

Mental Health and the Youths in Hong Kong

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Abstract

This paper will review the epidemiological statistics related to the mental health of youths in Hong Kong, and will describe the mental health services. Stakeholders should improve their services. It is the responsibility of the society to build a better Hong Kong in terms of mental health, for the youths and the next generations.

Keywords: Youths, mental health, Hong Kong

Introduction

People between 15 to 24 are classified as “youths” by the World Health Organization (WHO, n.d.). In this age group around the world, mental health problems, including schizophrenia, individual detriment, panic disorder, bipolar disorder, and unipolar depressive disorders, are fairly common (UN, 2014). This article is a review of the epidemiological statistics related to the Hong Kong youths’ mental health in recent years. Mental health services and the social supports for youths are evaluated, as well as a discussion on the adequacy of these structural provisions.

Epidemiological Statistics of Mental Health of the Youths in Hong Kong

General Statistics

According to a recent survey by the Hong Kong Federation of Youth Groups (HKFYG, 2021), 51.9% of the 3,669 secondary school students interviewed had shown emotional symptoms of

depression. They got at least 16 marks in the Center for Epidemiological Studies Depression Scale (HKFYG, 2021). 48.6% of the interviewees scored their level (out of ten) of pressure between seven to ten, which was classified as a high level of stress (HKFYG, 2021). The most cited score was seven, involving 21.5% of the 3,669 students (HKFYG, 2021). Lo, Wong, Lam, and Shek (2018) studied the phenomenon of depression in university students, who were attending mental health services. In the group of 85 students aged below 25 and another 14 students older than 25, around 22.2% were found to have depression while around 26.3% and 16.2% had anxiety and problematic sleeping respectively (Lo, Wong, Lam, & Shek, 2018).

The suicide situation in Hong Kong youths is also alarming. Save the Children Hong Kong (2020) found that youths from 15 to 24 years old had higher rates of committing suicides since 2010 to 2019 than those of 14 or below, and the lowest was in 2014 with the rate of 6.2 per 100,000. In 2017, the rate became 10.4 per 100,000, which was the highest rate recorded (Save the Children

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Hong Kong, 2020). Comparatively, all data showed the proportion of the younger age group, was less than one per 100,000 (Save the Children Hong Kong, 2020). Lo et al. (2018) noted that 9.1% of university students tried to commit suicide or were thinking to commit suicide. These studies have indicated the seriousness of mental problems in the local youths, and hence, more works, including preventive measures, have to be planned and carried out effectively for the wellness of the young residents.

The Pandemic since 2020

During the COVID-19 pandemic, university students were worrying about the career prospect after graduation, leading to anxiety (Lee, 2020). Ng, Fong, Yee, and Law (2021) had studied the situations of 44 tertiary students from the top-up degree and sub-degree programmes, with age ranging from 18 to 25 years, and the students were separated into two age groups, from 18 to 20 years and from 21 to 25 years old. In both groups, more than 30% of the young people were found to have their seriousness of depression as minimal or none, while at least half of them as mild, around 11% to 13% as moderate, about 4% as moderately severe or severe, before the pandemic (Ng et al., 2021). However, during the pandemic, the trends shifted upwards. For example, the percentage of those noted to be moderately severe or severe was 20.5% during the COVID-19 pandemic. The same phenomenon was also observed when students were categorized by their stages of study or genders (Ng et al., 2021).

In 2020, a total of 757 students were interviewed by Hok Yau Club, a student assistantship organization, during the pandemic. Ten marks were given by one-fifth or more of students in a scale of ten, implying their stress level was at the greatest intensity (Lee, 2020). Not surprisingly, a postponement of the Hong Kong Diploma of Secondary Education Examinations was announced during the pandemic and this had created stress for students sitting for the public examination (Lee, 2020). Some were concerned that they would miss the examinations if they were unfortunately infected (Lee, 2020). In essence, the pandemic had created “new” stress to the students.

Stress levels were found to be higher among youngsters of age between 18 and 25 than those of the other age bands in an online study of 590 people by the co-author (Fong et al., 2020). Almost half (47.29%) of these young subjects (131/277) were found to have moderate, moderately severe, to severe depression, and they should have consulted the doctors. Home-based-learning-related stress of the 277 youngsters was also examined. Many of them spent at least 50% of time daily in home-based-learning. They had felt more pressurized and noted increased physical strain, even though such learning mode would have facilitated interactions and exchange of views among them (Fong et al., 2020). Again, such statistics had demonstrated that the youths had worrying issues that were influencing their mental health since the pandemic had begun in early 2020.

University students studying overseas also suffered from stress during the pandemic. 124 students studying in the United Kingdom or the United States were studied (Lai et al., 2020). 86.3% of them (107 students) were 18 to 25 years old, while the remaining 17 students were older than 25. The home base of 100 of the students (80.6%) were Hong Kong (Lai et al., 2020). Among all the 124 students, the mean of their intensity of stress under the Perceived Stress Scale-10 was 19.9 marks out of 40, signifying a moderate intensity. 105 students (84.7%) had moderate or high intensities, with the remaining 19 students being low. Significant relationships between the intensity of stress and stress sources related to the COVID-19 was found. The stress sources could be summarized into four aspects, namely the environment, personal affairs, relationships with other people and management (Lai et al., 2020). The authors also quoted a news report, in which a proportion of students studying overseas had found obstacles of their studies relating to the high intensity of stress, that has arisen from the procedures of seclusion, occupations, and expensive flight journeys (Lai et al., 2020).

Mental health of youths in Hong Kong was also negatively affected by family issues during the pandemic (Wong, Lam, Lai, Wang, & Ho, 2021). In the survey conducted on 219 interviewees of between 18 to 24 years of age, 15.4% of them was not feeling happier with the family than before

because of the pandemic while, incidentally, 5.0% were feeling happier, perhaps as a result of spending more time at home by family members because of work/study from home arrangements (Wong et al., 2021). Members were seeing more of their family during the pandemic but this had resulted in damages to interpersonal relationship and dynamics in the family arising from conflicts and arguments. This was directly affecting the mental well-being of the youths.

Youths who are lesbian, gay, and bisexual (LGB) have also shown their stress in different aspects (Suen, Chan, & Wong, 2020). In a study of 857 LGB people using the Patient Health Questionnaire-9 and Generalized Anxiety Disorder-7 to measure depression and anxiety respectively, 27.9% had anxiety while 31.6% were suffering from depression. The 16 to 25 years old had scored worse than the older age groups. On the other hand, the mean marks in their genuine pressure on economy and day-to-day habit being disturbed ranked the highest among all age groups (Suen et al., 2020).

Mental Health and Social Supports for the Youths in Hong Kong

The Department of Health (DH) has launched several mental health programmes in secondary schools, including the Adolescent Health Programme (AHP) (Food and Health Bureau [FHB], 2017). The goal of this programme, which involves social workers, nutritionists, nurses, clinical psychologists, and physicians, is to ensure teachers, students and parents will understand the students' psychosocial and physical health by joining activities in the educational institutions (FHB, 2017). Around 70,000 teachers, parents and students joined the programme in 2015–2016, coming from 320 schools (FHB, 2017). In the curriculum of secondary schools, The Government of Hong Kong Special Administrative Region (HKSARG, 2021b) has included two topics related to feelings, one in Form 1 to Form 3 and another one in Form 4 to Form 6, with the aim to develop good thoughts among the students. HKSARG has also launched different activities and learning materials for students (HKSARG, 2021b).

The Students Health Service Centres of the DH had collaborations with the Social Welfare Department (SWD), clinical psychologists, non-governmental organizations, social workers in the education institution, doctors, and consultants (FHB, 2017). Moreover, the divisions of work between the DH and other stakeholders are different (FHB, 2017). First, students in their secondary studies will receive a yearly questionnaire from the Students Health Service Centres about their psychosocial and physical health (FHB, 2017). Students are required to finish the questionnaire themselves and their parents may also need to finish it as well, depending on the situation (FHB, 2017). Once the data from these questionnaires are received, students will have a one-on-one meeting with professionals if required, and often self-esteem, stress and advisory services are the issues raised in such meetings (FHB, 2017). Other stakeholders are responsible for the follow-up actions in managing the cases of the concerned students if psychosocial tribulations are detected (FHB, 2017).

Apart from the HKSARG, other organizations also provide different programmes to help the needy youths (FHB, 2017). Since 2001, the Early Assessment Service for Young People with Early Psychosis (EASY) Programme was initiated by the Hospital Authority (HA) (FHB, 2017). Service centres, hotline and website are used as platforms to report cases with possible psychosis (FHB, 2017). There are seven service centres located in Hong Kong Island West, Hong Kong Island East, Kowloon Central, Kowloon West, Kowloon East, New Territories West, and New Territories East respectively (HA, n.d.). In 2011–2012, the WHO-defined "youths" could receive services such as therapy and tests delivered by team members coming from various professions (FHB, 2017; WHO, n.d.). Besides, the negative consequences happened to the family and the patients arising from mental illnesses could be contained and a regular living pattern of the patient could be achieved, if reports were received about the concerned young person (FHB, 2017).

The Hong Kong Jockey Club Charities Trust (The Trust) has started the 4.5-year LevelMind@JC scheme, supporting those primarily from 12 to 24 years old since 2019 (LevelMind@JC, n.d.a.). HK\$295 million were designated to this scheme.

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The rationales behind the scheme were the stress vulnerability related to the alterations and obstacles of the youths' life, and their states of psychology and physical abilities, which had triggered the Trust to kick-off this project (LevelMind@JC, n.d.a.). Furthermore, the Trust, the Department of Psychiatry of The University of Hong Kong and six non-governmental organizations were also involved in the scheme. The youths could approach the clinical psychologists, psychiatrists, and social workers in the scheme, thus receiving mental health services such as early interventions. There were eight hubs around Hong Kong, including Chai Wan, Kwai Tsing, Kwun Tong, Lai Chi Kok, Tsuen Wan, Sha Tin, Sheung Shui and Wong Tai Sin. Inside these hubs, youths could participate in events related to individual conditions, one-on-one advisory sessions, and gatherings. In addition, the hubs could also become platforms which youths might generate positive ideas by managing their own mental issues (LevelMind@JC, 2021).

Advisory services are provided by every University Grants Committee-subsidized (UGC-subsidized) university (Ip, 2018). In some of these tertiary educational institutions, the services are placed under the category of student-related issues (Ip, 2018). Similar services are also provided by Hong Kong Shue Yan University, a private university (Ip, 2018). In 2016, one university launched a Mental Wellness Clinic (The Clinic), with four family medicine specialists and nursing staff (Lo et al., 2018). Teaching staff members, advisors of the university and psychiatrists from outside the university were also involved, working with the physicians continuously if and when required. Furthermore, evasion on mentally ill patients' stigmas, information on positive mental state disseminated to university members, involvement in different areas for a result in a synergetic way, the score of zero reported suicide cases, early intervention being completed and the achievement of a cost-effective operation of mental services were the six prime objectives of the Clinic (Lo et al., 2018). Youths, i.e. students, could make appointments by calling the University Health Service or if their cases were transferred by their advisors (PolyU, n.d.).

In terms of social welfare, HKSARG started to accept phase one applications for the Mental Health

Initiatives Funding Scheme of 300 million dollars in July 2021, as a social response to the pandemic (HKSARG, 2021a). Mental health consciousness and people requiring assistance were the focus of the programme (HKSARG, 2021a). Project duration of two years was generally accepted as the maximum operational period of suggested plans (ACMH, 2021). Two types of plans were accepted, including those demanding less than or equal to HK\$500,000 and those requiring more than HK\$500,000, up to the maximum of HK\$2 million (ACMH, 2021). Six experts from outside HKSARG were responsible to approve the plans submitted and if required, views from the SWD, the Education Bureau and the Food and Health Bureau would be sought (ACMH, 2021).

There are also two recreational projects specifically catered for the youths, namely, Pupil Ambassador Scheme on Positive living, and Enhanced Smart Teen Project (HKSARG, 2021b). Students will experience teamwork and face with difficult situations (HKSARG, 2021b). The HKSARG have also created a website to provide information of relaxation and cultural activities (HKSARG, n.d.), and the Shall We Talk scheme, started in 2020, have been organizing mental health activities for youths (HKSARG, 2020).

What more can be done?

The adequacy of the mental health services is just acceptable, yet improvements are expected. There are eight LevelMind@JC hubs in Hong Kong (LevelMind@JC, n.d.b.). However, six of them are all located near each other in terms of the localities while the remaining two are in Sheung Shui and Chai Wan. Youths living in districts such as Tuen Mun, Yuen Long, Sai Kung and areas like the Lantau Island need to travel to the hubs in other districts to use the services. It can be understood that there may be possible difficulties in finding suitable places to build the hubs as well as consideration of financial burden in operating many hubs at the same time. Yet, due to the concentration of the hubs, it is suggested that hubs in Kwai Tsing and Kwun Tong to be relocated to Tuen Mun or Yuen Long, and Tseung Kwan O respectively to save travelling time for those living in Tuen Mun, Yuen Long, Sai Kung or the Lantau Island (LevelMind@JC, n.d.b.).

In another case, the EASY programme of the HA has a good arrangement of centres as seven centres are designated to serve a region each, namely Hong Kong Island West, Hong Kong Island East, Kowloon Central, Kowloon West, Kowloon East, New Territories West, and New Territories East (HA, n.d.). These centres can serve as referral centres for the LevelMind@JC hubs as well. As mentioned above, transferring the LevelMind@JC centres in Kwai Tsing and Kwun Tong to other areas can ensure that the hubs are scattered wider across the region, serving more and different backgrounds of youths (LevelMind@JC, n.d.b.). In addition, the suggested relocations can ensure that wider variety statistics can be obtained to establish more concrete reflections on the performance of the LevelMind@JC scheme, and to support the research. This will help the scheme to adjust the operations plan, and to further improve the mental health of youths.

The social support for youths appears to be adequate, as HKSARG is willing to support the youths in many aspects, and there are also contributions by non-governmental organizations and the Hospital Authority (HA, n.d.; HKSARG, 2021a; HKSARG, 2021b; LevelMind@JC, n.d.a.). However, the effectiveness of youth policies remains in question as some youths may not be able to join the activities due to various reasons. HKSARG and stakeholders should constantly monitor the policies and the performance of related activities, especially when the popularities of some programmes are low. They should also try to understand what the youths are thinking about the policies and programmes, and then make appropriate adjustments to improve the situation for the benefits of the young people.

On the other hand, the current mental health system may not help to solve the mental health issues of the youths in Hong Kong, especially when facing the COVID-19 pandemic or similar and significant community events. Students can find the advisors in all UGC-subsidized universities (Ip, 2018). In a study of 250 year-one university students studying in social work, 5.3% of them would prefer to seek assistance from social workers and advisors, but these students knew something related to their field of study. The students would also be concerned about the stigmas of seeking help, the non-transparency of information about

the services from the university and the ability of the advisors. Thus, some students would not accept assistance from the professionals, or not engage the advisors to solve their mental health problems. Some negative descriptions about advisory services were mentioned by the university students (Ip, 2018).

Young people are lack of life experience, and they are all shaped by their upbringing and schooling, dependent on where they grow up, their family and the socioeconomic backgrounds. Many of them are not well aware of their strengths, weaknesses, or equipped to manage their health, social, and even educational needs. The government, policy makers, academics, schools, community organizations and family members can influence these young people and are in the position to contribute to the well-being of their mental and social conditions. It is suggested that school and universities should take more initiatives to monitor mental health among students and to promote relevant programmes and services to them more actively and frequently. The responsible units and teams can create attractive posters or tag lines to draw the attention of the students to the issues and services. What is more, on-site booths about mental health, with different topics each time are useful. Furthermore, mental health questionnaire can be a regular event to allow students to reflect and understand their mental health status. Teaching staff can spend several minutes during each lesson to share materials about mental health and services. The schools and universities can also adjust their advisory services by changing and enhancing the advisor-student relationship to improve the advising scheme with the perspective of the long-term impacts of mental well-being among the youths (Ip, 2018).

Concluding remarks

Mental health of youths is crucial in the community and to the future of next generations. It is the responsibility of all stakeholders in the whole society to actively and diligently uphold and maintain good mental health for the youths, especially when they are facing difficulties in life or social events and stress like the pandemic. HKSARG and other concerned organizations should always seek and review

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opportunities to improve the mental health services, creating an environment conducive to maintain a good mental health status among the youths in the family, community and schools. With the establishment of district health centres in all the 18 administrative districts of Hong Kong, promotion of youth health, particularly in the psychosocial aspects, should be a top priority as an important community health initiative close to the local residents.

摘要

精神健康與香港青年

這篇文章會就香港青年精神健康流行病學數據進行綜述及分析精神健康服務。各持份者亦應改善精神健康服務。香港社會有責任在精神健康議題上為青年及他們的下一代建造一個更好的香港。

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