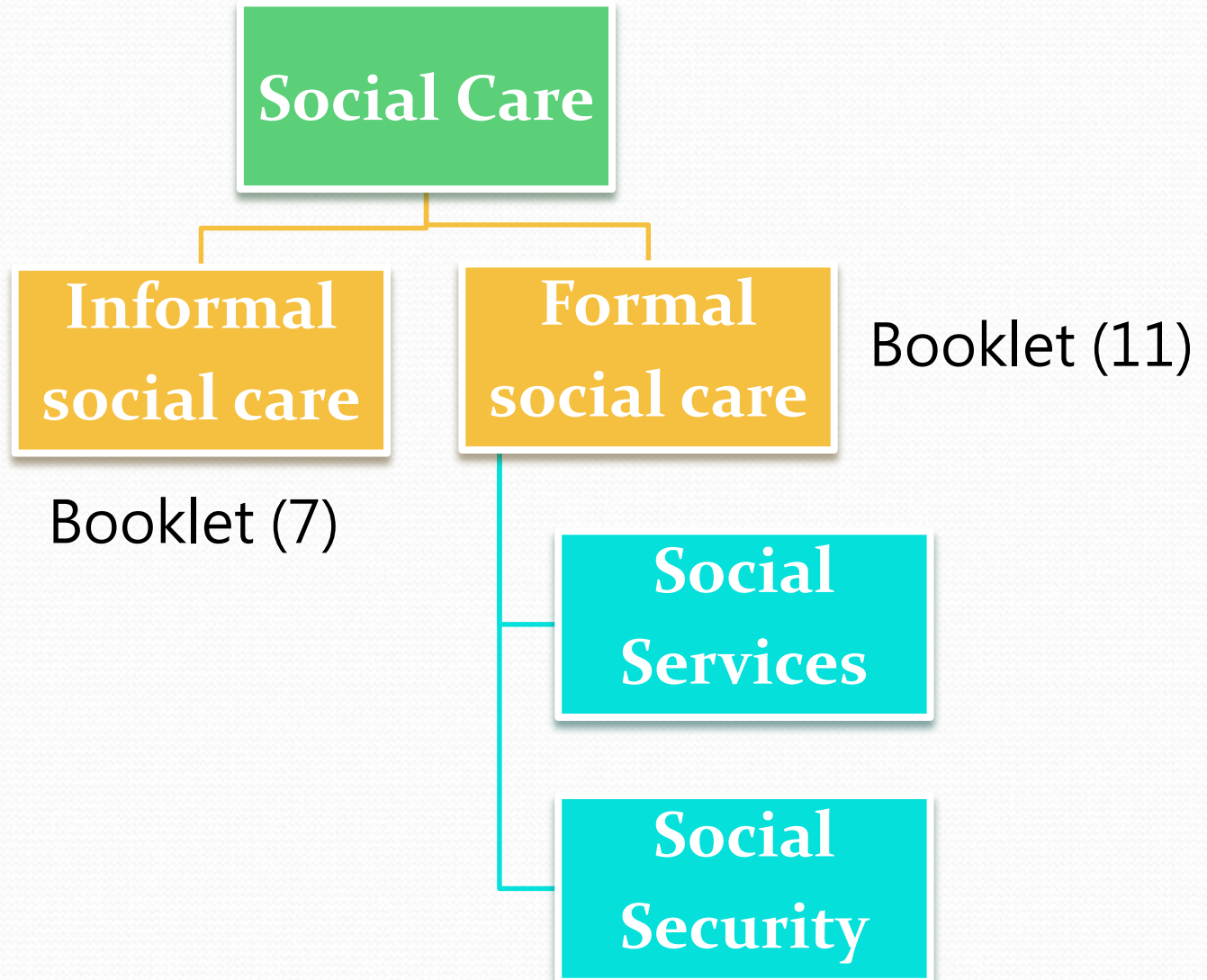
Values and Attitudes

- Make commitments to family, community and groups

Knowledge

- Identify and understand the roles of formal and informal care
- Identify the support and services available for people / families in need and suggest other possible means or solutions
- Develop basic understanding of the social welfare in Hong Kong and/or in other regions /countries

Concept of Social Care



11.1 Concept of Social Care

Topic 1 - Personal Development, Social Care and Health Across the Lifespan

1E The need for and the role of social care in the community and the private sphere across the lifespan

- 1E2 The role of social care
- 1E3 Forms of social care
- *To understand the importance of social care for personal and social well-being*
- *To identify and understand the roles of formal and informal care*

Informal Care

- Carers: friends, family members, neighbours or relatives
- Role: Booklet 7 – Social Support Network
- Informal care is usually the first choice to solve problems. Only when it fails, will individuals or families seek help from formal care

Formal Care

- Care:
 - provided by the public/statutory sector, private sector or Non-governmental Organisations (NGOs)
 - provided on an organised and paid basis
 - provided by the carers who are trained e.g. nurses, doctors, social workers, health care assistants
- Role:
 - to provide information and support services

Care provided by Volunteers

Topic 4 - Promotion and Maintenance of Health and Social Care in the Community

4E Volunteers complementing primary / private care

4E3 Community care complementing private care

- Volunteer
 - As a form of demonstrating social concerns and responsibility
 - Roles of volunteers in complementing to the private care

➤ ***To examine the roles of volunteer in complementing primary care***

Care provided by Volunteers

- Voluntary work overlaps the spheres of formal and informal care
- ***Roles of volunteers :***
 - ***Complementing informal care*** : volunteers are trained and organised to provide care services
 - ***Complementing formal care*** : they do not belong to any organisations and are able to enjoy their autonomy and independence from the government and the market. They do not charge the clients for their services.

11.3 Social Welfare

Topic 3 – Responding to the Needs in the Areas of Health (care, promotion and maintenance) and Social Care

3C Implementing health and social care policies

- 3C1 Development of the welfare system in Hong Kong
 - 3C3 Responsibilities, financing and structure of public agencies
- ***To explain the welfare system of Hong Kong and comment on its role in policy implementation***
- ***To categories and analyse the relevant organizations and agencies***

Social Welfare – Formal Social Care

Broad Sense : Social service

Housing

Medical
and health

Education

Personal
welfare

Income
maintenance

Narrow Sense: services provided by the Social Welfare Department (SWD) and Non-governmental Organisations (NGOs)

Social security, family and child welfare services, medical social services, group and community work, services for young people, services for the elderly, rehabilitation services for people with disabilities, as well as services for young offenders etc.

Planning and Funding

Funding

Central Planning

(White /green
paper– 5-year Plan–
Program Plan

Planning (Advisory Committees/
Executive Council/Legislative
Council) – Policy Address–
Implementation
(Bureau/Departments) – Funding/
Monitoring



2000

Major Change

Lump Sum Grant
Subvention

Categorization of Welfare Services

Categories	Examples	Booklets
Different Target Groups	Family and Child Welfare Services for the Elderly Rehabilitation Services Services for Offenders	11 – Welfare Services in Hong Kong
Different Purposes of Intervention	Preventive or Crisis Intervention Center-based or Community-based Integrated or Specialized Services	14 – Purposes of Intervention and Development of Services
Different Professional Areas	Outreaching Social Work Social Work in Integrated Family Service Centres Medical Social Work	12 – Working in Different Professional Institutions

11.4 Social Security

2A Structural issues related to social care

- **2A5 Social security: social security as a safety net, social security systems in Hong Kong, their dependence on politics and economic fluctuations**
 - ***To identify the support and services available for people / families in need and suggest other possible means or solutions***

2D Developments in the health and care industries

- **2D6 Changes in Hong Kong Social Security System**
 - ***To understand how the development of health and care industries are affected by the systemic factors, issues and concerns***

Concept of Protection (Insurance)

Present vs Future

- Income protection in times of uncertainty (e.g. illness, unemployment, maternity, ...etc.) and helping to alleviate individual suffering;
- Distribution of resources over one's lifetime for future possible risks.

Collective vs Individual

- Communal/societal pooling of resources for sharing of risk, mutual help in modern industrial society;
- Social stabilisation for economic production;
- Egalitarian income redistribution

Social Security

United Nations

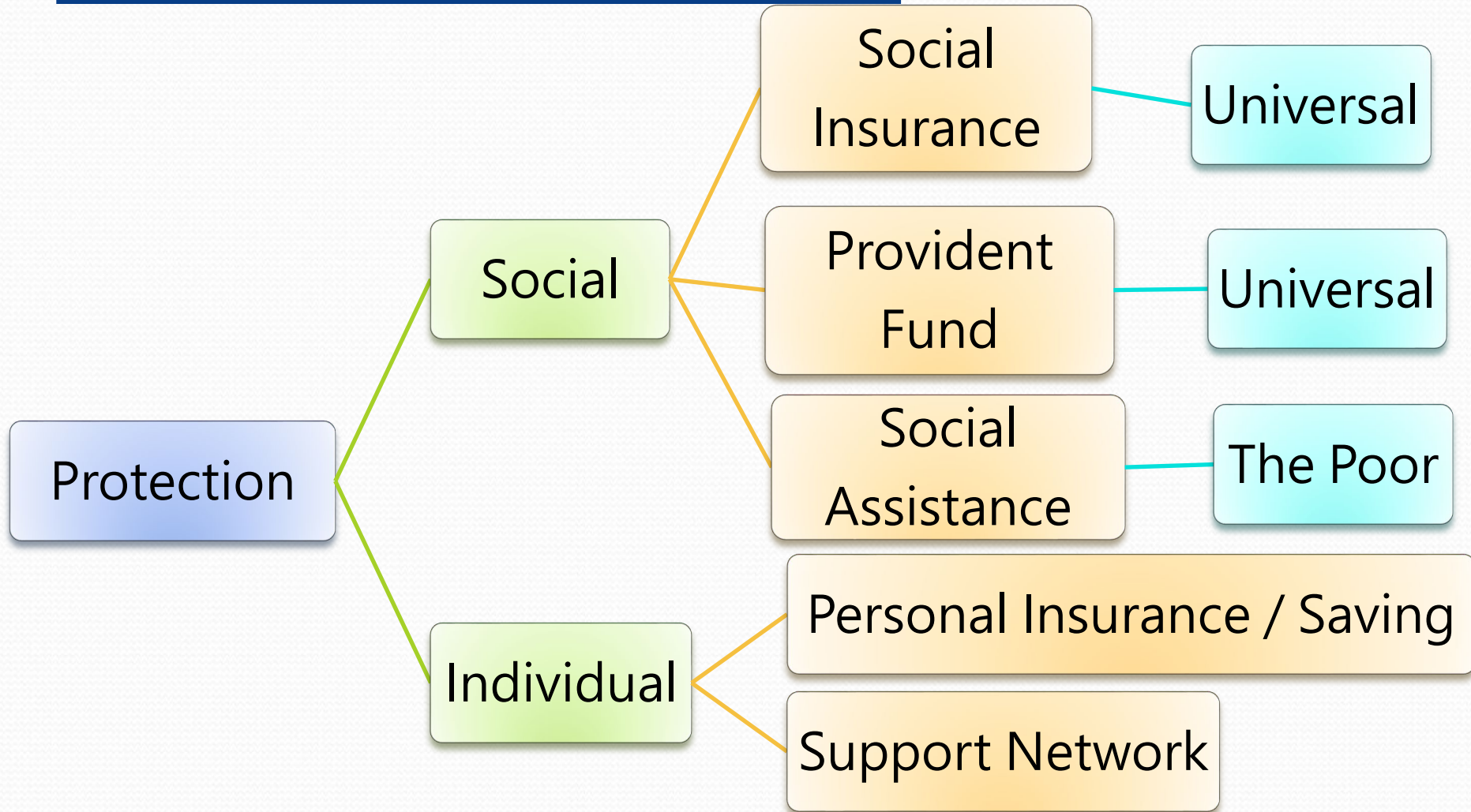
*The Universal Declaration
of Human Rights*

- Everyone, as a member of society, has the right to social security

International Labour Organisation

- Social security is the protection that a society provides to individuals and households to ensure access to health care and to guaranteed income security, particularly in cases of old age, unemployment, sickness, invalidity, work injury, maternity or loss of a breadwinner.

Types of Protection



Contribution

Contributory Programmes

Assistance provided is earnings-related

Social insurance, Provident fund

Non-contributory Programmes

Assistance provided by the government to the vulnerable groups or specific target groups

Means-tested

- Needed : subject to the means and needs of the recipients (or)
- Not needed : a universal rate applied

Public assistance, old-aged living allowance or old aged allowance

Social Security in Hong Kong

Contributory Programmes

- **Retirement Protection**
 - The Mandatory Provident Fund
 - Voluntary savings and insurance

1995 Mandatory Provident Fund Schemes Ordinance (MPFSO)
2000 The Mandatory Provident Fund System came into operation

Non-contributory Programmes

- **Provided by the Social Welfare Department**
 - Comprehensive Social Security Assistance (CSSA) Scheme
 - Social Security Allowance (SSA) Scheme
 - Criminal and Law Enforcement Injuries Compensation (CLEIC) Scheme
 - Traffic Accident Victims Assistance (TAVA) Scheme
 - Emergency Relief

11.2 Development of Social Care in Hong Kong

2D Developments in the care industries

- 2D6 Changing infrastructure of social care
 - ***To understand how the development of care industries are affected by the systemic factors, issues and concerns***

3C Implementing social care policies

- 3C1 Development of the welfare system in Hong Kong
 - ***To explain the welfare system of Hong Kong and comment on its role in policy implementation***

Structural Changes and Factors

Structure

- Welfare Services
- Social Security

Systemic factors

- Political, economic and social environment

Issues and concerns

- Social problems and concerns that need to be solved by government policies

Structural Changes and Factors

	Social Security	Social Welfare	Systemic Factors	Issues and Concerns
Emergency Relief in a Community of Immigrants (Early Settlement to 1950s)	<p>Social security was in the form of mutual help in the private sphere and was mostly taken up by voluntary agencies like The Tung Wah Group of Hospitals</p>	<p>Mainly in form of informal care</p>	<p><u>Political</u></p> <ul style="list-style-type: none"> • Not much government intervention in the initial stage of the colonial period. <p><u>Social</u></p> <ul style="list-style-type: none"> • Society of immigrants • Chinese and religious groups became more important 	<p><u>Influx of migrants</u></p> <ul style="list-style-type: none"> • Lost their original social support network and community ties <p><u>Plague</u></p> <ul style="list-style-type: none"> • Only limited assistance was provided for disaster relief

No Policy Paper/Related Report

	Social Security	Social Welfare	Systemic Factors	Issues and Concerns
Beginning of Social Assistance (1950s to 1960s)	<p><u>Social Assistance</u></p> <ul style="list-style-type: none"> Mainly provided by Chinese organisations, overseas relief organisations and government (started to assume greater responsibility) Emergency Relief Fund Scheme (since 1962) (formerly known as the Community Relief Trust Fund) provided immediate relief in both cash and material aid to disaster victims Social Security was understood in a conservative way. Complying with the Chinese tradition, poverty, illness and disasters were regarded as personal troubles that could be resolved by families 	<ul style="list-style-type: none"> Based on government revenue, limited funding was reserved for social welfare Social service was regarded as charity rather than a government responsibility. Overseas relief organisations and government played more important role as the increasing demand of social assistance exceeded the capacity of the voluntary agencies 	<p><u>Social and Economic</u></p> <ul style="list-style-type: none"> A large number of refugees arrived in Hong Kong after World War II Industrialisation was in the initial stage and economic development was limited 	<p><u>Disaster and riot</u></p> <ul style="list-style-type: none"> Devastating blaze in Shek Kip Mei in 1953 Kowloon Riot in 1956

Policy Paper/Related Report

White Paper: Aims and Policy for Social Welfare in Hong Kong (1965)

Report by the Inter-departmental Working Party to Consider Certain Aspects of Social Security (1967)

	Social Security	Social Welfare	Systemic Factors	Issues and Concerns
Golden Decade of Welfare Development (1970s)	<p><u>Establishment</u></p> <ul style="list-style-type: none"> Gradually establish a comprehensive social insurance system Means-tested "public assistance" was introduced The scheme of disability and infirmity allowances (later renamed as Special Need Allowances) and the Criminal and Law Enforcement Injuries Compensation Scheme were established for residents who are severely disabled or who are 65 years of age or above 	<ul style="list-style-type: none"> Government gradually took over the role of the voluntary agencies to provide basic welfare services Need for long-term planning in social welfare Development of social services, especially the youth service Ten-year Housing Programme 	<p><u>Economic</u></p> <ul style="list-style-type: none"> Hong Kong became an industrialized society. The relief-oriented social security would be unable to keep up with the economic development if it kept on relying on mutual help. Local residents began to strive to improve their living conditions (housing) In 1973, the world oil crisis led to an economic downturn with high inflation and unemployment rates 	<p><u>Riots</u></p> <ul style="list-style-type: none"> Star Ferry increased their fares: riot (1966)/ 1967 Leftist Riots Accumulation of anxiety among young people and discontent towards the Government

Policy Paper/Related Report

White Paper: Social Welfare in Hong Kong – the Way Ahead(1973)

White Paper: Integrating the Disabled into the Community : a United Effort(1977)

Green Paper - “Services for the Elderly”(1977)

Green Paper: Help for Those Least Able To Help Themselves(1977)

Program Plan on Personal Social Work Among Young People(1977)

White Paper: Social Welfare into the 1980’s(1979)

	Social Security	Social Welfare	Systemic Factors	Issues and Concerns
Challenges in the Development of Social Welfare (1980s' to now)	<p>Comprehensive Social Security Assistance Scheme</p> <ul style="list-style-type: none"> • Introduced (1993) • Standard rate reduced (1999) <p>Enactment of the Mandatory Provident Fund Schemes Ordinance(1995)</p> <p>Means-tested Old Age Living Allowance (2013) - supplement the living expenses of elderly aged 65 or above who are in need of financial support</p>	<ul style="list-style-type: none"> • Concepts of cost control and payment by users • Privatisation - outsourced social services through open tenders • Financing the service based on 'cost effectiveness' • Implementation of Lump Sum Grant system in 2000 • Social Workers Registration Board was established. 	<p><u>Economic</u></p> <ul style="list-style-type: none"> • Under the open door policy - many manufacturing industries moved northward to Mainland China (changes of family and social problems) • Financial crisis in 1997 and the global financial tsunami in 2008 (social concern about reduction in welfare expenditure – cost control, cost effectiveness) <p><u>Political</u></p> <ul style="list-style-type: none"> • Handover – China did not want HK to be developed into a welfare state (restricted the welfare expenditure by implementation of lump-sum grant) 	<ul style="list-style-type: none"> • Ageing population (Healthcare reform) • Unemployment, family problems, drug abuse, AIDS (no long-term policy and social policy / services set for solving social problems)

Policy Paper/Related Report

Scott Report(1985):Hospital Authority was suggested to establish and introduce a series of policies on cost recovering and out-of-pocket payment

White Paper: Social Welfare into the 1990s and Beyond(1991)

White Paper: Rehabilitation – Equal Opportunities and Full Participation: a Better Tomorrow for all(1995)

11.6 Related Issues

- **Topic 2 - Health and Social Care in the Local and the Global Contexts**
- **2D *Developments in the health and care industries***
 - *2D3 Conflicting agendas - Private vs. public responsibility; allocation of resources to different parties*
 - *2D5 Conflicting direction and potentials*
 - *To analyse the viewpoints or issues from different perspectives*
 - *To understand that value judgments may vary among different individuals or parties*
- **Topic 3 – Responding to the Needs in the Areas of Health (care, promotion and maintenance) and Social Care**
- **3D *Cultural and political disagreements and tensions***
 - *3D2 The debates and practical / political conflicts between the roles of the individuals (private sector) and the public or government in the provision of social care and health services responsibility of the government, e.g. privatisation*
 - *3D4 Tensions among different institutions: competing for clients or resources / resultant crisis in service delivery*
 - *To understand the conflicts and tensions in the health and social care context*
 - *To analyse the possible crises resulted from these tensions and disagreement and explore the possible solution(s)*

Privatisation

- Transfer of ownership or management of the services from the public sector to the private sector
- Privatisation of Social Services
 - Relationship between the government and NGOs changes from partners to funder (government) and service operators (NGOs)
 - Funding and Service Agreement - NGOs list the purpose and objectives, nature, performance standards and funding arrangement of the service.
 - Service Quality Standard defines the level of which, in terms of management and service provision, service units are expected to attain to ensure the quality of service to the clients

Using Lump Sum Grant in financing social services

Pros

- NGOs have greater autonomy and flexibility to deploy resources and plan their services to meet changing social needs in a timely manner
- It simplifies the administrative processes (like vetting of staff qualifications and reimbursement of expenses) and improves the efficiency and cost-effectiveness of the subvention system
- It provides NGOs with the flexibility needed for introducing initiatives which would improve their services
- It increases accountability of the NGOs

Cons

- It may undermine the quality and sustainability of welfare services when the amount of the subsidy is capped
- Based on the principles of 'out-of-pocket payment' and cost effectiveness, the charges for the activities and services will increase
- To achieve cost effectiveness, staff workload may increase and affect the quality of services
- The turnover rate of social workers increases as the salary for both newcomers and experienced staff are cut due to limited budget

11.5 Welfare Systems in Different Countries

Topic 3 – Responding to the Needs in the Areas of Health (care, promotion and maintenance) and Social Care

3B Developing health and social care / welfare policies

- 3B2 Comparison of policies between Hong Kong and other regions / countries (e.g. United Kingdom, United State of America)
- ***To compare health and social policies in Hong Kong with other regions /countries***

Welfare States (e.g. UK)

- **Policy assumptions**

- Social welfare is an integrated institution in the society and is used for resources reallocation

- **Policy objectives**

- Social services are provided on a universal basis outside of the market and based on individual needs.

- **Feature of service provision**

- Universal Coverage and Insurance:
- Benefits from National insurance to protect an individual from birth to death

Market-oriented countries (e.g. USA)

- **Policy assumptions**

- Individual needs should be satisfied by the private market and family. Only when these break down should social welfare institutions come into play and then only temporarily

- **Policy objectives**

- To minimize government intervention and dependence on welfare

- **Feature of service provision**

- Federal Social Insurance
- The funding of social security is from the tax on the employers of enterprises and business
- Company and private insurances are important parts

Mixed model (e.g. HK)

- Like market-oriented countries
 - welfare services only aim to assist people and families in need
- Like welfare states
 - the Government has played the roles of policy-making, resources distribution and service monitoring
 - Due to increasing reliance on government funding, most of the non-governmental organisations choose to be in line with government social welfare policy
- The parties participating in social welfare include government, non-governmental organisations, families, charitable organisations and private sectors