

衛生福利及食物局  
健康護理及促進基金  
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## 衛生福利及食物局局長

周一嶽醫生，SBS，JP 致勉辭

政府一向重視公共衛生，而健康促進正是公共衛生的核心工作。由衛生福利及食物局管理的健康護理及促進基金，自一九九五年成立以來，在加強健康促進和疾病預防方面擔當重要角色。基金資助非牟利機構推行各項計劃用以提高市民的健康意識和倡導健康生活，目標是達至全民健康。

去年八月在泰國曼谷舉行的第六屆全球健康促進會議中通過的《曼谷健康促進憲章》，確認由多方合作改善健康的政策應當是全球和每個國家發展工作的一項重點。要創造一個更健康的社會，我們需要從多方面着手，用切合市民需要的方法，使健康生活方式融入每一天。這些策略包括：

1. **普及健康促進的知識和技巧**。今天的健康推廣計劃博覽會正符合這要點，讓熱心推行健康促進工作的人士交流心得和分享經驗。
2. 各公營、私營、非政府組織、民間、社區、學術界和專業團體通力合作，**建立伙伴關係和同盟**。我希望這次博覽會可以提供一個平台，增進各同業互相認識，催化為日後合辦計劃，以至長遠來說推動可持續發展的項目。
3. 累積知識和經驗，建設能力，以**培植領導人材**，和制定健康促進政策和措施。
4. 我們亦要**投資於可持久的政策和基礎設施**，改善可影響健康的決定因素。而健康護理及促進基金，透過資助健康促進計劃，正是達成這一項策略重要的一環。

博覽會標誌着基金成立第十一年。希望大家藉着今次博覽，像會徽一樣，不同界別和背景的朋友繼續攜手合作，「力求創意、群策群力」，共同為促進市民健康而努力，使《曼谷健康促進憲章》的抱負，得以早日在香港全面落實！

**Message from  
Dr York Y N CHOW, SBS, JP  
Secretary for Health, Welfare and Food**

Public health has always been one of the highest priorities of the Hong Kong SAR Government, and health promotion is a core function of its public health activities. Since its establishment in 1995, the Health Care and Promotion Fund (HCPF) has played an important role in health promotion and disease prevention. It aims to promote health for all by providing financial support to non-profit making organisations to conduct projects that raise awareness and advocate healthy lifestyles in the community.

Last August, the Bangkok Charter for Health Promotion was endorsed at the 6<sup>th</sup> Global Conference on Health Promotion in Bangkok, Thailand. The Charter recognised policies and partnerships to improve health as key components of global and national development. In fostering a more healthy community, we need multiple strategies to respond to people's needs. These strategies include:-

1. **disseminating knowledge and skills of health promotion.** Today's Health Promotion Project Expo in which participants share experience with each other aims to fulfil this goal;
2. **partnering and building alliances** among public, private, nongovernmental, academic and professional organisations. I hope the Expo will be a platform for the building of such close relationships in order to catalyse collaboration in future projects;
3. **building leadership capacity** for development of health promotion policy and practice;
4. **investing in sustainable policies and infrastructure** in order to improve health determinants. The HCPF, through supporting health promotion projects, is an important element of this strategy.

Today's Expo marks the 11<sup>th</sup> anniversary of the HCPF. I hope participants from different sectors and backgrounds can all continue to join hands, as in the Expo's logo, with the common goal to improve our community's health so that the vision of the Bangkok Charter may soon be fully realised in Hong Kong!

## **健康護理及促進基金的成果與前瞻**

健康護理及促進基金  
小組委員會聯合主席  
李紹鴻教授, SBS, ISO, JP

### **人人為健康出力**

根據世界衛生組織，「促進健康是一個過程，使民眾能夠增加他們控制健康的能力和提高自己的健康質素」，這過程是全面性的，除了加強個人的技巧和能力之外，更要改變社會，經濟及物質環境，以便盡量減低影響健康的程度。群眾的參與，加強控制影響健康的因素是不可缺少的。

一九八六年倡議的《渥太華促進健康憲章》，提出五點主要原則，包括：

- 設立健康的公共政策
- 設立支持促進健康的環境
- 加強社區參與促進健康活動
- 發展個人推動促進健康的技能
- 重組各種衛生服務，以便著重促進健康和預防疾病的服務

去年八月，在泰國曼谷第六屆的全球健康促進會議通過的《曼谷促進健康憲章》的原則獲加以擴充，以便配合新時代的需要。

促進健康是公共衛生一個核心服務，除在傳染病、慢性非傳染病及疫症威脅方面作出貢獻之外，它也是改善健康及人類發展的有效投資，促進健康是一個積極性和全面性的健康概念，提高生活質素，保障心理及靈性的和諧。

促進健康，人人有責，政府、社區、專業團體、各衛生機構、非政府組織，個人及家庭都擔當一個重要任務。享受能達到的高質素健康是每個人的基本權利並無歧視，大家應該團結一起，向着這目標而前進。

### **回顧健康護理及促進基金的成果**

政府於一九九五年注資八千萬元成立基金，旨在加強健康推廣及預防疾病的工作。透過資助優秀的健康促進計劃，提高市民意識、培養健康生活習慣和改善環境因素，以助實踐健康人生。

基金自成立以來，曾作出十九次公開接受撥款申請，每次各界熱烈支持。所有申請需經嚴格評審。至今，基金已資助 115 項有質素的健康推廣計劃，撥款總額高達三千五百萬元。當中已有八十多項計劃順利完成，其餘的三十多項亦在進行當中。基金的撥款申請來自不同界別，過半數是非政府機構和志願團體。計劃的受益對象和主題可謂包羅萬有（表列一）。大部分計劃的設計都是回應本港正面對的健康問題，如控煙、健康生活習慣、運動與營養、老人健康、青少年健康、精神健康和婦女健康等。

表列一

<u>計劃範疇</u>	<u>受資助項目之百分比%</u>
運動與營養	14.8
健康生活習慣	13.9
青少年健康	12.2
精神健康	12.2
控煙	11.3
預防疾病	11.3
婦女健康	11.3
老人健康	9.6
職業健康	3.4

有不少優秀的計劃於順利完成後，被推廣到其他機構或持續發展，並改善了主辦機構之現有服務，亦有部分成為政府或非政府機構的指引和參考。意念創新及可行的計劃更為將來的促進健康活動奠定基礎，如針對弱勢或被社會忽略的社群而進行健康推廣。另外，不少成功的計劃都是透過與其他組織合作，集合不同單位的優勢，各顯其才，使受益者獲得最大的裨益。

## 前瞻

過往十年的資助健康促進計劃，使我們掌握了很多豐富的經驗，為了更能適應影響人類健康因素的轉變，我們有需要為健康護理及促進基金訂下新策略及新方向，使服務更趨完善，更適切市民的需要。

未來健康護理及促進基金所擔當的角色，可跟隨「曼谷促進健康憲章」的策略，以如下方式進行，包括：

- 訂下發展促進健康的長遠策略及目標
- 鼓勵民眾及社區參與
- 鼓勵專業團體、學術機構及非政府組織聯盟，加強各機構合作及分享彼此促進健康的經驗
- 鼓勵與鄰近地區交流促進健康的知識和經驗
- 定期檢討過去基金資助的計劃，鼓勵及協助優秀的計劃能持續發展，推廣到其他地區或有關機構。
- 鼓勵引進有創意的促進健康計劃，包括使用資訊科技，傳達正確的健康知識。
- 邀請專家協助，改善促進健康計劃評估的方法及指引。

健康護理及促進基金如要實踐以上所述的角色，可透過設立「優先課題」，集中資源，加強支持針對以下主旨的計劃：

- 香港的主要公共衛生問題，特別是三種“疾病負擔”
  - (1) 慢性疾病，如癌症、心臟血管病、糖尿病、精神健康、高血壓、中風
  - (2) 傳染病，如流感
  - (3) 意外傷亡〈交通、家庭、工傷、跌倒(老人)、中毒〉
- 在不同環境推動促進健康，包括：
  - (1) 健康社區
  - (2) 健康城市
  - (3) 健康學校
  - (4) 健康醫院
  - (5) 健康大學
- 健康生活模式，包括：
  - (1) 肥胖
  - (2) 運動
  - (3) 藥物濫用
  - (4) 心理平衡
  - (5) 戒煙
- 與健康有關的社會問題
  - (1) 不公平健康懸殊
  - (2) 未成年懷孕、性病
  - (3) 濫用毒品
- 協助各社群建立健康人生路
  - (1) 兒童及青少年健康
  - (2) 家庭健康
  - (3) 婦女健康
  - (4) 長者健康
  - (5) 男士健康

二十一世紀給公共衛生帶來很多新挑戰，亦帶來很多新機會。市民的知識日漸增加，對健康關注亦遞增，愈來愈多市民需要正確的健康訊息。我們需要協助市民分辨健康和不健康的選擇。我們應共同合作，以「結伴參與，促進健康」的精神，全面支持促進健康的活動，使香港成爲一個更健康及充滿活力的城市。

## 香港健康促進最新發展

衛生署  
衛生防護中心  
項目管理及專業發展處  
中央健康教育組總監  
蔡遠寧博士

健康教育在香港源遠流長，而健康促進亦正在日益發展。健康促進是指透過賦予個人及社區能力，以加強對健康決定因素的控制，進而改善健康的一個過程。健康促進涵蓋了健康生活方式的推廣，以及對居住環境、社會、經濟及生態等因素的改善。世界衛生組織在一九八六年的《渥太華健康促進憲章》中提出了三個基本策略：包括倡導，賦予能力及調解，並以五種行動來支持這三個策略，包括：建立健康/公共政策、營造具支持性的環境、加強社區行動、發展個人能力，以及重整醫療服務方向。

自從提出《渥太華健康促進憲章》後，全球化對世界的影響日益顯著，並對全球人類健康帶來了挑戰。國際社會在二零零五年簽訂了《曼谷健康促進憲章》，共同承諾在世界各地的健康促進項目中通力合作。《曼谷健康促進憲章》呼籲各國提供資源推行健康促進，展開行動計劃，透過適當的指標及目標監測成效，並定期匯報進度。

衛生署承諾打擊日益嚴重的非傳染病問題，並強調採用講求策略及協調的方式。要實行此策略，必須多管齊下，即同時採用健康促進，疾病預防和及早介入等方法。當中的責任，亦必須由政府部門、非政府機構、專業團體、商營機構及社區共同承擔。此外，衛生署亦透過多元化的方式，按著整個社區及個別群體的需要而行動。健康促進行動應以需求為本，採取的手法以成效憑證為依歸，規劃時應顧及監測與評估，以及記錄實證以供發放和相互學習。健康促進不應再是默守成規的行徑，或只是一連串的宣傳活動。

衛生署目前將均衡飲食、體能運動、煙草管制、個人及環境衛生、預防意外及精神健康訂為優先處理項目。不同背景的非政府組織是推動市民健康的主要服務提供者，亦是重要的社區資源。衛生署中央健康教育組鼓勵與社區組織建設伙伴關係，共同制訂健康促進的方向、提升能力、推動優良模式、展開合作項目及分享專業知識。

## **Latest Developments in Health Promotion in Hong Kong**

**Dr. Ray Yuen-ling CHOY,  
Head, Central Health Education Unit  
Programme Management and Professional Development Branch  
Centre for Health Protection  
Department of Health**

Hong Kong has a long tradition of health education and a growing history of health promotion. Defined as a process that enables individuals and communities to increase control over the determinants of health and thereby improve their health, health promotion embraces the promotion of lifestyles as well as the improvement of living conditions, social, economical and ecological factors, which determine health.

The World Health Organization's Ottawa Charter in 1986 identified three basic strategies: to advocate, enable and mediate, to be supported by five areas of action: to build healthy/public policy, create supportive environments, strengthen community action, develop personal skills and re-orient health services.

Recognizing the changing global context since the Ottawa Charter and challenges to global health imposed in a globalized world, the world community pledged in 2005 through the signing of the "Bangkok Charter for Health Promotion in a Globalized World" to join hands in worldwide partnership to promote health, with global and local engagement and action. The Bangkok Charter calls for allocation of resources for health promotion, initiation of plans of action and monitoring of performance through appropriate indicators and targets, and the regular reporting of progress.

The Department of Health is committed to tackling the rising epidemic of non-communicable diseases through a strategic and coordinated approach. In implementing this strategy, the need for various levels of action, including health promotion, disease prevention and early intervention, is emphasized. Responsibilities must be shared across the government, non-government, professional and business sectors, and the community. Moreover, a diversity of approaches tailor-made to address the needs of specific populations and the wider community must be used. Health promotion actions should be driven by needs, based on evidence of what works and what does not, be planned with monitoring and evaluation in mind, and be documented for dissemination and mutual learning. Health promotion should no longer be an act to re-invent the wheel, or be reduced to a battery of publicity activities.

The Department of Health identifies nutrition, physical activity, tobacco control, personal and environmental hygiene, injury prevention and mental health as priority areas for action. Non-governmental organizations of diverse backgrounds form a major service provider and valuable community resource for promotion population health. Partnership between community organizations and the Department's Central Health Education Unit is encouraged in setting health promotion direction, capacity building, promoting good practices, collaborating in projects and sharing expertise.

## **Beginning with Dissemination in Mind: Characters of Successful Health Promotion Programmes**

Dr Charles C Chan  
Co-Chair, Promotion Sub-committee  
Health Care and Promotion Fund Committee

### **Preamble**

A recent systematic review on the quality of successfully completed health promotion projects in Hong Kong found that reports are far more likely to provide information on internally valid estimates of programme effects compared to characteristics of external validity (Chan & Chan, 2006). This lack of reported external validity information reduces the availability of important contextual description essential to decision making by the government or, for that matter, any funding bodies on committing further investment on the potential dissemination of efficacious interventions in larger-scale community programmes. This state of affair in health promotion efforts in Hong Kong however is not uncommon in other parts of the world (Glasgow, et al., 2004; Solomon & Kington, 2002).

After over ten years of continuous effort in health promotion and disease prevention, the Health Care and Promotion Fund has committed to support over 115 well designed projects most of which targeted at priority areas utilizing the most promising approaches available internationally coupled with the best local expertise. There is evidence that knowledge and skills in what constitute successful health promotion programmes are now widely scattered in the community.

The vision for the next ten years will have to build on the current characteristics of the capacity of the stakeholders and explore ways to systematically integrate social, governmental, and policy-level factors into behavioural change interventions (Tunis, et al., 2003). Future projects will be encouraged to adopt multilevel approaches, increase the focus on social contextual factors, and to build infrastructures for sustaining and disseminating prevention programmes known to be effective in Hong Kong.

### **Core Questions for Proposal Preparation**

Utilising the RE-AIM framework as a planning approach to enhance translation and dissemination, a list of core questions were developed which may be useful to our community stakeholders in guiding their proposal preparation.

#### **Reach (individual level)**

1. What percentage of the target population would come in contact with your programme?
2. Do you have a plan (by stage) to reaching the most needy?

#### **Effectiveness (individual level)**

1. How effective will the intervention affect key targeted outcomes?
2. Do you expect any unintended adverse consequences?

#### **Adoption (setting or organisational level)**

1. What percentage of the targeted settings and organizations (including high-risk or underserved population) will agree to take on this programme?
2. What kind of motivation package(s) is likely to increase the fit between your

Programme and targeted organisational goals and capacity?

### **Implementation (setting or organisational level)**

1. What proportion of staff (at different levels) and community partners (including lay persons) within a setting and / or a community will agree to programme delivery?
2. What is needed to increase the likelihood that various components will be delivered as intended?

### **Maintenance (individual & setting levels)**

1. What are the characteristics of persons and settings showing maintenance of the intended programme impact?
2. What kind of motivation package(s) is likely to help build infrastructures needed to sustain further dissemination of the programme?

It is clear from this list of core questions that the direction of health promotion efforts can not stop at finding out what works for whom and how. It has to charge forward into the complex reality of by whom. Why do staff members as well as the organizations want to incorporate those effective programmes into routine services? From the vantage point of a government designated fund, the HCPF Committee is committed to finding out the best technology and strategies involved in sustaining the best programmes developed and implemented in the wider community in order to derive the greatest benefit possible for the community.

### **Corresponding Strategies for Proposal Preparation**

To be able to address these questions adequately as one prepares future proposals to the HCPF, certain corresponding strategies will be central. It is important that one should begin such efforts with dissemination in mind. Budgeting in “motivation packages” through re-prioritising staff and service infrastructures as well as community networks to ensure a better sustained benefit of the proposed programme will be one of the key considerations. More specifically, these strategies may include:

#### **Reach**

1. Use a multiple channel, multi-stage plan of recruitment of target population.
2. Funding elements may include those addressing reduction of participation barriers.

#### **Effectiveness**

1. Consider examples of stepped care approaches or intervention tailoring methods.
2. Funding elements may include adverse outcome evaluation and cost-benefit analysis

#### **Adoption**

1. In the case of multi-site applicants, it is important to build-up profiles of settings known to have contact with the target population as potential adoption settings.
2. Funding elements may include cost of adoption, i.e., staff willingness, service re-prioritisation (or customisation of intervention) and staff-community network capacity enhancement.

#### **Implementation**

1. Consider widening of delivery agents (staff, lay persons or combinations of staff-lay partnerships etc.) and process (automating all or part of the Programme)

- with training and supportive supervision of lay partners.
2. Funding elements may include mechanisms of providing feedback and recognition for adherence to implementation.

### **Maintenance**

1. Taking into consideration status of existing community efforts including natural environment and natural helpers in the maintenance of the desired behavioral changes.
2. Exploration of multiple funding sources to support follow-up assessments of characteristics of successes at both the individual and setting levels.

To advance towards the above vision, the HCPF will have to incorporate into its roles that of a regional clearinghouse of successful health promotion programmes. This will include, among other priorities, that systematic effort will be invested in linking successful community practices with university research teams, and that isolated initiatives from the private sector will have to be bridged with that of the public sector. Above all, until all the stakeholders are setting sight on transforming their current capacities into facilitative resources and infrastructures necessary for a longer-term implementation of effective programmes can we expect that the spirit of health promotion will take root in the community of Hong Kong.

### **Reference**

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Solomon, S., Kington, R. (2002). National efforts to promote behavior-change research: Views from the Office of Behavioral and Social Sciences Research. *Health Education Research*, 17, 495-499.

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## 程序 Programme

時間	節目	演講者
13:00 - 14:00	登記	
14:00 - 14:05	歡迎及致勉辭	衛生福利及食物局局長
14:05 - 14:25	健康護理及促進基金的成果與前瞻	李紹鴻教授
14:25 - 14:45	傑出計劃頒獎典禮	
14:45 - 16:00	傑出計劃分享論壇	嘉賓主持 - 車淑梅小姐
16:00 - 16:45	小休及海報觀賞	
16:45 - 17:05	香港健康促進最新發展	蔡遠寧博士
17:05 - 17:25	從成果開始計劃：成功的健康促進計劃的特性	陳清海博士
17:25	閉幕	
13:00 - 18:00	海報展覽	

Time	Event	Speaker
13:00 - 14:00	Registration	
14:00 - 14:05	Welcome and Opening	Secretary for Health, Welfare and Food
14:05 - 14:25	HCPF: Achievements and Way Forward	Prof. Shiu-hung LEE
14:25 - 14:45	Outstanding Projects Award Ceremony	
14:45 - 16:00	Outstanding Projects Presentation and Discussion	Guest Moderator - Ms. Candy CHEA
16:00 - 16:45	Coffee Break and Poster Viewing	
16:45 - 17:05	Latest Developments in Health Promotion in Hong Kong	Dr. Ray Yuen-ling CHOY
17:05 - 17:25	Beginning with Dissemination in Mind: Characters of Successful Health Promotion Programmes	Dr. Charles Ching-hai CHAN
17:25	Adjourn	
13:00 - 18:00	Poster Exhibition	




## 展覽計劃名單

### List of Exhibited Project

 傑出健康推廣計劃 Outstanding Health Promotion Projects

 優異健康推廣計劃 Excellent Health Promotion Projects

### 健康生活方式 Healthy Lifestyle

海報編號 Poster No.	計劃編號 Project No.	計劃名稱 Project Title	主辦機構 Administering Institution
A1	110907	"Healthy Eating Schools" Health promoting schools project	United Christian Nethersole Community Health Service
A2	19050394	SHINE--- School and Home Involvement, Nutrition and Exercise programme for healthy lifestyle「家校健兒」計劃	United Christian Nethersole Community Health Service
A3	110912	High Fiber, Low Sugar, Low Fat - Smart New Generation 高纖，低糖，低脂 — 醒目新一代	Hong Kong East District Health Committee
 A4	112910	『活出健康人生計劃』 Live a healthy life	香港基督教播道會聯會中國基督教播道會康福堂白普理社區健康發展中心
 A5	116006	Haven of Hope Sheung Tak Community Health Development Centre	Haven of Hope Christian Service
 A6	118003	活得健康-新來港家庭社區健康網絡計劃 Leading a "Healthy Life" - New arrival families community health network a collaborating & coordinating community project with Caritas Medical Centre	香港小童群益會
A7	18040554	Colourful and Bright Fruits and Vegetables Project - Creating a supportive eating environment for our new generation	Centre for Health Education and Health Promotion, Faculty of Medicine, The Chinese University of Hong Kong
A8	18040804	‘Building Healthy Tuck Shops’ - Healthy Primary School Tuck Shop Programme, A participatory research approach	Hong Kong Council of Early Childhood Education & Services
A9	19050074	“我至型” 健康生活推廣計劃	社區藥物教育輔導會

A10	19050304	「五星健康五星家」之「健康生活模式」推廣	香港紅十字會醫護服務部
A11	115005	To promote Tai Chi as an exercise to enhance the health promotion aspect of osteoporosis	Department of Orthopaedics and Traumatology, The Chinese University of Hong Kong

### 兒童及青少年健康 Child and Youth Health

海報編號 Poster No.	計劃編號 Project No.	計劃名稱 Project Title	主辦機構 Administering Institution
B1	113001	Healthy child development project 健康孩子發展計劃	The Boys' & Girls' Clubs Association of Hong Kong (BGCA)
B2	115004	To assess the effectiveness of a nurse-led sexual health promotion project amongst HK adolescents	The Nethersole School of Nursing, The Chinese University of Hong Kong
B3	18040154	「真」健美大行動 - 身心健康區校推廣教育計劃	基督教靈實協會
B4	18040374	健康 fit 一世	香港宣教會白普理上水家庭中心
B5	18040564	Community Development Approach to create better health of our young generation within the settings of their daily life	Centre for Health Education and Health Promotion, Faculty of Medicine, The Chinese University of Hong Kong
B6	18040334	關「健」燃動力	香港青年協會杏花邨青年空間
B7	19050344	健康活力小種子計劃	香港宣教會白普理上水家庭中心
B8	18040844	School Health Promotion, Hong Kong East Cluster - "Roving Health Exhibition"	The Hong Kong Tuberculosis, Chest and Heart Diseases Association
B9	19050184	邁向健康人生路	心創作劇場
B10	19050324	「健康新營人」計劃	香港遊樂場協會賽馬會青衣青少年綜合服務中心

### 精神健康 Mental Health

海報編號 Poster No.	計劃編號 Project No.	計劃名稱 Project Title	主辦機構 Administering Institution
C1	111903	青少年 EQ 培訓計劃 (EQ Training Project)	香港小童群益會
C2	111904	I Am the Master: cognitive-behavioural therapeutic	The Boys' & Girls' Clubs Association of Hong Kong

		groups for ADHD children and their parents 我是我的指揮計劃	
C3	113005	Defeat Depression Project (Basic Programme, Part 2 & 3)	Institute of Mental Health, Castle Peak Hospital
C4	113006	The development of a comprehensive self-help kit for carers in care of demented elderly person at home in HK	St. James' Settlement
C5	113008	銀杏－癡呆(失智)症網上資源中心 <a href="http://www.ginkgogroup.org">http://www.ginkgogroup.org</a> Meeting challenges in an information age: A web-based resource center for dementia care	香港理工大學醫療及社會科學院遙距醫護中心
C6	118001	青少年樂觀感培育計劃 Promoting optimism in adolescents & their parents	香港神託會
C7	18040464	「四輪展蔚藍」——心理健康生活朋輩教育促進計劃	自強協會
C8	18040504	精神病康復者聯同中學生齊參與促進精神健康計劃 Empowerment of Rehabilitated Mentally-ill Clients to promote Mental Health to Secondary School Students	葵涌醫院職業治療部
C9	18040534	「彩虹行動」— 關注精神健康社區推廣計劃	香港聖公會麥理浩夫人中心
C10	18040784	青少年精神健康社區支援計劃 Project Sun - A Support & Understanding adolescent mental health care Net	明愛醫院
C11	19050134	健康紅企業 - 提倡工作間的精神健康	香港心理衛生會

### 婦女健康 Women' s Health

海報編號 Poster No.	計劃編號 Project No.	計劃名稱 Project Title	主辦機構 Administering Institution
D1	113009	婦女健康檢閱 Women' s Health Monitor	香港基督教女青年會婦女事工部
D2	18040144	「健康就是美」婦女健康計劃	香港基督教女青年會婦女事工部
D3	116013	Health promotion project for	Hong Kong Federation of

		housewives in community	Women's Centres (HKFWC)
D4	198103	「生殖與性健康」運動 Sexual and reproductive health publicity campaign	香港家庭計劃指導會
D5	114003	Healthy Women in the Millennium	Haven of Hope Christian Service
D6	19050464	Post-menopausal women walk towards a healthy life 婦女健骨步更年	Department of Orthopaedics and Traumatology, The Chinese University of Hong Kong

### 控煙 Tobacco Control

海報編號 Poster No.	計劃編號 Project No.	計劃名稱 Project Title	主辦機構 Administering Institution
E1	111909	"Clearing the Smoke":The quest for truth about cigarettes - A pilot multimedia anti-smoking programme for English Schools Foundation (ESF) & International Secondary Schools	Life Education Activity Programme (LEAP)
E2	112901	無煙新一代月刊 “The fresh touch II” monthly newsletter programme	無煙健康行動協會
E3	19050014	Project “ASEG” (Anti-Smoking Electronic Game)	Action on Smoking or Health
E4	19050264	「無煙社區・樂業安居」計劃	無煙健康行動協會
E5	112912	Establishment of a pilot anti-smoking telephone hotline for persons who want to quit or to ask questions about smoking and health	Department of Community Medicine, School of Public Health, The University of Hong Kong
E6	18040084	Youth Quitline: An accessible telephone-based smoking cessation hotline for youth	Department of Nursing Studies, The University of Hong Kong
E7	19050504	Promoting women’ s health: A gender specific smoking cessation Programme for female smokers in Hong Kong	Department of Nursing Studies, The University of Hong Kong

### 疾病預防及控制 Disease Prevention and Control

海報編號 Poster No.	計劃編號 Project No.	計劃名稱 Project Title	主辦機構 Administering Institution
F1	116001	Awareness & management of indoor air quality in hospitals	Department of Manufacturing Engineering and Engineering Management, City University of Hong Kong
F2	117009	童樂同行 Community Coordinated Care for Children with Chronic Illness (5C project)	香港小童群益會
F3	198101	Video production for education in Diabetes Mellitus	Diabetes Hongkong
F4	19050314	運動保方—糖尿篇	香港仔街坊福利會社會服務中心

F5	19050374	From Safety Home to Safety Community: Prevention and Education Project of Occupational Safety and Health (OSH) for Domestic Workers and Unpaid Homemakers	The Hong Kong Federation of Women's Centres (HKFWC)
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### 長者健康 Elderly Health

海報編號 Poster No.	計劃編號 Project No.	計劃名稱 Project Title	主辦機構 Administering Institution
G1	110905	Active living - the way to healthy ageing	CUHK-WHO Collaborating Centre for Sports Medicine and Health Promotion
G2	112907	健康新生活	香港仔街坊福利會社會服務中心
G3	114007	Healthy Elderly into the 21st Century (健康長者新紀元)	香港傷健協會赤柱石澳長者鄰舍中心
G4	115006	A reminiscence project: Revitalizing lives of community-dwelling older adults	Department of Rehabilitation Sciences, The Hong Kong Polytechnic University
G5	18040284	An Intergenerational Reminiscence Project for older people with early dementia	Department of Rehabilitation Sciences, The Hong Kong Polytechnic University
G6	117005	Golden Twilight Years - elderly mental health promotion programme 豐盛晚年 - 長者心理健康推廣計劃	The Mental Health Association of Hong Kong
G7	18040404	同行松柏路—弱智人士老年健康計劃	基督教懷智服務處
G8	18040434	『心裡陽光耀晚晴』長者精神健康計劃 Sun Shine in the Heart, Lit up the Life of the Elderly	鄰舍輔導會
G9	18040514	「長青康健共一家」社區健康促進計劃	香港聖公會麥理浩夫人中心

## 展覽計劃摘要

Abstracts of Exhibited Projects

傑出健康推廣計劃 Outstanding Health Promotion Projects

海報編號：A6

計劃編號: 118003

計劃名稱: 活得健康-新來港家庭社區健康網絡計劃

Leading a "Healthy Life" - New arrival families community health network a collaborating & coordinating community project with Caritas Medical Centre

主辦機構: 香港小童群益會

協辦機構：明愛醫院

計劃成員：傅淑賢、梁禮賢、林惠玲、雷煥琴、陳惠卿

計劃開始及完成日期： 4/2003 至 1/2005

### 計劃背景:

新來港家庭成員由內地移居香港，面對不少因生活轉變而產生的適應問題和障礙，從個人身心、以至家庭關係及社區環境，均需要很大的調節和適應；自 03 年 4 月起，香港小童群益會承蒙「健康護理及促進基金」資助，與香港明愛醫院合辦「活得健康-新來港家庭社區健康網絡計劃」。是項計劃透過跨專業的合作，為深水埗社區內新來港人士提供生理及心理健康的發展性服務，以提升生理及心理健康的關注和意識；並透過義工的參與，為新來港人士建立以社區為本的身心健康網絡。

### 活動及推行大綱:

#### 活動設計焦點:

1. 新來港人士個人健康及社會心理健康提升:
  - 1.1 生理健康層面的活動: 生理健康講座、精神健康工作坊
  - 1.2 心理健康層面的活動: 家庭生活教育講座、家庭生活教育工作坊及自助小組
  - 1.3 家庭綜合諮詢
2. 新來港人士個人與社區之連繫:
  - 2.1 參觀健康資源、健康大使訓練及健康大使義工服務
  - 2.2 家庭生活教育戶外活動

### 3. 社區推廣及倡議:

3.1 健康知識刊物: 出版健康動力

3.2 社區健康教育日

3.3 啓動禮及社區論壇

### **計劃之延續性:**

醫療服務資源於社區成功建立了網絡，可更持續及滲透地在社區提供有關社區健康促進及疾病預防的工作。如於二零零五年藉著深水埗區議會的贊助與健康及安全社區工作小組的全力支持，推行了有營生活全接觸之全區性計劃。

### **嘉許重點**

- 這計劃有效地協助新來港人士適應本港的醫療制度，並大大提升他們對生理及心理健康的關注和意識。
- 透過跨專業合作，主辦機構成功建立社區網絡，並繼續以伙伴模式推行社區健康計劃。
- 計劃的概念得以延續，並成爲主辦機構的恆常服務。

**Poster No.:** A11

**Project No.:** 115005

**Project Title:** To Promote Tai Chi as an exercise to enhance the health promotion aspect of osteoporosis

**Administering Institution:** Department of Orthopaedics and Traumatology, The Chinese University of Hong Kong

**Co-organiser(s):** School of Human Kinetics, Faculty of Health Science, University of Ottawa

Department of Sports Science & Physical Education, The Chinese University of Hong Kong

Department of Community & Family Medicine, The Chinese University of Hong Kong

**Project Team Members:** Chan KM, Qin L, Li JX, Hong YL, Lau E, Woo J

**Project Commencement Date and End Date:** 1/1/2002 to 28/2/2005

**Purposes / Objectives:**

To raise the awareness of the beneficial effects of Tai Chi as a regular exercise for elderly;  
To design a set of Tai Chi exercise suitable for elderly;  
To promote Tai Chi in the elderly population by organizing courses and promoting peer support.

**Activities/Programmes:**

A pilot study was conducted to identify the most suitable set of Tai Chi for the elderly. The identified 24 Yang' s style Tai Chi and the 8 style Yan Chai' s Tai Chi were then promoted in a 3-month course in the elderly centres and homes for the aged in Phase I and Phase II of the project respectively. Health passport was used to record the progress and degree of participation of elderly. An educational VCD on the simplified Tai Chi was also produced for distribution to elderly and volunteers. Six health promotion talks and 9 workshops on exercise and osteoporosis, elderly exercise and health, exercise and fall prevention, osteoporosis and fall prevention were held. A study was also conducted to examine the beneficial effects of Tai Chi on both physical and psychological health of elderly. A presentation ceremony was held at the end of the programme to appreciate and recognize the efforts of elderly participants and volunteers.

**Targets/Recipients:**

Recipients were elderly from elderly centers and homes for the aged in Hong Kong.

**Expected and Actual Attendance/Participation:**

500 elderly aged 53 to 92 were expected to participate in this project. The actual number was 867, with 27 elderly in the pilot study, 481 elderly in Phase I and 359 elderly in Phase II, respectively.

**Benefits Derived:**

The project was effective in 1) raising the awareness of the beneficial effects of regular practice of Tai Chi; 2) improving the physical and psychological health of elderly who practiced Tai Chi regularly; Elderly scored higher in Physical Functioning, General Health, Social Functioning and Role-Emotional in the SF-36 quality of life questionnaire and they also scored significantly higher in upper body strength, lower body strength and lower body flexibility after practicing Tai Chi for 3 months; 3) developing a set of simplified Tai Chi and producing a VCD for easy practice by the elderly.

**Extent of Objectives Achieved:**

We have achieved all the objectives of the project. We have successfully developed a set of simplified Tai Chi exercise for easy practice by elderly and has shown the beneficial effects of Tai Chi in improving the physical functioning and quality of life of elderly. Through the VCD, the exercise programme, the health promotion talks and workshops as well as the presentation ceremony, we have successfully arouse the interest and awareness of the community to the impact of osteoporosis and the beneficial effect of Tai Chi to the general health. Together with the VCD, trained volunteers can further promote the exercise to the other elderly in the community.

**Conclusions/Implications:**

Tai Chi as a regular exercise, was found to have beneficial effects on elderly' s health. By keeping the elderly exercise regularly, it is hoped that the escalating medical cost due to ageing of population can be alleviated. The 8 style Yan Chai' s Tai Chi, being simpler and easier for the elderly to learn, should thus be given the first priority to be promoted in elderly centers and old aged homes.

**Key Outstanding Points**

- A simplified version of Tai Chi has been developed and widely adopted by the community.
- Through promoting regular practice of Tai Chi in the elderly, the project successfully addressed the growing health needs of the ageing population.
- The project is a good example of public health promotion by academic leadership supported by research evidence of effectiveness.

**海報編號：**C1

**計劃編號：**111903

**計劃名稱：**青少年 EQ 培訓計劃 (EQ Training Project)

**主辦機構：**香港小童群益會

**計劃成員：**楊錫豪、趙振雄、李志強、關世德、何錦屏、陳美好、覃彩霞、鄧桂珊、葉頌芯、鄭小顏、洪藝菁、張映紅、王耀明、梁偉蓮、黃維蔭、何合寬、祝麗儀、曹婉文、胡妙芳、陳美娟、莫景輝、溫慧玲、湯文蕙、葉瑞芬

**計劃開始及完成日期：**1/10/2000 至 31/5/2003

**目的／目標：**提升兒童參加者的自尊心和自我控制能力。

**活動／推行大綱：**

衛生署「學生健康服務」的心理社交評估，能辨識自我形象低落及有行為問題的學生。本計劃遂設計「天生我才」小組，針對自我形象低落的學生，提升其自尊心；「我是我的小主人」小組，針對有行為問題的學生，提升其自我控制能力。

**對象／受惠者：**衛生署「學生健康服務」辨識自我形象低落或有行為問題的小學生

**預期及實際受惠人數：**預計 1,200 人，實際服務了 1,259 人

**效益：**

參加者經「天生我才」小組輔導後，他們的自尊水平明顯提高，精神健康有顯著的改善。「我是我的小主人」小組雖欠科學化評估，但負責的社工均認為有助提升自我控制能力。

已達成的目標：服務了 1,259 名學童，出版了成效評估研究和程序資料套。

**總結／影響：**

2002 年 2 月，衛生署、社會福利署、和教育署共同推出一套新的轉介系統，轉介經「學生健康服務」辨識有輔導需要的學生往其所屬中、小學的駐校輔導人員或其他社會服務機構。新轉介系統運作良好，口碑不俗，約七成用家對它表示滿意。

**鳴謝：**浸會大學社會工作系吳日嵐博士為本計劃進行成效評估研究

**嘉許重點**

- 這計劃對政府現有的學生健康普查服務有著重要及革新的影响。
- 主辦機構採用有效的轉介策略及經過多年的努力，成功聯合了政府部門、學校及地區家庭服務中心，為自我形象低落及有行為問題的學童提供輔導，改善他們的心理素質。
- 由於這計劃的成效甚佳及反應熱烈，主辦機構不斷擴充服務，並將此納入為各間中心的恆常服務，成為可持續運作的健康促進計劃。

**Poster No.:** C3

**Project No.:** 113005

**Project Title:** Defeat Depression Project (Basic Programme, Part 2 and 3)

**Administering Institution:** Institute of Mental Health, Castle Peak Hospital

**Project Team Members:** Leung EY, Cheung HK, Defeat Depression Project Team

**Project Commencement Date and End Date:** 2000 to 2002

#### Introduction

The Defeat Depression Project is a three-year mental health educational project which focused on general aspects of depression, depression in specific age groups (e.g. children, adolescents, elderly) and in at-risk situations (e.g. postpartum period, unemployment, family problems). The funded programme formed a crucial part of this multi-disciplinary and multi-media project.

#### Goals of the Programme

The Basic Programme focused on community education. In a pre-Project community survey showed that 40% of the general public had depressive experience but knew very little about depression as a treatable illness, and did not seek treatment. The funded programme aimed to (1) enhance awareness about depression and its potential tragic consequences; (2) provide knowledge about the effective treatment methods; (3) encourage sufferers and their families to seek help at an early stage; (4) reduce stigmatization; (5) reduce the risk of depression related suicides or tragic homicide-suicides; and (6) introduce the concepts of positive coping and positive lifestyle. The target recipients were the general public, patients, families, and professional carers of the New Territories West.

#### Key Activities

The key activities included

Educational Activities – Two large-scale community roadshows were held in Tin Shui Wai and Sheung Shui. This promoted better knowledge on the symptoms of depression at different age groups and high-risk populations.

Audio-visual Educational Products:

- (a) A train-the-trainer Depression Education Kit with CD-ROM teaching materials for conducting community mental health education on depression.
- (b) 10,000 copies of a Depression VCD which contained case vignettes about depression as a treatable illness.

(c) A board game set ‘開心 FUN’ was designed for promoting positive thinking and adaptive coping in hypothetical adverse life situations.

(d) Continuing Medical Education Kit for General Practitioners on the Management of Depressive Illnesses.

Patient Worker Scheme – Patients as paid workers and Defeat Depression Ambassadors in the educational and promotional activities.

Internet Webpage – Design and development of Internet webpage to disseminate information on depression to readers in Hong Kong and the Chinese community worldwide.

### Summary of Achievements

The programmes raised public awareness toward depression and facilitated collaboration with family doctors in early identification and management of depression. The audio-visual products were used in a series of community mental health education and professional training. Coupled with the extension programme funded by other sources, the Defeat Depression Project gained recognition in Hong Kong, and internationally, as the runner-up in the Community Service Project or Programme category of the Asian Hospital Management Awards 2002. Post-Project survey results showed better public awareness of depression as a treatable illness and greater readiness to seek professional help. This Project laid the blueprint for fighting depression, which was projected by the World Health Organization as the leading cause of disability by 2020.

### Key Outstanding Points

- The project topic has addressed the Government’s call to mental health promotion.
- This project is a successful model to advocate mental health to the public by community and professional education. It has significantly raised public awareness towards depression.
- The project was subsequently elaborated into a more comprehensive and sustainable programme by the administering institution in educating the public and medical profession on depression.

**海報編號：**C5

**計劃編號：**113008

**計劃名稱：**銀杏－癡呆(失智)症網上資源中心 <http://www.ginkgogroup.org>  
Meeting challenges in an information age: A web-based resource center for dementia care

**主辦機構：**香港理工大學醫療及社會科學院遙距醫護中心

**計劃成員：**賴錦玉、鍾貞貞、周紹基、楊漢明、黃麗芬

**計劃開始及完成日期：**1/2001 至 1/2002

**目的：**建立一個電子資源中心，為公眾及醫護人員提供健康教育，促進癡呆症患者及照顧者的健康。

**推行大綱：** 一群來自大專院校或護理機構的醫生、護士、職業治療師、藥劑師、社工、軟件工程師和義工，在 1999 年夏季成立了「銀杏小組」。網站從用家的角度設計，經反覆測試，銀杏網站在 2001 年 9 月正式推出。至今，網站仍繼續運作。

**對象：** 癡呆(失智)患者及其家人、醫療服務專業人士、公眾人士。

**實際參與人數：**直至 2006 年 4 月 7 日，瀏覽者共有 280,608 人次; 公開論壇則有 154 位註冊會員及 185 條訊息，瀏覽者共 31,597 人次。

**效益：** (1) 患者支援：患者及家人表示網站的資料有幫助。  
醫護人員的教育：教育各專業如護士、社工、職業治療師的媒體。  
為公眾提供資訊：每月均有一至兩位市民致電或電郵查詢有關資料。

**已達成的目標：** 有效地建立了一個本港癡呆症服務資料庫和專業人士的支援網絡

**成績：** 榮獲：-

由 Honor Society of Nursing Sigma Theta Tau International 頒發的 International Information Technology Award 2001 (Computer-Based Public Education 組);  
2004 年由 Internet Professionals Association, Hong Kong 頒發的 Web Care Award - Primary Level Accessibility.

**推廣：** 在本港、內地及不同國家等均曾推廣銀杏。

**目前狀況：** 銀杏網站已成為理工大學遙距醫護中心的一部份。銀杏亦超連結至護理學院及衛生署健康地帶等網頁。

**日後發展：** 繼續完善網站。香港復康會社區復康網絡、聖雅各福群會、香港老年癡呆症協會將會繼續與銀杏小組合作，開發為患者家庭而設的網上工作坊。

**總結：** 資訊科技的發展一日千里，與日常生活有著非常密切的關係。銀杏正是借助資訊科技，建立一個無界限的癡呆症健康教育服務。

**鳴謝：** 此先導計劃第一階段由健康護理及促進基金贊助，第二階段由香港理工大學醫療及社會科學院院長署備及香港理工大學中央研究補助金贊助。

#### **嘉許重點**

- 結合不同專業團體所長，利用資訊科技提供專業及高質素的護理知識予癡呆(失智)症患者與其照顧者、醫護人士及善羅大眾，概念創新、成效甚高。
- 主辦機構對促進精神健康投入了持久的支持，在護理癡呆(失智)症患者方面累積了不少知識與經驗。網站至今仍繼續運作，不斷更新內容。除了本港人士，網站更為內地及海外人士使用，接觸人群廣泛。

**海報編號：**D4

**計劃編號：**198103

**計劃名稱：**「生殖與性健康」運動

Sexual and reproductive health publicity campaign

**主辦機構：**香港家庭計劃指導會

**計劃成員：**范瑩孫

**計劃開始及完成日期：**1/3/1999 至 31/10/1999

國際社會在二十世紀九十年代首次提出促進人類的「性與生殖健康」，作為全球人口發展、改善生活素質的重要關鍵。「性與生殖健康」是一個新生的概念，家計會遂在 1999 年，向市民推出「生殖與性健康」教育運動。

該運動首先以青少年性健康、懷孕生育、家庭計劃，及婦女保健為主題，共接觸一萬三千多名市民。其後，更陸續推出不同課題的「性與生殖健康」公眾教育，並配合新增服務，針對市民不同的需要，其中包括：

開辦「更年期診所」及更年期教育活動 (1999)；

每年定期宣傳子宮頸抹片檢查 (2000)，設立子宮頸病診所 (2003)；

舉辦「緊急避孕宣傳運動」 (2001)；

提倡男性保健，開設全港首間「男性保健診所」及「青少男保健服務」(2001-2002)；

首辦性與生殖健康工作坊，及後開展「婚姻與性成長輔導」、「戀愛工作坊」等服務 (2002)；

開展小學性教育，並發展大量家長、兒童、青少年以至準婚人士的性教育資源 (2002)；

舉辦「關注不育運動」，與屯門醫院推出生育轉介服務，並推出新服務，協助不能順利進行性行為的新婚夫婦(2003)；

與香港理遺學會合辦「關注女性尿失禁教育活動」；

開設骨質疏鬆診所，推出全港首個為男士量度骨質密度的服務(2004)。

今天，港人對「性與生殖健康」的保健意識日漸提高，至於生育問題、更年期、骨骼保健、男性健康、夫妻性生活協調、兒童性教育等，亦獲得廣泛的重視。家計會會繼續向市民進行推廣教育，期望每一位市民都能享有優質健康的生活。

### 嘉許重點

- 這計劃的主題正好針對本港不斷增加的性病個案及青少年對生殖與性健康教育的需求。
- 活動多元化，針對不同對象的需要，吸引受益者參與，成功推廣健康及預防疾病。
- 活動的資料豐富及質素甚高，內容專業又為普羅大眾所容易理解。

Poster No. : E5

Project No. : 112912

Project Title: **Establishment of a pilot anti-smoking telephone hotline for persons who want to quit or to ask question about smoking and health**

**Administering Institution:** Department of Community Medicine, School of Public Health, The University of Hong Kong

Co-organiser(s): Department of Nursing Studies, The University of Hong Kong

Project Team Members: **Abdullah ASM, Lam TH, Hedley AJ, Chan SSC**

**Project Commencement Date and End Date:** 13/12/2000 to 31/5/2002

**Purposes/Objectives:** (1) to run a *Quitline* to support quitting and to publicise smoking cessation, (2) to provide a telephone line based information and referral service centre on smoking and health, (3) to motivate and support both smokers and their families towards quitting smoking, (4) to provide direct advice and support to smokers and others concerned about smoking, and (5) to evaluate the effectiveness of such service.

**Activities/Programmes:** The *Quitline* was operated from December 2000 to May 2002 for 38 hours per week, from 2 to 8 pm on weekdays, and 10am to 6 pm on Saturdays. It was publicized through press conference, media reports, pamphlets, and posters. Trained smoking cessation counselors provided stage-matched counseling to smokers using a structured protocol. Telephone follow-up were conducted at 1 month for smokers and 6 months for both smokers and non-smokers, after the initial contact.

**Targets/Recipients:** **The main targets were all smokers who want to quit and others who want to seek information about smoking and health**

**Expected and Actual Attendance/Participation:** The *Quitline* expected to receive 9,000 calls, with 810 calls are from smokers. As of May 2002, we received 5,554 calls, of whom 1,120 (20%) were smokers who had completed initial assessment and received telephone counseling. 59% smokers and 62% non-smokers were successfully followed up at 6 months.

**Benefits Derived:** The *Quitline* has generated awareness about smoking cessation in the public and the quit rate at 6 months was 20%. Non-smokers who called the *quitline* received information to help others quit or reduce smoking. The success of the *Quitline* can

be used as a low cost model of service delivery for the health care system in Hong Kong.

**Extent of Objectives Achieved:** We achieved all the stated objectives including: (1) raised awareness among the public in Hong Kong; (2) provided health and quit smoking information to the callers and referred smokers to other services as necessary; (3) encouraged smokers to quit, reduce cigarettes smoked, move to a higher stage of readiness to quit, and helped non-smokers to encourage others to quit; (4) provided counselling to smokers and information to non-smokers; (5) evaluated the effectiveness and cost-effectiveness of the Quitline.

**Conclusions/Implications:** The *Quitline* demonstrated effectiveness in promoting smoking cessation, and both callers and counsellors were satisfied with the service. The feasibility and effectiveness of this *Quitline* suggested the development of this approach to be a major component of smoking cessation services in Hong Kong. The number of calls increased within a few days after publicity appeared in the mass media, and then fell to a low level, indicating that frequent publicity is needed. Publicity should also target non-smokers so that they can act as catalysts to encourage others to quit smoking. Lastly, based on what we have learnt and the gaps identified from this project, we have started a pilot Youth Quitline targeting youth smokers aged 12-25 years since August 2005. Quitlines are now run by the Department of Health and the Hospital Authority. A paper has been published in an international journal to share our results with the international tobacco control community.

**Acknowledgment:** We thank the Hong Kong Council on Smoking and Health for promoting the quitline, the smoking cessation counselors, and Pharmacia & Upjohn and Novartis for producing some publicity materials.

#### **Key Outstanding Points**

- The hotline provided an effective channel for smokers to obtain advice to quit smoking.
- The project provided pioneering service for smoking cessation, which has become a key component of tobacco control policies in Hong Kong.
- Utilising the strengths of the administering institution, the results of the project were scientifically evaluated and its success shared with the international tobacco control community.

海報編號：G2

計劃編號：112907

計劃名稱：健康新生活

主辦機構：香港仔街坊福利會社會服務中心

計劃成員：吳偉明

計劃開始及完成日期：1/4/2000 至 30/9/2002

「健康新生活」是一項由香港仔街坊福利會社會服務中心主辦的大型社區健康推廣計劃，為期共 30 個月。計劃受惠者為南區長者和坊眾，而計劃的成員包括社工、物理治療師、研究員、義工小組及顧問委員會。

計劃的主要目標是**重整長者的生活模式**，以改善長者在生理、心理、社交及體能各方面的健康狀況。至於計劃的主要內容包括「**健康多面體**」巡迴展、「**長者健康資源及健體閣**」、「**健康新生活**」**健康重整計劃**及「**成效發佈會**」等四項主要活動。四項活動的實際參與人次達 30,299。至於成效方面，是項計劃為 150 位長者提供了提升全面健康療程前後的健康評估，以及為期一年的健康療程；結果發現整個計劃對全體參加者的各方面健康及建立健康生活模式均有顯著的成效。其中尤以身體健康、自我照顧知識及健康行為方面的成效最大。

此外，計劃之各項介入活動中，以義工服務及監察活動的成效最大和最廣。其後，透過出版成效研究報告書和舉辦研討會暨工作坊，結果反應熱烈，引起全港醫護和福利界的專業人士，以及地區領袖對提升長者全面健康的關注。

最後謹在此多謝本會「健康新生活」顧問委員會的全力支持。

#### 嘉許重點

- 這個促進長者健康的計劃由地區組織發起，結合專業人士、社工及學術界的力量來推行，並就成效進行了有系統的評估。
- 計劃的活動全面，內容豐富，而活動的教材質素甚高，吸引長者參加，讓他們重整健康的生活模式。
- 部份項目已成為主辦機構的恆常服務。

**Poster No.:** A1

**Project No.:** 110907

**Project Title:** "Healthy Eating Schools" Health promoting schools project

**Administering Institution:** United Christian Nethersole Community Health Service

**Project Team Members:** Tang J, Ma M

**Project Commencement Date and End Date:** 1/9/1999 to 31/7/2001

The "Healthy Eating Schools" Health Promoting Schools Project (HCPF #110907) was conducted from October 1999 through January 2001 with the goal of enabling primary school children to select healthy food choices at schools. Food tasting, theme talks, hands-on activities related to healthy snacks, lunches, cooking and meal planning were implemented. The entire school community (students, parents, teachers and staff) participated in the project. Attendance was compulsory as all student activities took place during school hours.

The programme was able to provide nutrition education to students, teachers and parents, and made recommendations for tuck shop managers and school lunch caterers to improve the nutritional quality of the foods sold in the school. Nutrition education activities on 4 main themes - food pyramid, fruit and vegetable consumption, healthy snacks and drinks for students, and healthy cooking and menu planning for parents. These activities include theme talks/workshops, cooking demonstration, food tasting, display boards, games and newsletter distribution.

Eight focus groups with 10 students/group were conducted to assess programme outcome in 2 primary schools with students from P3 to P6. The objective was to determine their favourite tuck shop food items and their acceptability of healthier choices. Favourite snacks were found to be potato chips, hot dogs and instant noodles. Taste is the most important factor in determining food choices while price is second. When healthier alternatives (such as fresh fruits, crackers and no-sugar-added fruit juices) were offered, they were only moderately accepted. Some students said they prefer to eat fruits at home while others commented that fruits are for after dinner and not eaten as a snack. Although many students agreed that eating nutritious foods improves health, some are reluctant to eat healthier foods and citing "poor taste" as the major deterrent. Student and parent surveys were conducted prior to and after intervention activities. As a result, there is an improvement in nutrition knowledge among the students but not the parents.

Effective school-based programs need to address motivation of students and parents to elicit long term behavioural change. More intensive Programmes targeting subjects of need may result in better results. For example, with increasing obesity rates among HK primary school students, a school-based Programme for overweight children and their caretakers may be initiated. Education messages should also be very simple and specific and highly focused on targeted behaviours.

Poster No.: A2

Project No.: 19050394

**Project Title:** SHINE--- School and Home Involvement, Nutrition and Exercise programme for healthy lifestyle 「家校健兒」計劃

**Administering Institution:** United Christian Nethersole Community Health Service

**Project Team Members:** Tang J, Ma M, Lau D, Ip J

**Project Commencement Date and End Date:** 1/4/2006 to 30/8/2007

Childhood obesity has become a public health problem in Hong Kong in the past decade, with increased risks of diabetes mellitus and cardiovascular disease in later life. The aim of this project is to manage the problem of childhood obesity using a school-based support group intervention targeting Primary 3-5 students, their parents and teachers in 4 primary schools.

The objectives are to increase healthy eating habits based on the healthy eating pyramid concept, increase physical activity and physical fitness, reduce weight for height percentile for overweight children, increase parent and children's ability to make healthy eating and physical activity choices and to enhance teacher and parents' abilities to promote healthy lifestyle for the management of obesity in the school setting.

The interventions will take into account, after assessment of, both personal lifestyles of the children and the school environment. Healthy lifestyle support groups will be organised for children with less healthy lifestyle, together with their parents. These groups will start with a 1 hour individual diet and fitness consultation by registered dietitian and physiotherapist, followed by 12 weekly 1-hour sessions for parents covering healthy eating themes; 5 twice-weekly sessions for children covering healthy eating; and 12 weekly 1.5-hour sessions for children to encourage physical activity through fun exercise and games. A Train-the-Trainers programme will be established for teachers and parents for the prevention and management of obesity in schools.

Evaluation will be conducted by assessing changes pre and post programme on children's anthropometry, diet and physical activity habits, fitness measures, knowledge, attitude and behaviour change by questionnaire, observation of the support group and TOT programme, focus group of parents, teachers, school food caterers. In addition, attendance of activities and users' satisfaction will also be part of formal project evaluation.

**Poster No.:** A3

**Project No.:** 110912

**Project Title:** High Fiber, Low Sugar, Low Fat - Smart New Generation  
高纖，低糖，低脂 — 醒目新一代

**Administering Institution:** Hong Kong East District Health Committee

**Project Team Members:** Hong Kong East District Health Committee

**Project Commencement Date and End Date:** 1/3/1999 to 31/12/2000

### **Introduction**

The project was a 2-year healthy eating promotion programme which was launched in 1999 at Hong Kong East (HKE) by the Department of Health and the Health Promotion Working Group, Hong Kong East District Health Committee. The project aimed to empower the adolescents with the requisite knowledge, attitude and skills to adopt healthy eating, through health education conducted by youth leaders and workers of the voluntary organizations they joined. Youth workers and leaders of over 41 youth centres, social centres, uniforms organizations and religious organizations in HKE were recruited in the project.

### **The Project**

The project consisted of 2 main parts: a teaching kit and a training course.

A teaching kit was designed and produced for the youth workers and leaders. The kit contained self-explanatory guidelines and user-friendly materials for conducting 6 adolescent-appealing activities on nutrition education. The kit could be fitted in various programme designs. The youth worker either ran the 6 activities simultaneously in one session or in several consecutive sessions, or integrated the 6 activities into other health-related activities.

Two training courses were delivered by doctor, dietitian and nurses for the youth workers and leaders, who in turn used the teaching kit to organize nutrition promotion programmes for adolescents in 1999 and 2000. The training course included a healthy-eating-related talk and a teaching kit demonstration, which aimed to equip the leaders and workers with basic healthy eating concept and demonstrate how to use the kit content.

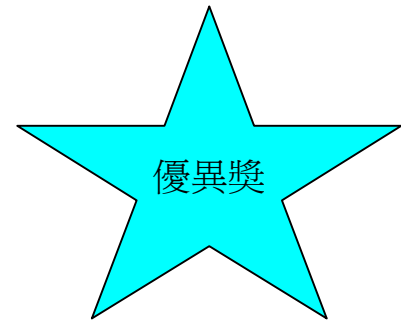
## **Result**

The training courses were conducted on 26 May 1999 and 29 Jan 2000. There were totally 96 attendants from 24 youth centers, 19 religion organizations, 2 schools and 9 uniform organizations. There were 94 reported activities run by youth workers and leaders, with more than 1,000 youth attendants.

Self-administered questionnaire was used to evaluate the knowledge gain, skill acquisition and attitude change of the participating adolescent in the project. The pre and post activity surveys showed an average of 11.6% gain over the 2-year period. The post-activity questionnaires showed that 90% of the attendants were having favorable attitudes towards adopting healthy eating patterns. Besides, positive verbal and written feedback of the activity conductors of the youth organizations indicated that the kit had helped the youths to gain healthy eating knowledge and skill.

## **Conclusion**

The project benefited more than 1,000 adolescents. The teaching kit was used by more than 70 organizations. The participants showed knowledge gain and maintained a highly favorable attitude towards high fiber, low sugar, low fat eating style. It was believed that the healthy eating message would be sustained by further use of the kit.



**海報編號:** A4

**計劃編號:** 112910

**計劃名稱:** 『活出健康人生計劃』  
Live a healthy life

**主辦機構:** 香港基督教播道會聯會中國基督教播道會康福堂白普理社區健康發展中心

**計劃成員:** 周藍恩、胡潔慧、陳巧雲、吳明、王洛欣

**計劃開始及完成日期:** 7/2000 至 3/2002

**計劃目的:**

讓沙田區居民了解『全人健康』—即身、心、社、靈健康的重要性，鼓勵社區人士活出一個健康、豐盛的人生。

**活動大綱:**

開展期: 『健康新人類』全港公開繪畫及攝影比賽、開幕典禮

兒童活動: 健康之旅、全腦學習法親子講座、牙齒保健日、預防兒童性侵犯講座

成人活動: 健康檢查、醫院探訪及關懷義工訓練、更年期適應講座、管教子女工作坊

青年活動: 健康檢查、挑戰自我訓練計劃、健康漫畫大搜查、關懷長者義工訓練

長者活動: 健康檢查、冬季進補食療講座、『做個精靈老人家』小組、懷舊之旅、懷舊薈萃、家居安全大行動

總結篇: 健康工作坊、小冊子、閉幕典禮

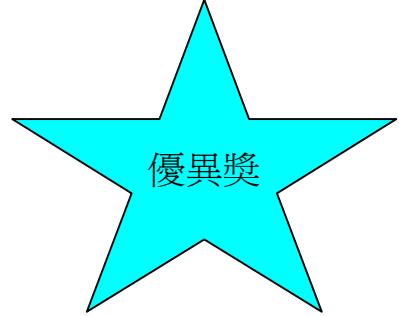
**服務人數:** 7712 人

**效益:**

經過兩年的活動後，參加者對健康的意識及警覺性有所提升。尤其是婦女，她們將健康訊息帶到家中，令家人的健康狀況亦見改善。

**總結:**

透過 20 多項的服務，社區人士無論對『全人健康』的認知層面，及對日常生活的健康意識及警覺都提高了。這些經驗有助他們加強推動力，令他們積極地在日活中，重新建立他們身心社靈健康。



**Poster No.:** A5

**Project No.:** 116006

**Project Title:** Haven of Hope Sheung Tak Community Health Development Centre

**Administering Institution:** Haven of Hope Christian Service

**Project Team Members:** Li MY, Ho J

**Project Commencement Date and End Date:** 7/2003 to 10/2004

**Purposes/ Objectives:**

To develop Tseung Kwan O into a “Healthy Community” ;  
To promote “Holistic Health” and to encourage residents’ participation;  
To develop “Caring Community” ; and  
To facilitate networking and collaboration among human service organizations.

**Activities/ Programmes:**

**【Health Promotion & Community Education Programmes】**

Promotion & education Programmes/projects on: “Healthy Food Choice” , “Know More About Asthma” , “Care for Your Family” , “Together We Combat SARS” , “Eating Vegetables and Fruits to Promote your Health” , “Women’ s Health Care” , “Protect Your Heart” , “30 Minutes Exercise Gives Us More Energy” , health promotion day camps for parents and students of healthy schools  
Health Talks on SARS prevention, prevention of infectious diseases, asthma, body fitness, stress management, exercise & health, and etc.  
Health Classes, such as yoga, martial arts, environmental friendly soap making, exercise with fit ball, weight lifting, and etc.  
Groups: parent-child volunteer group, women’ s health group, children groups on sex education and healthy diet.

**【Disease Prevention】**

Include: Health Check Service (measurement of height, body weight, body pressure, body fat, urine analysis for glucose and protein, blood test for cholesterol), Osteoporosis Screening Service, Health Check Day held in schools, and Influenza Vaccination Service

**Targets/ Recipients:** Residents of Tseung Kwan O South

**Expected & Actual Participation:**

	Target	Actual
Membership		
No. of family	450	355*
No. of individual	250	102
Health Class (No. of class/meeting/attendance)	6/22/440	18/73/728
Health Group (No. of group/meeting/attendance)	6/28/340	5/34/286
No. of drop-in	4400	7460
Health Talk (No. of attendance)	290	860
Health Screening (No. of attendance)	400	1887
Health Programme (No. of attendance)	1500	22350
Volunteer Group (No. of group/ attendance/volunteer participation-hr)	2/45/500	1/118/691.5
Publication- newsletter	6	7

\* The number of membership was below the target because reaching out strategy was adopted to serve the residents in the community who were not required to be centre members.

**Benefits Derived:**

The Project was set up at the right time as the outbreak of SARS has aroused public's concern around their own health and community health. The Project has also demonstrated its significance in disease prevention, health education and promotion in the community. It was able to promote healthy living style and better quality of life among the residents in Tseung Kwan O South.

**Extent of Objectives Achieved:**

Various kinds of health promotion and education Programmes, health screenings were launched with good response. The number of attendance has much exceeded the service target. The Centre has also established collaboration with 15 local organizations in developing Tseung Kwan O into a healthy community. The messages of early detection and prevention of diseases, healthy living style, community participation and family cohesion were transmitted throughout the Programmes.

**Conclusion/ Implications:**

Being the only centre rendering such a holistic health service and integrated social and health service network in South Tseung Kwan O, the Project has played an important role in building a healthy and caring community.

**Poster No.:** A7

**Project No.:** 18040554

**Project Title:** Colourful and Bright Fruits and Vegetables Project – Creating a supportive eating environment for our new generation

**Administering Institution:** Center for Health Education and Health Promotion, Faculty of Medicine, The Chinese University of Hong Kong

**Project Team Members:** Ho M, Lee A, Chow CB, Keung V, Yung T, Lee J

**Project Commencement Date and End Date:** 1/6/2005 to 30/11/2006

### **Objectives**

This pilot project embraces health promotion strategies to promote healthy eating in primary school children through a health promoting school approach. It aims to promote, protect and improve the health of primary school students in the context of a holistic healthy diet supportive environment by guiding the development of sustainable policy and environmental changes in schools so as to promote the consumption of fruits and vegetables in primary school students. The main objectives of the project are:

To increase schools' capacity to create a supportive environment that help students adopt the healthy eating habit;

To enhance the participants' overall awareness and enjoyment of having more fruits and vegetables and increase the consumption.

### **Activities/Programmes:**

The project adopts an integrated approach, entailing a comprehensive needs assessment, improving school eating policies and eating environment, providing training of teachers and parents, promoting the involvement of family and the community, along with a comprehensive nutrition education programme and the active participation of students.

The implementation plan consists of three different phases:

#### Readiness phase

In this phase, a thorough needs assessment has been conducted to collect baseline data related to fruits and vegetables consumption of the participants. In addition, train-the-trainer programme for teachers, student ambassadors and parent ambassadors have been conducted to empower them with skills in building a healthy eating environment at school and home.

#### Transformation phase

The transformation phase began with the Chartering Ceremony. Afterward, a series of

activities includes dietetics consultations and the reinforcement training for teachers, students and parents ambassadors have been conducted to support and guide schools to create a supportive environment. A series of interactive teaching materials has been delivered to participating schools to facilitate teacher in carrying out nutrition education in schools. Participating schools were encouraged to organise school-based healthy eating activities based on their needs.

#### Evaluation phase

The effects of the project will be evaluated by means of questionnaire survey, weight lunch program and focus group. The benefits bring along from the project will be shared to other schools during the Fruits and Vegetables Symposium.

#### **Targets**

About 20,000 students, parents and teachers from 10 primary schools in Hong Kong

#### **Expected Benefits Derived**

It is expected that through this pioneer project, participants can adopt a healthier lifestyle, in particular on consumption of fruits and vegetables. Furthermore, the deliverables of the project will become valuable resources and experiences for the benefits of potentially all primary schools in Hong Kong. The programme has been working in synergy with the EatSmart programme of Department of Health as key members of the team are also the core members of the programme.

**Poster No.:** A8

**Project No:** 18040804

**Project Title:** “Building Healthy Tuck Shops” - Healthy Primary School Tuck Shop Programme, A participatory research approach

**Administering Institution:** Hong Kong Council of Early Childhood Education & Services

**Project Team Members:** Chan L, Lam G

**Project Commencement Date and End Date:** 1/6/2005 to 31/5/2007

**Purposes:** The propose of this project is to conduct a series of needs assessments, fruitful collaboration between working parties and school health intervention Programmes to build healthier tuck shops in primary school. Through setting up of school tuck shop committees, training Programmes, school health promotion Programmes and proper evaluation, we will set up a healthy tuck shop model by which primary schools can build up their own healthy tuck shop. The whole course of Programme will be well documented and practical manual will be produced for future reference.

**Activities:** At the first year project, we have conducted initial need assessments targeting school tuck shop owners from nine primary schools to review their current school tuck shop practices and the difficulties of school and tuck shop operations in promotion of healthy snacking in primary school. The results served as basis for development of the tuck shop intervention Programmes. Another set of initial needs assessments were also conducted targeting school students from the nine primary schools to review their snacking behaviors. In addition, we helped them to set up the school tuck shop committees, which consist of parent and teacher representatives and school tuck shop owners. We provided training Programmes on nutrition, production promotion and organization of health promotion activities to the committees. After the training Programmes, they design and run their own healthy snack promotion Programmes at the school campus, such as organizing health talk on healthy snacks to students or parents and conducting rewarding system for buying healthy snacks in tuck shop.

At the second year project, the participatory research committee will write up guidelines and manuals on ‘building a healthy school tuck shop’ from the findings of the evaluation process and experiences of individual tuck shop committees. This manual will be distributed to all primary schools in Hong Kong for future reference on school healthy tuck shop.

**Targets:** students, parents, tuck shop owners and teachers from primary schools.

**Expected attendance:** 6000 students, 300 parents and 9 tuck shop owners from 9 primary schools

**Expected Benefits Derived:** We expect there will be an increase in the number of healthy snacks sold in school tuck shops, the sales volume of healthy snacks and the awareness of parent, teacher and tuck shop owners on the importance of healthy tuck shop Programme.

**海報編號：**A9

**計劃編號：**19050074

**計劃名稱：**“我至型” 健康生活推廣計劃

**主辦機構：**社區藥物教育輔導會

**計劃成員：**李蝶、黃寶文

**計劃開始及完成日期：**1/8/2006 至 31/1/2008

**目標 / 目的：**

1. 引導學生認識健康及均衡飲食的重要性；
2. 為學生提供健康及均衡飲食的知識，傳遞「日日 2+3」的訊息；
3. 提高學生對吸煙及濫用藥物行為的危機意識；
4. 加強學生作明智抉擇的技巧；
5. 訓練部分學生成為「健康大使」，在校內宣揚健康生活的訊息。

**活動大綱：**

本計劃將舉辦 300 場健康教育活動，活動包括 3 個主題，其中「健康及均衡飲食」為核心活動，「吸煙 = 有型？」及「濫用藥物 = 追上潮流？」為選擇性活動，學校必須參與核心活動。另外，本計劃將於 5 間學校展開全校性活動，並為該 5 間學校的同學提供共 30 節「健康大使」訓練；及會為該 5 間學校提供支援。

**對象 / 受惠者：**

小學四至六年級學生

**預期參與人數：**

18,000 位

**預期效益：**

1. 學生對健康生活模式的意識增加；
2. 學生對保持健康及均衡飲食（每天五份蔬果）的知識增加；
3. 學生對吸煙及濫用藥物行為的危機意識提高；
4. 部分學生受訓為「健康大使」，在校內宣揚健康生活的訊息；
5. 製作一系列展板，在計劃完成後仍可供學校及其他機構借用。

**海報編號：**A10

**計劃編號：**19050304

**計劃名稱：**「五星健康五星家」之「健康生活模式」推廣

**主辦機構：**香港紅十字會醫護服務部

**計劃成員：**陳燕萍、陳祺豐、陳梓珊、盧思敏

**計劃開始及完成日期：**1/4/2006 至 31/12/2006

**計劃摘要：**

2003 年沙士爆發，暴露了市民大眾對健康知識及病毒防疫的不足，為此，香港紅十字會醫護服務部率先選定以大埔區作為試點，推行一項大型社區健康教育計劃--「五星健康五星家」，藉此提高市民對健康知識的認識，並加強與社區團體協作，以建立持久的社區健康教育工作，並達至預期效果。其後，計劃更延展至屯門區。

踏入 2006 年，本計劃將再進一步拓展至葵青區，並計劃舉行「五星健康樂園」為大型開展活動。運作模式先由受訓之健康大使引領參加者進入「五星健康樂園」歡迎區，在簡介五星健康樂園運作後，即開始為時三十分鐘之「五星健康樂園」旅程。該旅程以互動式健康教育遊戲為主軸，內容涉及：精神健康、個人衛生、環境衛生、運動四個主要範疇，參加者完成有關遊戲後，即簽署健康承諾書及獲派發五星健康錦囊及禮物，以強化參加者對健康的認知，提高防病意識，改變壞習慣，建立健康生活模式，改善身體質素及抗病能力，鼓勵居民建立良好社交，互助互勉，以期達到世界衛生組織提倡之身、心、社、靈皆健康的目標。

整項活動預計約有 2000 多人參與「五星健康樂園」並接收「健康錦囊」獲取健康資訊，同時有 1200 個家庭加入健康之友行列。

**目的/目標：**提高大眾防病的意識，改變人們生活裡的壞習慣，建立「健康生活模式」，改善身體健康狀況及加強抵抗疾病的能力，從而使流行病無法入侵；更藉區內推廣健康教育的行動，鼓勵居民建立良好社交，互助互勉，以期達到世界衛生組織提倡之身、心、社、靈皆健康的目標。

**活動/推行大綱：**由受訓之健康大使引領參加者進入「五星健康樂園」歡迎區，簡介五星健康樂園運作後，即開始三十分鐘之「五星健康樂園」旅程，包括：健康知識教育遊戲、承諾書簽署、健康錦囊派發等。

**預期參與人數：**約 2000 人

**預期效益：**預計約有 2000 多人參與「五星健康樂園」並從「健康錦囊」中獲取健康資訊；預計有 1200 個家庭加入健康之友行列。

**Poster No.:** B1

**Project No.:** 113001

**Project Title:** Healthy Child Development Project  
健康孩子發展計劃

**Administering Institution:** <sup>1</sup>The Boys' & Girls' Clubs Association of Hong Kong (BGCA)

**Co-organiser(s):** <sup>2</sup>Queen Elizabeth Hospital (QEH)

**Project Team Members:** Shum LK<sup>1</sup>, Sze E<sup>1</sup>, Chan ML<sup>1</sup>, Tse HY<sup>1</sup>, Tse WYW<sup>2</sup>, But WMB<sup>2</sup>, Cheung C<sup>2</sup>, Ng G<sup>2</sup>

**Project Commencement Date and End Date:** 04/2000 to 05/2001

**Objectives:**

To arouse children and their parents' awareness of physical health;  
To promote the concepts of balanced nutrition and physical fitness; and  
To provide intensive treatment to the high-risk group including comprehensive assessment, dietitian' s recommendation, physical exercise programmes, etc.

**Programmes / Targets / Expected and Actual Attendance/Participation:**

<u>Programmes</u>	<u>Expected Attendance</u>	<u>Actual Attendance</u>
a. Family Health Day cum Healthy Child Development Project Opening Ceremony	150 children 150 parents	151 children 155 parents
b. Sharing Session on Balanced Nutrition	12 front-line workers	14 front-line workers
c. Health Check-up Service for High-risk Group		
Visit 1	30 children	30 children
Visit 2	30 children	23 children
Visit 3	30 children	15 children
d. Physical Exercise	240 children	240 children

<u>Programmes</u>	<u>Expected Attendance</u>	<u>Actual Attendance</u>
Training Groups		
e. Healthy Family Fun Day	35 children 35 parents	36 children 22 parents
f. Booklet on Children's Health	10,000 copies for children and parents	10,000 copies for children and parents

**Benefits Derived:**

By means of integrative intervention in helping children and their parents was a new approach to both organizations. Not only did the service recipients gained a rewarding experience, the staff members concerned in the project also benefited a lot from the multi-disciplinary strategy. The sharing and exchange among different professionals was meaningful and fruitful.

**Extent of Objectives Achieved:**

Reflected from the service statistics, assessment reports as well as the customers' feedback, the programme proved to be successful and effective, especially on the areas of promoting the concepts of physical health and healthy living habit for the children with obesity potential. As a community education project, it could also arouse public's awareness of children's physical health.

**Conclusions/Implications:**

Use of multi-disciplinary approach was conducive to building a physical environment favourable for children and their parents to enjoy good health, as well as concerns of growth and weight. It is suggested social service agencies and health care institutions to develop more co-working experience with different organizations so as to help service recipients in a more comprehensive and effective way.

**Project No.:** 115004

**Poster No.:** B2

**Project No.:** 115004

**Project Title:** To assess the effectiveness of a nurse-led sexual health promotion project amongst HK adolescents

**Administering Institution:** The Nethersole School of Nursing, The Chinese University of Hong Kong

**Project Team Members:** Twinn S<sup>1</sup>, Lee A<sup>2</sup>, Holroyd E<sup>1</sup>, Cheng F<sup>2</sup>, Shiu ATY<sup>1</sup>

**Co-organiser(s):** Department of Community and Family Medicine, The Chinese University of Hong Kong

**Project Commencement Date and End Date:** 1/6/2001 to 31/8/2003

#### Purpose

The aim of the project was to assess the effectiveness of nurse-led sexual health promotion project to increase adolescents' knowledge about sexual health and reduce sexual-risk taking behaviour. Objectives included identifying young adolescents' sexual health needs, increasing their knowledge about sexual health, developing a collaborative sexual health promotion programme including parents, adolescents and teachers and promoting positive attitudes to sexual behaviour amongst young adolescents.

#### Programme

The programme consisted of a multi-strategy intervention which included a needs assessment, sex education activities and one to one drop in counseling for students. The sex education activities were based on the identified needs and topics of interest.

#### Target audience

The target for the sexual health promotion project was centered on form 2 secondary school students (mean age 13 years) in two publicly funded secondary schools matched for socio-economic characteristics and educational banding.

#### Participation in the project

The needs assessment was undertaken with a total of 201 students in school A and 210 students in school B. The number of participants attending the different activities ranged from 5 to 700 in school A and 4 to 200 in school B. In school A at the request of the school these activities were undertaken with other students than form 2 providing

recognition of the value the school placed on the availability of nurse-led health education and advice. A total of 112 one to one counselling sessions were held in school A and 27 in school B.

### **Benefits derived**

Assessment of the project was undertaken using both outcome and process strategies. The post sexual health promotion programme questionnaire completed by students showed no statistically significant changes in student's sexual knowledge. Although the majority of students attended the sex education activities only 6% attended the counseling sessions supporting the student qualitative data demonstrating the continuing stigma associated with sexual health education. The focus group data demonstrated the high value placed by parents, teachers and students on the accessibility of an appropriately trained school-based nurse to provide advice and information on a range of health related topics.

### **Extent to which objectives achieved**

As with health promotion activities the extent to which the objectives were achieved is difficult to assess due to the complexity of attribution of outcomes to the programme activities. However, the outcome and process data indicate that the objectives were partly achieved.

### **Conclusions**

The conclusions indicate support for the concept of a school-based nurse to provide holistic health care to both students and staff. The findings, however, also highlight the continuing stigma associated with sexual health and the need for a holistic approach to promoting the health of adolescents. The importance of integrating sexual health promotion into the school curriculum is clearly demonstrated.

The project team would like to acknowledge the support from the HCPF in funding the project and the support of students, teachers and parents in participating in the project.

海報編號：B3

計劃編號：18040154

計劃名稱：「真」健美大行動—身心健康區校推廣教育計劃

主辦機構：基督教靈實協會

計劃成員：莫素鳳

計劃開始及完成日期：3/2006 至 11/2006

參與學校：將軍澳官立中學、將軍澳香島中學、景嶺書院、將軍澳天主教小學、新界婦孺福利會梁省德學校、保良局陸慶濤小學

**計劃目的：**

教育不正確或過度減肥瘦身對身心所帶來的影響(例如：飲食失調、情緒病等)  
協助青少年建立積極正面的健康審美觀念，以培養身心靈的平衡發展  
向社區人士推廣積極正面的健康審美觀念及健康生活習慣，以平衡「瘦=美」的單一審美文化

**活動大綱：**

階段	目標/特色	活動	內容
階段一(先破)	打破瘦身迷思，重建健康自信，學習慎思明辨	思考模式講座 「真」健美體驗之旅	於學校不同場地同一時間舉行不同主題的活動，讓學生逐一參與，利用不同的經歷和刺激，以達致全面的反思和學習。  俊男美女你點睇 肥胖危機知多少 有「營」有款由你揀 坊間瘦身睇真 D 修身 Kick Boxing 強身健體跆拳道
階段二(後立)	鞏固反思成果，營造健康校園	「真」健美大使訓練	組織學生成立「真」健美大使小組，通過分享及訓練而成為健康大使。 大使於校內推廣另類的標準及健康訊息。

階段三(力行)	踏出校園、正視社區健康需要	「真」健美社區巡禮 「真」健美光碟製作	聯同「真」健美大使巡迴將軍澳區，舉行展覽及表演，並派發單張、光碟。
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**對象：**

西貢及將軍澳區中、小學生  
西貢及將軍澳區居民

**預期參與人數：**2240 人

**預期受惠人數：**13000 人

**預期效益：**

直接參與活動的中、小學生，表示健康意識得以提升；並有半數者能夠化作行動，建立健康生活計劃。

參與學校或社區推廣活動的人士，表示健康知識獲得增長。

**鳴謝：**衛生署中央健康教育組

**海報編號：**B4

**計劃編號：**18040374

**計劃名稱：**健康 fit 一世

**主辦機構：**香港宣教會白普理上水家庭中心

**計劃成員：**呂慶忠

**計劃開始及完成日期：**30/4/2005 至 30/10/2005

**目的：**

此計劃針對中年人士因肥胖及不良生活習慣而引致的健康問題而設。提升社區大眾認識由肥胖引發的各樣疾病及其預防方法，從而建立其健康生活習慣，並以身作則地向家人及社區大眾推廣。

**推行大綱：**

巡迴展覽、身體檢查及「健康瘦身法」講座

「健康生活」深化小組

健康家庭嘉年華

**受惠對象：** 30-60 歲中年人士

**預期及實際參與人數：**5500 人/10650 人

**效益及已達成目標：**

此計劃成功向北區超過一萬名居民推廣健康生活的訊息，讓他們認識和關注肥胖對健康的影響，並提升他們的健康意識和建立健康生活模式的動力。參加者不但能夠對自己健康狀況有進一步了解，而且在活動中建立了支援網絡，互相鼓勵去實踐健康生活模式和參與社區推廣活動，使計劃的成效得以延續。

**總結：**

香港人對健康的資訊有一定認識，但多流於「知而不行」。透過家人及朋友的不斷鼓勵，能有效維持改善不良生活習慣的動力。因此，是項計劃以主動、外展及地區化為特色活動，針對中年人士及持家者為主要對象，能有效地推動市民對健康的關注及擴大影響範圍，增強此計劃的成效。

**海報編號：**B5

**計劃編號：**19050344

**計劃名稱：**健康活力小種子計劃

**主辦機構：**香港宣教會白普理上水家庭中心

**計劃成員：**呂慶忠

**計劃開始及完成日期：**1/4/2006 至 31/12/2006

**目的：**

透過「以家庭為本位，兒童是社會的未來主人翁」理念，提升社區大眾認識由飲食不均衡和欠缺運動所引發的各種疾病及預防方法，從而加強他們對身體健康的關注和改善動機；並鞏固社區大眾健康生活習慣。

**推行大綱：**

運動及飲食習慣問卷調查、健康資訊展覽及專題講座；  
體適能及脂肪測試暨工作坊；  
健康生活家庭營；  
義工大使小組「健康活力小先鋒」；  
社區健康推廣日

**對象：**

小三至小六學童及其家人

**預期參加人數：**約 7000 人

**預期效益：**

此計劃不但能提升參加者對健康飲食和運動的知識和關注，並讓他們對自己營養和身體狀況有更深入的了解，及早發現並改善生活習慣。此外，健康生活家庭營能讓他們進一步掌握改善健康的方法，藉親子互動模式，建立互動的運動意識和習慣。計劃中的義工小組，承諾建立健康飲食和運動模式，並將有關訊息像種子般不斷推廣和傳播。透過參加者在社區健康推廣日的分享，健康食譜推廣及攤位遊戲，使區內更多人認識以及關注健康的問題，強化他們建立健康飲食和每天運動的習慣。

**海報編號：**B6

**計劃編號：**18040334

**計劃名稱：**關「健」燃動力

**主辦機構：**香港青年協會杏花邨青年空間

**協辦機構：**救世軍韋理夫人紀念學校(上午校)、柴灣信愛學校(下午)、聖保祿中學、香港保護兒童會譚雅士日託幼兒園、明愛香港太平洋獅子會幼兒園、基督教香港信義會興華幼兒中心、東華三院方樹泉長者服務中心、耆康會耆康學院

**計劃成員：**趙婉珊、湯港生、曾加健、麥堃瑩

**計劃開始及完成日期：**4/7/2005 至 3/6/2007

**目的/目標：**本計劃組織中、小學生，接受訓練課程，裝備他們成為「健康推廣大使」，向區內市民推廣健康訊息，及藉活動體驗延伸至日常生活。

**活動/推行大綱：**計劃將以兩大主題活動分階段推行，首階段由 7/2005 至 6/2006，名為『關健常運動系列』。首先，訓練中、小學生分別成為「健康大使」及「健康先鋒」，認識健康生活概念和要義，然後協助推動一系列健康活動，『關健常運動系列』以推動常運動的重要性為焦點，內容包括：花式跳繩訓練、身體檢查日、健康嘉年華及運動體驗日。第二階段由 6/2006 至 6/2007，『關健好飲食系列』重點推動健康飲食習慣，內容計有營養早餐設計比賽及營養早餐體驗日、小營養師訓練，亦會以話劇形式，推廣健康飲食。

**對象/受惠者：**東區市民、中、小學生，區內院舍宿友（長者、兒童）

**預計參與人數：**3,630

**預期效益：**

能將健康生活訊息，帶給社區人士，了解運動及健康飲食的重要。

接受「健康小先鋒」及「健康大使」訓練人數達 144 位，總人次為 816 人。

掌握籌備及推動活動的技巧，如：花式跳繩、正確使用身體健康測試器材，為社區人士作身體檢查。

受惠人數達 3,630 人，總人次為 7,530 人。

受惠者及參加者更重視運動及均衡飲食，並身體力行。

**Poster No.:** B7

**Project No.:** 18040564

**Project Title:** Community Development Approach to create better health of our young generation within the settings of their daily life

**Administering Institution:** Centre for Health Education and Health Promotion, Faculty of Medicine, The Chinese University of Hong Kong

**Project Team Members:** Lee A, Cheng F, Ho M, Yuen W, Suen C, Lee J

**Project Commencement Date and End Date:** 1/6/2005 to 31/5/2007

**Objectives:**

A number of Health Promoting Schools (HPS) will be guided and supported to act as mentors to assist their mentee schools to develop as HPS meeting the WHO standard with the aims to achieve health for all in the community of the New Territories West (NTW) district. The main objectives of the project are:

to establish a HPS network in the NTW district for sharing experience on the development of HPS,  
to assist more schools in the NTW district to develop as HPS via the mentorship scheme,  
to set up a self evaluation mechanism for HPS to improve school' s quality, and  
to conduct health education for parents to facilitate home-school cooperation and community connectedness.

**Activities/Programmes:**

Baseline needs assessment was conducted based on HPS framework developed by the Centre at the beginning of the project for mentee schools to reflect the health needs of the students and the development of the health education and health promotion at mentee schools. The data is essential for the development of strategic plans for future collaboration;

Discussion forums were held regularly to provide opportunities for the participating schools to exchange their experiences, to link up their resources and to monitor the progress of the project;

Training workshops on HPS and health education were organized regularly for mentee schools to equip them with knowledge and skills to develop as HPS;

Parents' health training courses were organized to equip parents with health skills to promote healthy lifestyles at home, school and the community;

A self-evaluation tool will be established for the participating schools to monitor their progress of development into a healthy school which will be validated by school audit on

HPS performance approaching the end of this project.

**Targets/Recipients:**

About 10,000 students, 20,000 parents and 800 teaching staff from 16 schools including 8 mentor schools (5 secondary schools and 3 primary schools) and 8 mentee schools (5 primary schools and 3 kindergartens) in the NTW District.

**Expected Benefits Derived:**

It is expected that through the mentorship scheme, 16 schools will be guided and supported to develop as HPS meeting international standards with about 10,000 students, 20,000 parents and 800 teaching staff benefited from the influence of HPS. In addition, a network of HPS is established in the NTW district to share experience in promoting school health and set role models for other schools to develop along the concept of HPS. Furthermore, the mentoring scheme may be adopted in other districts in Hong Kong to inspire more schools to make the best use of HPS approach strengthening the capacity of health education and health promotion and to help more students in adopting healthy lifestyles.

Poster No.: B8

Project No.: 18040844

**Project Title:** School Health Promotion, Hong Kong East Cluster – “Roving Health Exhibition”

**Administering Institution:** The Hong Kong Tuberculosis, Chest and Heart Diseases Association

**Project Team Members:** Lee SH, Chan B, Ho T

**Project Commencement Date and End Date:** 1/6/2005 to 31/5/2006

### **Introduction**

Lifestyles and behaviors are important determinants of health. Many of the chronic diseases are associated with unhealthy lifestyles and behaviors. These diseases are largely avoidable if healthy lifestyles are adopted in early life. Roving health exhibition was launched to enhance health awareness and provide health education for students, parents, school staff and general public in schools and community settings of Wanchai, Eastern and other districts of Hong Kong.

### **Purpose**

To provide health information for students, parents and school staff and the general public.  
To enhance health awareness and provide health education for students, parents and school staff in schools and general public through community organizations.  
To encourage schools or community organizations to develop and sustain health promoting activities in schools and community.

### **Methods**

6 scroll-up system banners with 3 different health topics (**Anti-smoking, Diet & Nutrition and Exercises**) were arranged to display for 1 week in schools and community organizations in Hong Kong East and Wanchai districts and other districts of Hong Kong from June 2005 to May 2006. The information of the banners included nutrition, anti-smoking and exercises. The style and design of information of the banners will be different for different age groups of children (6-11 years old), adolescent (12-17 years old) and adults (18 years old or above). So there will be totally 3 different sets of banners for each of the health topics. The awareness in healthy lifestyle and increase knowledge in health practices of the participants will be evaluated by questionnaire assessment.

### **Results**

From March 2005 to April 2006, 23 schools and 15 organizations had displayed the banners. The completed questionnaires collected from the schools and organizations were 14 and 13 respectively. **Over 9000 students and 3000 general public** had attended the exhibition. From the questionnaires collected, 14 schools and 11 community organizations had organized health promoting activities to match up the display of the exhibition. 5-scale questions were done in the evaluation questionnaires, 12 schools and 13 organizations showed that they were satisfied or very satisfied with the information of the exhibition and believed that the information would be useful in future.

### **Conclusion**

Roving exhibition can be a simple way to deliver information to the public within short time to increase the awareness of the public. In long term, if more people get the correct health knowledge, their altitude would be changed and they would adopt a healthy practice to promote better healthy lifestyles.

海報編號：B9

計劃編號：19050184

計劃名稱：邁向健康人生路

主辦機構：心創作劇場

計劃成員：陳慧心、張瑋佩

計劃開始及完成日期：13/3/2006 至 13/8/2006

活動內容：

香港市民因工作繁忙和生活緊張，容易忽視了健康護理，藉是次計劃 — 《邁向健康人生路》，向公眾人士及學生揭示他們在日常生活中，一些影響健康的不良習慣，從而在提醒他們健康生活的重要性。我們會製作一齣二十至三十分鐘的互動短劇，巡迴全港部份小學及公眾場地演出，劇中帶出預防疾病、改變不良的行為習慣，是締造健康生活環境的泉源，並鼓勵他們選擇和維持健康生活方式。與此同時，向他們推廣健康護理的概念，並鼓勵市民持續而恆常地注重健康生活的素質，並徹底改變一切影響健康的行為和習慣，這才是真正改善健康人生的方法。

經歷了可怕的 SARS 疫症後，沒有人可以預測到，何時再有變種的傳染病毒出現。正所謂「預防勝於治療」，在未能預計的情況下，做好防衛措施比對抗疫症來得更積極、更有意義。因此互動短劇是最簡單、最直接、最有效果教育公眾的方法，這生動有趣的演繹，必定老少咸宜。戲劇能將最真實的生活片段一一再次呈現，能增加觀賞者的共鳴和投入感，營造了親歷其境的效果和感受。而互動形式是讓觀賞者一面觀看的同時，一同把問題解決，並改變劇情的發展，透過選擇與決定來自我反省，改變自己既有的錯誤觀念和習慣。

海報編號：B10

計劃編號：19050324

計劃名稱：「健康新營人」計劃

主辦機構：香港遊樂場協會賽馬會青衣青少年綜合服務中心

計劃成員：邱華微

計劃開始及完成日期：13/2/2006 至 31/8/2006

**理念：**小學時期是個人生理及心理成長的重要階段，但是兒童容易因偏食等因素導致營養不良或過胖，嚴重者在影響健康之餘更影響他們的自信心。因此，培養兒童均衡飲食的習慣是有必要的。在兒童的成長階段，家長的參與和支持更是不可或缺，家長可以在培養子女良好飲食習慣之餘，也可收以身作則之效。

**目的/目標：**1. 提升兒童及家長對健康飲食的認知，從而培養健康的飲食習慣。  
2. 提升兒童及家長對運動重要性的認知，從而培養對運動的興趣。

**活動/推行大綱：**

舉行日期及時間	活動名稱
2/06-6/06	「健康小跳豆」學校巡迴講座
25/3/06	「兒童營養及健康」家長講座
5/06	「健康新營人」填色比賽
22/4/06	體適能講座及測試
6/5/06-27/5/06	親子健康飲食工作坊
3/06-7/06	「健康新營人」體重控制小組(兒童組及家長組)
8/06	頒獎典禮暨展覽

**對象/受惠者：**青衣區內 6-12 歲兒童及家長

**預期參與人數：**3500 人

**預期效益：**在計劃完成時，可提升兒童及家長對健康飲食的認知，從而培養健康的飲食習慣；並對運動重要性的認知有所提升，從而培養對運動的興趣。

**Poster No.:** C2

**Project No.:** 111904

**Project Title:** I Am the Master: cognitive-behavioral therapeutic groups for ADHD children and their parents

我是我的小指揮計劃

**Administering Institution:** The Boys' & Girls' Clubs Association of Hong Kong

**Project Team Members:** Yeung SH, Ma CM, Yew CS

**Project Commencement Date and End Date:** 1/4/2002 to 31/12/2002

#### Introduction:

It is known that children suffering from ADHD are often described as impulsive, inattentive, and overactive. They also have deficits in self-control. Deficits in self-control will lead to secondary problems like poor academic performance and troubled social interactions with peers, parents and teachers. If the problem is left untreated, it will persist until adulthood, leads to school failure, conduct disorders, drug abuse and criminal records.

Among all the treatments for ADHD, stimulant medication treatment, and cognitive-behavioural training for children, and training parents in child behaviour management skills are the most commonly used.

Parallel group of cognitive behavioural therapy for children of ADHD, together with a group for their parents are designed in order to maximize the effectiveness.

Early detection and treatment is important for children with ADHD to diminish the secondary effects of ADHD. Public awareness enhances the possibility of early detection. With the aim to arouse public attention on the children with ADHD, the project also includes a Multi-disciplinary Conference.

#### The Parallel Group

There are altogether 48 families had joined the group. The attendance was over 90%. From the evaluation, there is significant increase in parents' understanding and acceptance of their children.

Parents also reported that there was reduction in parental stress. Among the skills, the skill of

reinforcement and the principles of specificity are reported by both parents and counsellors to be useful. In the other hand, parents reveal that the skill of effective command, the skill of managing children in public places, and the principles of consistency are more difficult to apply.

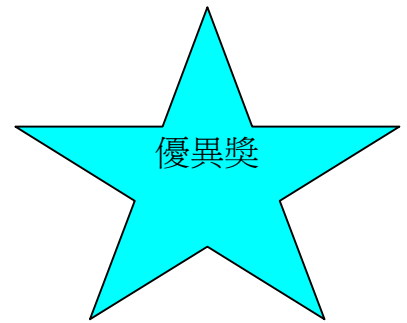
### The Multi-disciplinary Conference

The Conference was held on January 11, 2003. It was very encouraging that there were over 800 participants, including social workers, teachers, parents and other professionals. The support was overwhelming.

The conference consisted of 2 sessions. In the morning session, Dr. T. P. Ho, Psychiatrist, Ms. C. K. Chow, specialist nurse, and Mr. S. M. Leung, teacher of Red Cross School were invited for sharing the symptoms, the assessment and the treatment of ADHD.

In the afternoon, 3 workshops were held by several professionals who had long been committed to the welfare of children with ADHD. Mr. Joseph Lau, clinical psychologist, delivered his speech in the area of attention problems of ADHD's children. Ms. Cheryl So, another clinical psychologist presented the impulsive and hyperactive problems of ADHD children. Two counsellors of our Association also shared their practical experience in providing diversified supportive services for those families.

Based on the practical experience obtained from counsellors' daily work and reference cases overseas, the parent's handbook was published and distributed to parents and other participants at the end of the conference. We hoped that such effort would help to increase the support for the children with ADHD and their families.



Poster No.: C4

Project No: 113006

**Project Title:** The development of a comprehensive self-help kit for carers in care of demented elderly person at home in HK

**Administering Institution:** <sup>2</sup>St. James' Settlement

**Co-organiser(s):** <sup>1</sup>School of Professional and Continuing Education, The University of Hong Kong

**Project Team Members:** Wong G<sup>1</sup>, Lui W<sup>2</sup>

**Project Commencement Date and End Date:** 2/2001 to 1/2002

#### Executive Summary

In Hong Kong, the caring responsibility is still rested upon the family (Chow, 1992, Ngan & Wong, 1995). Local studies on caregiving amongst the family carers of frail elderly found that the majority of caregivers develop physical health problems, financial difficulty and psychosocial distress (Ngan & Kwok, 1992; Hong Kong Council of Social Service, 1994). These family caregivers receive little education and training about the caregiving role. In fact, oversea studies showed that there is a significant relationship between the health consequences and care of the elderly with dementia. Researchers identified that the longer the time in caring for the elderly person with dementia, the likely health-related problems would be developed (Moritz et al., 1989; Pruchno et al., 1990; Wong, 2004). Further, elderly people with dementia would present with behavioural problems along with the cognitive impairment. The fact is that the family carer has not only to provide the daily care but also to tolerate the unpredictable mood or behaviour at home. Therefore, there is a need for developing a comprehensive self-help kit helping the carers learn how to de-stress and manage the behavioural problem at home. The idea has adopted the principle of health promotion and education that the public needs to be educated to be responsible for their own health.

The comprehensive self-help kit can be considered as the first attempt to include self-administered health assessment and learning techniques on handling common behavioural problems presented by the elderly person with dementia. It is a joint project between Nursing Studies and Health Care, HKUSPACE and St. James Settlement, Non-Government Organization.

**Method:** A pre-and post-evaluation study was adopted.

**Target Population:** Primary caregivers of different age group living with the elderly with Dementia at home to provide 24 hours were recruited as a focus group for giving comments. A written consent was obtained.

**Instrumentation:** Personal Particular, Health Assessment, Stress Scale, Coping strategies questionnaire and an evaluation questionnaire

**Result:** Ninety percent of the subjects agreed that the book has enhanced their knowledge toward the disease. Seventy percent felt that the book helped them to understand the different type of behaviour and to enable them learn how to handle the behavioural problem. The overall feedback was positive and encouraging. Details of the result will be shared at the poster presentation.

**Conclusion:** It is the first self-help book written in Chinese for the family caregivers in Hong Kong. The book is based on a problem-solving technique and thus the readers can learn a practical way when facing behavioural problem/s.

海報編號：C6

計劃編號：118001

計劃名稱：青少年樂觀感培育計劃

Promoting optimism in adolescents & their parents

主辦機構：香港神託會

計劃成員：陳紹勤

計劃開始及完成日期：1/1/2002 至 30/4/2004

#### 一) 理念：

基於研究發現樂觀感可幫助青少年在遇到重大挫折或慘劇時抵抗抑鬱；此外，建立樂觀感對身體健康亦有正面作用。故我們希望從青少年及其家長入手，提倡樂觀感之培育，從而減低或預防青少年產生憂鬱或其他負面情緒。

#### 二) 計劃目標：

提升青少年及家長對樂觀感及健康生活態度之意識。

提升青少年及其家長之正面思想，解決問題之能力及面對不同挑戰時之壓力處理。

幫助家長掌握如何培養子女積極樂觀的態度及如何營造一個健康成長的環境給青少年

#### 三) 對象：

初中學生及家長

#### 四) 計劃的內容：

包括小組、學生及家長講座和工作坊、小冊子、樂觀感調查研究

#### 五) 總結經驗：

樂觀感是一個很值得研究的課題，因為預防勝於治療，我們相信青少年樂觀感培育並非單靠青少年本身或學校團體，而是需要各界的配合，我們建議舉辦一些工作坊及講座予業界的社工、青年工作者以提高他們對培育青少年樂觀感的意識、資訊及需要注意的地方。另一方面，樂觀感是需要一段長時間的推行與研究，這方面確實需要政府的支持。

最後，我們深切的期望各界一同努力，讓青少年可以在一個樂觀而正面的家庭氣氛成長，一同參與青少年樂觀感的教育工作。

**海報編號：**C7

**計劃編號：**18040464

**計劃名稱：**「四輪展蔚藍」——心理健康生活朋輩教育促進計劃

**主辦機構：**自強協會

**計劃成員：**陳瑜、吳恩兒、陳子超

**計劃開始及完成日期：**1/8/2005 至 31/7/2007

**目的/目標：**

讓傷殘人士心存精神生活健康的理想，加強社會大眾關注心理健康的重要性，展現蔚藍的心理天空。

**活動/推行大綱：**

為提高傷殘人士的生活質素與建立正面的人生價值觀，本計劃透過「身」（生理）、「心」（心理）、「社」（社會服務）、「靈」（藝術教育）四方面進行訓練，鼓勵傷殘人士與健全人士加強合作，組成「四輪展蔚藍」義工隊，推動傷殘人士參與社區活動、協助其他同路人融入社會、教育公眾認識傷殘人士與心理健康的重要性，宏揚「天空展蔚藍、人生多燦爛」之精神。

活動自二零零五年八月推行，現已進入「社」、「靈」訓練階段，籌備組成「四輪展蔚藍」義工隊，日後到訪非牟利機構，包括院舍、學校及慈善團體等，歡迎全港機構邀請到訪；此外，將開設「四輪展蔚藍」支援熱線，幫助殘障人士處理個人情緒、家庭或人際關係等問題，熱線亦歡迎傷殘人士之家屬、照顧者及公眾查詢資料。

**對象/受惠者：**肢體傷殘人士、義務工作者、專職人士（例如社康護士、大學修讀職業治療或社工系的學生）。

**預期參與人數：**30 名嚴重肢體傷殘人士、30 名健全義工、15 名專職人士及 4500 名社會大眾。

**預期效益：**計劃以加強傷健共融、促進心理健康為目標，除以上述參加者人數作「量化指標」外，本會將以 Chinese (Hong Kong) SF-36 Health Survey 作「質化指標」，評估參加者在參與培訓及義務工作後的心理健康改變，預期傷健人士互動發掘，提升社會大眾關注心理健康的重要性。

鳴謝：香港理工大學康復治療科學系

**海報編號：**C8

**計劃編號：**18040504

**計劃名稱：**精神病康復者聯同中學生齊參與促進精神健康計劃

Empowerment of Rehabilitated Mentally-ill Clients to promote Mental Health to Secondary School Students

**主辦機構：**葵涌醫院職業治療部

**計劃成員：**葉以超、任婉萍、李鴻清、江中龍、冼玉明

**計劃開始及完成日期：**1/6/2005 至 30/11/2006

**目的/目標：**讓精神病康復者積極參與推動精神健康訊息予中學生及教師，而且亦可幫助他們更有信心融入社羣。

**活動：** 1. 職業治療師到各中學舉辦講座，向中學生及教師介紹精神健康，壓力的來源及其處理方法。亦會安排他們到葵涌醫院實地參觀，讓他們更了解現時之精神科住院及復康服務。

2. 職業治療師同時訓練一班精神病康復者，去協助教導中學生製作不同之環保手工藝，如環保小盆栽、香薰蠟、心意水晶“Jelly”等等，讓中學生可以和他們一起工作和相處，使中學生及其教師更了解精神病康復者，減低對他們的隔膜及誤解，提醒他們多些關注自己及身邊人的精神健康，長遠使這批社會的未來主人翁更容易接納康復者而可達致傷健共融之和諧共處。

**對象/受惠者：** 精神病康復者  
中學生及老師

**預期參與人數：** 30 位精神病康復者  
300 位中學生  
10 位中學老師

**預期效益：** 1. 約 30 位精神病康復者以義工身份參與教導中學生製作小手工藝品，增強他們的自信心及個人價值觀。

2. 約 300 位中學生及 10 位中學老師透過出席講座和實際與康復者相處而對精神健康之理解、對壓力的認識和處理方法都能一一提升。

鳴謝：青衣樂善堂梁植偉紀念中學  
九龍塘德雅女子中學  
葵芳蘇浙公學

**海報編號：**C9

**計劃編號：**18040534

**計劃名稱：**「彩虹行動」— 關注精神健康社區推廣計劃

**主辦機構：**香港聖公會麥理浩夫人中心

**計劃成員：**本機構內的長者、婦女及成人義工

**計劃開始及完成日期：**30/4/2005 至 29/4/2006

**目的/目標：**1. 組織義工成立一隊關注全人健康的小隊，於社區持續地推廣身心健康的訊息。

讓社區人士認識精神健康的來源及預防精神壓力的重要性。

**活動/推行大綱：**計劃由四系列活動組成，包括：

**「彩虹大使」義工服務計劃**

義工接受了七堂精神健康知識及健康檢查技能培訓後，舉行了三次巡迴社區教育展覽，推廣精神健康訊息。

**「彩虹行動」巡迴教育講座**

舉辦六次精神健康教育巡迴講座，為不同年齡的社區人士度身訂造講座內容，增強他們對個人精神健康的知識。

**3. 彩虹行動**

47 位不同年齡義工集體製作 4500 個「彩虹襟章」，這些襟章連同「活出彩虹人生錦囊」於講座、巡迴展覽及嘉年華活動中，派發予社區人士。

**4. 「彩虹下的約定」精神健康嘉年華**

內容包括：中西醫學講座、綜合表演、攤位遊戲及展覽。當日更邀請了心晴行動慈善基金主席林建明小姐分享面對情緒病的經歷。

**對象/受惠者：**社區人士

**預期及實際參與人數：**實際參與人數達 8941 名

**效益：**計劃凝聚了一群不同年齡的熱心義工，向社區人士宣揚關注精神健康的訊息，令義工更有信心地在日後舉辦不同的健康推廣活動。

**已達成的目標：**義工於完成了計劃後，能組成義工團向社區人士宣揚精神健康的知識。

**總結/影響：**計劃不但令義工洞悉精神健康的重要性，亦提升了他們策劃活動的技巧。「健康大使聯席」的成立，讓義工們繼續協助機構推動各項社交健康教育活動。

**鳴謝：**衛生署、香港健康協會、全康醫務綜合中心、全康情緒治療綜合中心、心晴行動慈善基金。

**海報編號：**C10

**計劃編號：**18040784

**計劃名稱：**青少年精神健康社區支援計劃

Project Sun – A Support & Understanding adolescent mental health care Net

**主辦機構：**明愛醫院

**協辦機構：**香港小童群益會

**計劃成員：**余則文、傅淑賢

**計劃開始及完成日期：**1/9/2005 至 31/8/2007

**計劃簡介：**

不少香港本土研究指出，香港的青少年所需要面對的社會心理，以至情緒精神健康的問題的情況有上升的趨勢。根據明愛醫院兒童及青少年科的入院青少年個案記錄顯示，約有 10%的案主，除了是需要醫療照顧外，同時亦需要情緒或社交上的輔導服務，目前這群青少年在離院一年後，暫時未有社區服務予以照顧和跟進。

本計劃旨在為一群已及早識別為存有身心困擾的青少年人，提供個案、小組以及家庭輔導、心理諮詢服務，以預防其惡化成精神病理候群症，同時本計劃亦會對社區內老師及青少年提供講座培訓，提高各界對青少年身心健康的認識和關注，計劃亦特別關注近期青少年沉迷網絡活動的趨勢，針對性地設計健康身心的發展性活動。

計劃預期將提供 60 位個人及家長輔導服務，3 個支援性小組、4 個治療性小組，另在社區及支援層面，亦將招募 60 名青少年健康朋輩大使，並提供培訓。此外，計劃亦將為 10 間中學之學生提供精神健康講座及 4 次專業培訓工作坊，為 120 名教育工作者、學生、輔導人員提供青少年精神健康相關的知識。

海報編號：C11

計劃編號：19050134

計劃名稱：健康紅企業 – 提倡工作間的精神健康

主辦機構：香港心理衛生會

計劃成員：黃鎮漢、賴婉潔、田家樂、傅劉淑儀、黃佩蓉

計劃開始及完成日期：1/4/2006 至 31/3/2007

**目的/目標：**

- (1) 協助僱主營造有利僱員精神健康的工作間。
- (2) 提高僱員對處理工作壓力的認識和能力，改善其身心健康及增加工作投入感。
- (3) 推動僱員及其家庭實踐精神健康生活的元素。

**活動/推行大綱：**

在計劃期內，參與的企業可以享用到由本會提供的“R.E.D”活動 - Relaxation, Exercise, Diet，藉此提升僱員的精神健康。總括而言，本計劃將為 20 個企業提供共

- 「企業紅人」訓練工作坊 1 次
- 「健康紅活動」(每次 2 小時) 40 次
- 「健康紅字」(電郵刊物) 4 次
- 「健康紅企業」嘉許典禮 1 次

**對象/受惠者：**

中小型企業的僱主及其僱員  
僱員的家屬

**預期參與人數：**

本計劃預期招募 20 所中小型企業僱主參與，共 1000 人次受惠於各項活動。

**預期效益**

- (1) 提高 20 所中小型企業僱主關注和正視僱員工作壓力的意識，改善本港普遍的“高壓工作間”。
- (2) 改善 20 所中小型企業因資源或人手限制而沒有合適人員推行關顧員工精神健康工作的問題。
- (3) 提高 300 位僱員對處理工作壓力的認識和能力，改善在職人士的精神健康。

(4) 透過提供資訊、活動及訓練，推動 300 位僱員及其家庭實踐精神健康生活的元素。



**海報編號：**D1

**計劃編號：**113009

**計劃名稱：**婦女健康檢閱  
Women's Health Monitor

**主辦機構：**香港基督教女青年會婦女事工部

**計劃成員：**李雯珊、段倩穎、劉翠萍、詹淑明

**計劃開始及完成日期：**1/4/2001 至 31/3/2003

**計劃目的：**教育及提升婦女對自身健康的關注，建立整全身心的健康生活，受惠者包括其家人及社會。

**對象：**30-50 歲婦女

**活動大綱：**

在本會六個單位分別舉行社區教育活動（配合調查發佈會、展覽）、工作坊及婦女健康大使互助小組外；還出版一萬本「婦女健康手冊」、六期（每期二千本）婦女健康刊物「健康 Easy」。

**預期及參與人數：**預期人數－參與計劃：10000 人  
實際人數－

社區教育活動（六次）：6300 人次

工作坊：1050 人次

婦女健康大使：120 人，活動 1003 人次

由婦女健康大使推行之服務：3000 人次

調查發佈會（三次）：3500 人次

展板：10000 人次

**效益：**

提供婦女整全身心健康發展

體現女性自主身體

提升女性自我形象

4. 惠及家人及社會

5. 使服務使用者轉化為服務提供者

**已達成的目標：**

參加者表示能從社區教育活動、工作坊中獲得健康訊息及對健康之關注程度增加達 90%；參與工作坊後有意參加成為婦女健康大使者達 60%；而健康大使之「健康 action 手冊」記錄，達 90%呈正面回應。

**總結及影響：**

計劃已建立品牌服務，與不同團體合作推行婦女健康服務及宣傳活動。透過本會跨區合作、與本會其他健康服務配合，如電話資訊服務之「婦康聆」，有助增加服務受益者人數及接觸面。此外與不同專業人士及團體接觸（如專科醫生、藝人等）、期刊之文字工作等，強化服務形象及傳媒接觸效應。婦女健康大使則發揮朋輩力量，建立健康的生活模式。

海報編號：D2

計劃編號：18040144

計劃名稱：「健康就是美」婦女健康計劃

主辦機構：香港基督教女青年會婦女事工部

計劃成員：李雯珊、段倩穎、劉翠萍、黎明霞

計劃開始及完成日期：1/7/2005 至 20/6/2007

計劃目的：

1. 提供女性健康資訊，培育健康知識及意識。
2. 舒緩單身女性之情緒及精神壓力。
3. 抗衡瘦身美容文化，加強女性對「美的觀念」之反省，以建立健康人生。

對象：1. 女性 2. 單身女性

推行大綱：

### 1. 啓動女性健康服務

舉辦健康課程（身心課程）、健康巡迴展（健康資訊）、婦女健康刊物（健康專題）及建立健康資源閣（資料庫），以推動服務及吸納受眾參與。

### 2. 建立女性健康網絡

(1) 組織婦女健康大使，提供訓練及組織，推動婦女健康，關注不同女性健康專題，並籌備及推行活動。

(2) 舉辦單身女性健康成長坊，協助單身女性走出思想困局，讓她們能跳出單身的壓力，獲得真正的健康人生。

### 3. 提升女性健康關注

舉辦大型公開活動，包括女性健康專題比賽、社區健康教育日及女性健康專題調查及發佈。

預期參與人數：41,000 人次

預期效益：

### **1. 承先啓後，事半功倍：**

本計劃承接前一年度之婦女健康工作，關注層面更擴大至社會潮流、文化，讓女性能擁有真正的健康意識。由於健康計劃在本會已建立良好基礎，本會部分單位已有婦女健康小組，仍然為著推廣健康工作而服務，推行事工會更見成效。

### **2. 多元方式，推廣度大：**

計劃利用不同方式，如女性朋輩力量、社區活動、雜誌式資訊、調查發佈等，讓社會不同地區及階層人士接觸，達至推廣作用。

### **3. 網絡運用，社區資本：**

計劃會聯繫及動員地區不同專業人士參與是項計劃，如醫療組織、學校、社團等，並合作舉行活動。網絡建立促進人與人、團體間之互動，促進服務效益，增加社會資本，共同投資於健康工程。

### **4. 女性自強，健康成長：**

計劃提倡女性除了外表的形象外，個性及內涵亦不可忽視，提供更多選擇空間及機會，鼓勵女性從生活環境中改變，如懂得批判社會扭曲潮流對自身的傷害，從而學會抗衡傳統文化，讓女性擁抱真正健康身心。



**Poster No.:** D3

**Project No.:** 116013

**Project Title:** Health promotion project for housewives in community

**Administering Institution:** Hong Kong Federation of Women's Centres (HKFWC)

**Project Team Members:** Chan Y, Law YT

**Project Commencement Date and End Date:** 4/2002 to 3/2004

**Purposes/Objectives:**

To educate housewives to be resourceful in psychological and sexual health.

To motivate housewives to engage in community health promotional activities.

To enable educators to act as a source of referral to improve women's health.

**Activities/Programmes:**

Educational seminars: to enhance participants' knowledge on women's health and its relationship to women's roles.

Community booths: street exhibitions, on-site enquiries, drama were organized

Peer Health Educator Training: knowledge and presentation skills were provided.

Training Kits

Helpline services: Monday to Friday, 3 sessions everyday.

Educational booklet, pamphlets and CD-rom: to raise public awareness on women's health.

**Targets/Recipients:**

Housewives from middle and low-income families (family income below \$15000), with age between 35 and 44.

**Expected attendance/ participation:**

40 seminars for 800 housewives

10 community booths for 2000 housewives

40 housewives trained as peer health educators

2 training kits with 100 copies for peer health educators

2000 usage of helpline services

1000 copies of educational booklet

Actual attendance/ participation:

40 seminars with 836 housewives

10 community booths with 2490 housewives in the community

49 housewives became Peer Health Educators; five coaching sessions had been provided to the educators

2 training kits with 100 copies on sexual and psychological health had been issued

2619 calls related to women's health

4000 copies of educational booklet had been distributed to NGOs and the public

### **Benefits Derived:**

Over 8,000 housewives and public had received knowledge on psychological and sexual health from the seminars, community booths and educational booklets. Housewives were trained with advanced knowledge on psychological and sexual health. They had committed in helpline services and community health education Programmes, promoted the message of caring for mental and sexual health of housewives, and made proper resource referral to the women in need.

### **Extent of objectives achieved:**

Housewives had been educated with knowledge on psychological and sexual health. Peer Health Educators had given help in the community promotional activities. They had also participated in the helpline services and provided emotional support and referral services to the callers.

### **Conclusions/ Implications:**

Housewives are in lack of knowledge on mental and sexual health as these are taboos. Seminars & training helps to demystify these taboos. The sharing done by the peer health educators could easily arouse housewives' awareness due to similar background.

More resources should be put on services concerning housewives' mental health at community level. Feedback of housewives reflected that they could not access to existing resources and the cost of these services is high. In addition, some of the mental health services are labeled and deterred women from seeking help.

Preventive Programmes such as public seminars, exhibitions and "mental health-check" are suggested in order to release the burden of remedial and rehabilitative services.

**Poster No.:** D5

**Project No.:** 114003

**Project Title:** Healthy Women in the Millennium

**Administering Institution:** Haven of Hope Christian Service

**Project Team Members:** Mok E, To C

**Project Commencement Date and End Date:** 11/2001 to 10/2002

**Purposes/Objectives:**

To promote physical health of women through organisation of relevant health talks and workshops;  
To enrich women's social lives and support network, and enhance their self esteem by providing opportunities for making new friends and involvement in voluntary work;  
To help women monitor their stress levels and find ways to relieve their emotions; and  
To advance public awareness on taking responsibility for their own health.

**Activities/Programme:**

Upon enrolment as health ambassadors, each woman was given a comprehensive health assessment. Basic health package included four health talks covering breast and cervical cancer prevention, healthy eating and exercise, self-image and confidence enhancement and parenting. Advanced courses such as aromatherapy, menopause, osteoporosis, Chinese herbal medicine and first aid etc., were then available to members. Women were formed into three support groups according to their interests in healthy eating, physical exercise and mental health. They met regularly for mutual encouragement in healthy living and enriching social life. Six road shows and a major promotional event had been held. The consequent opportunities for voluntary work plus support groups were great venues for women to relieve stress. Each member was given a handbook to record their health assessment result and their participation in various talks, group meetings and voluntary work. The graduation ceremony was held to recognise outstanding ambassadors. Relevant VCDs were distributed to raise public awareness on women health. There had been media coverage during the course of the project through our district-wide newsletters and local newspapers.

**Targets/Recipients:**

Women aged between 25 and 55 living and/or working in Tseung Kwan O

Expected and actual attendance/participation:



A total of 160 women had been recruited, quite some of them had never participated in any community activities before.

Benefits derived:

The health knowledge and attitude of women was improved. Their awareness and participation toward regular health check was enhanced. They enjoyed better self-esteem and broader social network. Public awareness on taking responsibility for their own health was also prevalent.

**Extent of objectives achieved:**

Overall, the project was successful in achieving the objectives and sustainability was ensured.

Conclusions/Implications:

With appropriate training, women were effective in disseminating health information and modeling healthy living to their families, friends and the community. They could be empowered to contribute their part in promoting “TKO – Healthy City” .

**Poster No.:** D6

**Project No.:** 19050464

**Project Title:** Post-menopausal women walk towards a healthy life  
婦女健骨步更年

**Administering Institution:** Department of Orthopaedics and Traumatology, The Chinese University of Hong Kong

**Co-organiser(s):** The Family Planning Association of Hong Kong

**Project Team Members:** Leung KS, Sze PCP, Lau YWJ

**Project Commencement Date and End Date:** 1/5/2006 to 30/4/2008

**Purposes/Objectives:**

The purpose of our Programme is to promote bone health and physical fitness of the menopausal women. Through a series of activities, we would like to increase their awareness towards preventive measures of osteoporosis and to help them to gain a positive attitude towards healthy menopause. Besides, by the train-the-trainer concept, the knowledge of bone health and physical fitness would be widely spread. We hope that by spreading the information, the number of women suffering from osteoporosis in Hong Kong can be reduced.

**Activities/Programmes:**

The most upcoming activity of our Programme is the educational carnival. In the carnival, there will be three educational talks, including (1) the epidemiology and the related consequences of osteoporosis, (2) the nutritional balance in Calcium and Vitamin D uptakes and (3) the importance of weight-bearing exercises and physical fitness for postmenopausal women. There will also be interesting and interactive games in booths with brochures prescription.

The second activity is a set-up of two workshops within our project period. The first workshop is the Bone Health Ten-Combos Class (健骨十式拳), which will be held by Tai Chi Masters weekly. Participants of the workshop will lead the Ten-Combos exercise classes three times per week in different women clubs. Self-help exercise groups will be established to monitor the progress of exercise training.

The second workshop is the Nutrition Workshop (飲食新「鈣」念). It is the continuation of the nutritional Programme organized by the Family Planning Association of Hong Kong. The balanced diet with content of high Calcium and Vitamin D together with cooking tips is discussed in the workshop. VCD and nutritional recipes will also be manufactured and distributed to further enhance participants' nutritional knowledge in daily meal to promote bone health.

The third activity is drama promotion. In order to spread the messages of bone health in early

menopause, three promotional drama performances with debriefing sessions will be organized to public by a drama team of the Family Planning Association of Hong Kong. Throughout the performance, public awareness towards the importance of bone health, fitness strategies in early menopause and preventive measures of osteoporosis can be enhanced.

**Targets/Recipients:**

2000 women and their family members in the 7 Women Clubs of the Family Planning Association of Hong Kong

**Expected Benefits Derived:**

With the enhancement of knowledge in osteoporosis and its preventive measures, it is hoped that the rate of osteoporosis and the related fragility fractures can be reduced among the post-menopausal women. We also hope that the family members will also be benefited from the Programme and the whole family can enjoy a healthy and enjoyable life.

Poster No.: E1

Project No.: 111909

**Project Title:** "Clearing the Smoke": The quest for truth about cigarettes - A pilot multimedia anti-smoking programme for English Schools Foundation (ESF) & International Secondary Schools

**Administering Institution:** Life Education Activity Programme (LEAP)

Project Team Member: **Ching C**

**Project Commencement Date and End Date:** 1/2001 to 12/2002

**Purposes/ Objectives:**

To prevent smoking among adolescents by:

Developing students' refusal, problem-solving and decision-making skills;

Helping students understand the myths about smoking and the social and physical consequences of smoking.

To help parents understand smoking as a behaviour in adolescents and the ways to handle it.

To assist teachers in conducting follow-up sessions in the classroom.

**Activities / Programmes**

The programme consists of two major parts:

A 90-minute session facilitated by LEAP's educator adopting highly interactive activities including discussions, role-plays, quizzes and games, to impart knowledge and to develop skills.

Follow-up sessions by teachers with the students, using a resource pack provided by LEAP.

Other activities included discussions with teachers and a parent session to equip them with the knowledge and the skills to deal with drug related issues in children.

**Targets / Recipients**

Year 7 students from ESF and International Schools, their teachers and parents.

**Actual Attendance / Participation**

**The programme was delivered to 36 schools and reached some 4,000 students and 150 teachers.**

**Benefits Derived**

The programme helped students understand the effects of smoking and armed them with the skills to deal with social influences concerning smoking. The development of decision-making skills and

the clarification of myths about smoking were important components of an effective anti-smoking programme.

Teachers involved gained more experience in skill-based training, becoming more confident in conducting health-related education programmes.

Parent obtained information and learned skills to help prevent their children from smoking, and to deal with drug related issues.

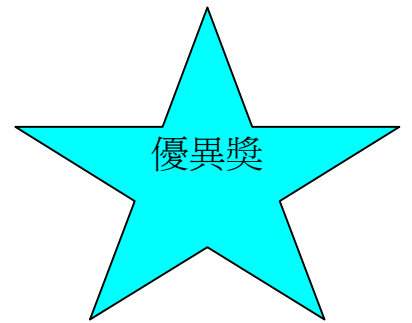
#### Extent of Objectives Achieved

The programme provided students with age-appropriate and accurate information concerning smoking and the skills to deal with social influences. The hands-on practice of refusal skills -- which gave adolescents the chance to learn and to rehearse, in a safe environment -- means to protect themselves from undue pressure. Such knowledge and skills helped students make responsible decisions and reject the temptation to smoke.

Both teachers and parents benefited from LEAP' s sessions. A better understanding of smoking related issues helped further strengthen the anti-smoking message at home and in school, extending the benefits of the programme to a wider community.

#### Conclusions / Implications

The programme for Year 7 students was well received by both teachers and students and the anti-smoking message had been successfully promoted to the community. The programme continues to be delivered to students in local, ESF and international schools. Following the implementation of this programme, LEAP produced two new programmes for Year 8 and 9 students, focusing on alcohol, marijuana and party drugs. All three programmes are now in operation, thus extending the reach of LEAP' s preventive education programmes to lower secondary students.



**海報編號：**E2

**計劃編號：**112901

**計劃名稱：**無煙新一代月刊  
“The fresh touch II” monthly newsletter programme

**主辦機構：**無煙健康行動協會（前名：吸煙或健康行動協會）

**計劃成員：**梁文傑

**計劃開始及完成日期：**10/1999 至 9/2001

**目標：**以月刊形式免費派發予本港青少年，向青少年推廣健康訊息及吸煙的禍害。

**活動大綱：**每月印刷一期，共推出 24 期，免費派發予全港 471 間中學。

**對象：**全港中學生

**預期及實際參與人數：**全港 471 間中學學生

**效益：**

向青少年推廣健康的訊息  
喚起青少年對吸煙問題的關注  
減低青少年吸煙率

**已達成的目標：**成功向青少年推廣健康的訊息，並喚起青少年對吸煙問題的關注。

**總結：**本會成功推出 24 期「無煙新一代」月刊，由於深得學生及老師的歡迎，現本會得到衛生署的資助，每月印刷 4 萬本，並將刊物推廣至全港的小學及特殊學校，使更多青少年能接收反吸煙的訊息。

**Poster No.:** E3

**Project No:** 19050014

**Project Title:** Project “ASEG” (Anti-Smoking Electronic Game)

**Administering Institution:** Action On Smoking or Health

**Project Team Members:** Kwong CK, Li LSF

**Project Commencement Date and End Date:** 1/3/2006 to 29/2/2008

Students in Hong Kong spend good portions of their time to play electronic games: most play at their home computers; some at the game shops in the streets. This project is to provide them a web-based game environment when the games supply them anti-smoking messages naturally. The visitors to the site will have fun. The site will have a series of games that cater to different parameters: genders, ages and preferences.

And the software in the system provides membership advantages: score calculation, encouragement, membership promotion, and the mailing lists for rewards to be sent to players.

The software will also provide statistics for the management to analyze.

This environment is to be maintained so that a form of community of anti-smoking teenagers is to be created. Good maintenance of this community provide a relax environment for the youth to continue to receive messages from the health authorities in Hong Kong on an interactive basis.

In other words, this is a hand-shaking environment where adults and teenagers share a common goal of building a better tomorrow for Hong Kong while the young people do not feel being lectured.

**海報編號：**E4

**計劃編號：**19050264

**計劃名稱：**「無煙社區·樂業安居」計劃

**主辦機構：**無煙健康行動協會（前名：吸煙或健康行動協會）

**計劃成員：**鄭志堅、李麗嫦

**計劃開始及完成日期：**1/3/2006 至 29/2/2008

**目標：**深入社區層面，向社會各界宣傳反吸煙的訊息，以達到無煙健康社區的概念。

**活動大綱：**

聯同不同地區團體，在 2 年計劃內舉辦多個巡迴展覽，以便社區人士能了解吸煙的禍害。  
聯同不同團體舉辦講座，以推廣無煙的訊息，並教導參加者如何鼓勵家人朋友戒煙，以透過朋輩社區力量，鼓勵吸煙人士戒除煙害。

**對象：**女性及青少年為主

**預期參與人數：**20 萬人次

**預期效益：**全港多區的居民能接觸反吸煙的訊息，並鼓勵身邊親朋戒煙。

**Poster No.:** E6

**Project No.:** 18040084

**Project Title:** Youth Quitline: An accessible telephone-based smoking cessation hotline for youth

**Administering Institution:** Department of Nursing Studies, The University of Hong Kong

**Co-organiser(s):** Hong Kong Council on Smoking and Health

**Project Team Members:** Chan SSC, Lam TH, Abdullah ASM, Leung AYM, Lam DOB, Fong DYT

**Project Commencement Date and End Date:** 1/6/2005 to 31/5/2007

**Objectives:** To publicize quitting among youth smokers, and help those who want to quit by providing advice and counselling through telephone.

**Activities/Programmes:**

Phase I: Training peer youth smoking cessation counselors

We organized a 2-day smoking cessation counselling training programme for 20 undergraduate and post-graduate students of the Faculties of Medicine and Social Sciences, the University of Hong Kong. The training was completed in August 2005 and all student counselors passed the examinations and qualified to provide “peer” telephone counselling to youth smokers.

Phase II: Publicity and implementation of the Youth Quitline

The Youth Quitline (2855-9557) was first launched in August 2005 from Mon to Fri (4 – 10pm), Sat (1 – 10pm) and Sun (1 – 7pm) and is now in good progress. A series of publicity efforts were implemented including setting up a website (<http://www.hku.hk/yquit>), printing posters and pamphlets, holding press conferences, publicizing through mass media and youth magazines, and initiating a smoker’s referral programme through collaboration with youth organizations and secondary schools.

The trained Youth Smoking Cessation Counselors (YSCC) provided tailored stage-matched counseling to the youth smokers, with supplementary education materials provided via the mail as necessary. Telephone follow-up at 1-week, 1-, 3- and 6-months are conducted to assess their smoking status and reinforce counseling. Preliminary data analysis indicated 60% smoked 10 cigarettes or less each day, two third had moderate to high nicotine dependence and one third are not ready to quit. Smokers who quit smoking at 6 months will be invited for a health assessment including exhale Carbon Monoxide (CO) monitoring and urine cotinine test. We hold regular case meetings with the YSCC to evaluate their intervention and recently provided an advanced training workshop to enhance their knowledge and skills.

**Targets/Recipients:**

All youth smokers aged 12 to 25, who smoke at least 1 cigarette in the past 30 days and able to speak Cantonese, were included. Those who are attending other smoking cessation services or not able to provide a contact telephone number are excluded.

**Expected Attendance/ Participation:** Assuming each telephone counseling lasts for 20 minutes, a maximum capacity of 5,148 calls can be handled. So far, 939 calls were received, of whom 144 smokers had completed baseline assessment and received telephone counseling.

**Expected Benefits Derived:** This is the first smoking cessation telephone counselling services for youth smokers in Hong Kong. The project aims to raise the awareness of youth smokers in quitting, reduce their life-long morbidity and mortality, and establish evidence on smoking cessation among Chinese youth smokers in Hong Kong.

**Poster No.:** E7

**Project No.:** 19050504

**Project Title:** Promoting women's health: A gender specific smoking cessation program for female smokers in Hong Kong

**Administering Institution:** Department of Nursing Studies, The University of Hong Kong

**Co-organiser(s):** Women organizations who joined the Women Against Tobacco Taskforce (WATT)

**Project Team Members:** Chan SSC, Lam TH, Wong EMY, Leung GM

**Project Commencement Date and End Date:** 1/4/2006 to 31/3/2008

**Objectives:** To publicize quitting among female smokers, and provide gender-specific smoking cessation counseling to women who want to quit smoking.

**Activities/Programmes:** The project consists of three phases and we have just started Phase I.

Phase I: Build up a network and need assessment

A Women Against Tobacco Taskforce (WATT) will be set up jointly with representatives from women organizations in Hong Kong, and led by the Department of Nursing Studies (HKU). A need assessment survey and focus groups will be conducted among women volunteers and staff to provide data for the design and delivery of a women smoking cessation counseling training Programme.

Phase II: Develop a smoking cessation training curriculum for the women volunteers

Based on the needs assessment data, we will design and deliver a tailor-made smoking cessation counseling training Programme for the woman volunteers and staff. Interested woman volunteers will be trained to provide gender-specific advice to help women quit smoking,

Phase III: Set up and evaluate a gender-specific smoking cessation counseling service

Trained women counselors will provide brief smoking cessation advice to female smokers and make referral to a nurse-led smoking cessation Programme at the Centre for Health Promotion (CHP), Department of Nursing Studies of the University of Hong Kong, as necessary. Successive follow up at 1-week, 1-, 3- and 6-months will be conducted to assess the quit rate and other outcomes. Lastly, an overall evaluation of the programme will be conducted.

**Targets/Recipients:**

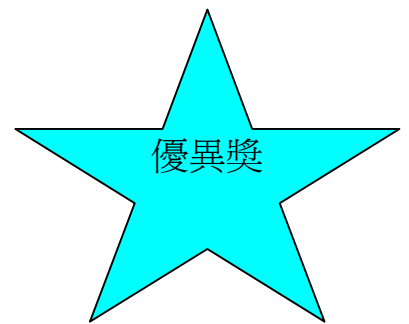
Phase I and II – All staff and volunteers from selected women organizations who are interested to undertake training to help women quit smoking.

Phase III – All female current smokers in Hong Kong.

**Expected Attendance/ Participation:** A maximum capacity of 200 participants from the WATT can be trained as smoking cessation counselors. According to the Thematic Household Survey of the Census and Statistics Department in 2002, there were about 107,000 (3.6%) female daily smokers with age  $\geq$  15 years old.

**Expected Benefits Derived:** This is the first smoking cessation counseling service tailor-made for female smokers in Hong Kong. The set up of WATT can form a network with women and related organizations to promote quitting in female smokers and to arouse public awareness of the hazardous effects of smoking on sexual, reproductive and child health, cancers, cardiovascular and

lung disease among women. The successful completion of this Programme will provide a model for the future service provider of gender-specific smoking cessation Programmes in Hong Kong.



Poster No.: F1

Project No.: 116001

**Project Title:** Awareness & management of indoor air quality in hospitals

**Administering Institution:** <sup>1</sup>Department of Manufacturing Engineering and Engineering Management, City University of Hong Kong

**Co-organiser(s):** <sup>2</sup>Department of Mechanical Engineering, The University of Hong Kong  
<sup>3</sup>Department of Biology and Chemistry, City University of Hong Kong

**Project Team Members:** Chan AHS<sup>1</sup>, Leung MKH<sup>2</sup>, Lam PKS<sup>3</sup>

**Project Commencement Date and End Date:** 1/8/2001 to 31/12/2003

### **Purposes/Objectives**

The purpose of this project was to raise the IAQ awareness in hospitals in Hong Kong. The staff at all levels would be trained to provide and maintain good IAQ to ensure healthy and safe environment for themselves and, more importantly, for the patients.

### **Activities/Programmes**

The whole project was implemented in three phases. The first phase was conducted with the aim of identification of the nature of IAQ and causes of air pollutants in hospitals in Hong Kong. The second phase focused on the development of Management Guidance and Self-Assessment Software Kit for IAQ. In the final phase, there were seminars and symposium presentation given separately to the health care, engineering services, and supporting services staff for raising their awareness of IAQ importance and enriching their knowledge of good IAQ practices for hospitals.

### **Targets/Recipients**

The primary target group includes health care staff, facility management engineers and administrative staff who strive to manage and run their hospitals with healthful indoor air quality. Other professionals, such as architects, building services engineers, consultants etc., working closely with health care facilities, will also find the project deliverables useful.

### **Expected and actual attendance/participation**

Expected participants: 500

Actual participants: 868

### **Benefits derived**

The participants included the target health care workers and hospital related engineers. They shall apply the relevant, useful knowledge to improve hospital indoor air quality.

### **Extent of objectives achieved**

Booklets entitled *INDOOR AIR QUALITY FOR HOSPITALS* with compact discs have been printed and distributed to target audiences. This book attempts to provide guidance to facilitate understanding, effective control and management of indoor air quality in hospitals to protect the patients and hospital staff.

### **Conclusions/Implications**

The project was implemented successfully. All the objectives were achieved. Positive feedbacks were received from the target audiences. The deliverables of this project should have raised staff awareness and provided useful information and software tools to facilitate the management of hospital indoor air quality.

海報編號：F2

計劃編號：117009

計劃名稱：童樂同行

Community Coordinated Care for Children with Chronic Illness (5C project)

主辦機構：香港小童群益會

計劃成員：陳國邦、陳英偉

計劃開始及完成日期：1/11/2001 to 22/3/2003

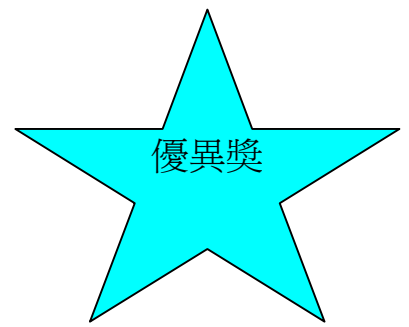
### 計劃摘要

2001 年在健康護理及促進基金的贊助下，一個以著重建立社區支援與照顧、凝聚專業力量與社區資源及倡議社區人士支持與關注的關懷長期病患兒童(下簡稱為病童)計劃『童樂同行』才得以開展。計劃突破了以往限於醫院內提供遊戲服務的框架，讓服務從病童本身能擴展至病童家庭和社區，令影響層面更廣更闊，亦更全面照顧病童在成長上及學習上的發展和需要。

多項的社區關注行動是『童樂同行』的重要部份之一，目的不但是要提升大眾對病童及其家庭的接納，更重要的是建立及匯聚了關懷病童及其家庭的網絡。瑪嘉烈醫院兒童及青少年科和智樂兒童遊樂協會為計劃開展時的合作伙伴，其後漸漸得到病童互助組織、專業人士及青年義工的支持。

愉快的家庭生活、社區及醫護專業的有效協作與病童在病患中健康成長有著密切關係，透過不同主題的親子和社區活動，擴闊病童、家長和社區義工的相處經驗及空間，促進跨專業的協作。而最受病童歡迎的活動，要算是成長小組如舞蹈表演工作坊，我們發現病童在參與後的自信上有明顯進步。

『童樂同行』是關懷長期病患兒童及其家庭的一個嶄新模式及嘗試，讓病童的身心發展得到關注，更讓關懷能在社區及社會上展現，亦是關懷長期病患兒童及其家庭的重要里程。



**Poster No.:** F3

**Project No.:** 198101

**Project Title:** Video Production for Education in Diabetes Mellitus

**Administering Institution:** Diabetes Hongkong

**Project Team Members:** Tiu SC, Cheng W, Khor S, Kwan E, Chow CC, Mok M, Wong P, Cheng F

**Project Commencement Date and End Date:** 11/1998 to 3/2001

### **Purpose/Objectives**

The treatment of diabetes mellitus requires a multi-disciplinary approach and patient education is an essential step in diabetes care. From experience of different countries in the world, videos are an important and effective audio-visual tool in patient education. The purpose of this project was to produce an updated and tailor-made education video on Diabetes Mellitus (particularly for the Chinese patients).

### **Activities/Programmes**

A project team (see above for composition) was set up to work on the content and script of the videos and a production company was appointed to do the shooting and dubbing. 2,000 sets of education VCDs (presented in 3 discs and made available in both Cantonese & Putonghua) covering the following 8 topics on diabetes mellitus were produced:-

1. Basic concepts and pathophysiology;
2. Dietary management
3. Self monitoring and control
4. Oral medication and Insulin therapy
5. Macrovascular complications (ischaemic heart disease, stroke, peripheral vascular disease and foot complications)
6. Microvascular complications (retinopathy, neuropathy and nephropathy)
7. Childhood diabetes
8. Gestational diabetes

### **Targets/Recipients**

All patients with diabetes and their carers in Hong Kong  
Overseas diabetes associations who take care of Chinese patients  
People with diabetes and their carers in the mainland China  
Everyone who is interested to know more about diabetes mellitus

### **Expected and Actual Attendance/Participation**

Copies of these education VCDs have been distributed free-of-charge to different departments of all hospitals under Hospital Authority (including Diabetes Centers, Paediatric, Dietetic, GOPC, SOPD, patient resource centers), private hospitals, pharmaceutical companies, local and overseas medical

associations and diabetes related organizations, public libraries run by the Leisure and Cultural Services Department, libraries and medical libraries at universities, Maternal and Child Health Centers and Central Health Education Unit run by the Department of Health, elderly centers and general practitioners who are interested in diabetes mellitus.

### **Benefits Derived /Extent of Objectives Achieved**

Feedbacks from audiences were very positive and encouraging. Ongoing requests for copies of VCDs are being received from those who are interested. The project has proved to be effective in raising awareness and understanding of diabetes mellitus as well as enhancing skills in diabetes management.

### **Conclusions/Implications**

With funding support from the Health Care and Promotion Fund, we were able to increase knowledge and skills in diabetes care and management through the 2,000 sets of education VCDs on updated information regarding diabetes mellitus. Developed by the experienced local endocrinologists and diabetes nurse specialists, the videos were especially tailor-made for Chinese patients with diabetes. Therefore, they have proved to be an effective teaching kit promoting diabetes education at medical associations and patients' homes.

### **Acknowledgement**

Diabetes Hongkong Education Video Production Team (members including Tiu SC, Kwan E, Leung J, Chow F, Lau IT, Khor S, Kan E, Leung G, Yeung T, Lau T and Cheng W).

Voluntary Actors/Actresses in the video (including Choi KL, Woo YC, Chiu RW, Ko GTC, Chan E, So T, Cheung M, Au SKY, Lam YH, Cheng W and Koo P).

海報編號：F4

計劃編號：19050314

計劃名稱：運動保方 - 糖尿篇

主辦機構：香港仔街坊福利會社會服務中心

計劃成員：吳偉明

計劃開始及完成日期：1/4/2006 至 30/6/2007

**目的/目標：**

提高坊眾對預防糖尿病的關注；  
向坊眾推廣持續運動和均衡飲食對預防糖尿病的益處；  
締造促進健康生活的環境；  
鼓勵糖尿病前期病患者和糖尿病高危人士建立持續運動和均衡飲食並重的健康生活方式。

**活動/推行大綱：**

1. 「防糖尿運動保方」巡迴展：廣泛地向南區各階層推廣持續運動和均衡飲食對預防糖尿病的益處，從而提升他們對改善個人健康的意識；
2. 「運動保方資源暨健體閣」：以陳列方式展示有關介紹體適能及營養的書籍或多媒體，方便坊眾閱覽和締造促進健康生活的環境；
3. 「運動、營養滋補計劃」：為糖尿病前期病患者、糖尿病高危人士以及其家屬舉辦各類的運動及營養班、康復治療小組及互助小組等，務求從預防性以及治療性兩方面令這些人士可一一受惠，建立健康的生活模式。

**對象/受惠者：**

糖尿病前期病患者  
糖尿病高危人士  
不同年齡的坊眾及社區人士

**預期參與人數：**

1. 「防糖尿運動保方」巡迴展：6,000 人次；
2. 「運動保方資源暨健體閣」：18,000 人次；
3. 「運動、營養滋補計劃」：3,655 人次。

**效益：**

**個人健康層面：**除增加參與者對持續運動及均衡飲食的認知和意識外，更能幫助他們強健體魄以預防疾病或改善病情，並有助建立正確的健康生活模式。

**社區認知層面：**藉著此計劃，健康的訊息將廣泛地在社區內推廣。以提高各階層坊眾的健康意識，選擇建立健康生活習慣。而運動健康資源暨健體閣的設立，除為南區坊眾提供不同類型的健康資源外，更有助締造一個理想的運動環境供坊眾使用。此外，透過出

版報告書及舉行發佈會，向社會大眾傳媒及醫社界分享計劃的成效，並將是項計劃的服務模式推廣到預防其他長期病患的工作上，以提升全港市民的生活質素和減低香港醫療體系未來沉重的經濟負擔。

**鳴謝：**

長者社區支援服務委員會

**Poster No.:** F5

**Project No.:** 19050374

**Project Title:** From Safety Home to Safety Community: Prevention and Education Project of Occupational Safety and Health (OSH) for Domestic Workers and Unpaid Homemakers

**Administering Institution:** The Hong Kong Federation of Women's Centres (HKFWC)

**Project Team Members:** Fong MY, Law CYT, Chan DHC

**Project Commencement Date and End Date:** 01/04/2006 - 30/09/2007

### **Abstract**

Both paid domestic workers and unpaid homemakers work on household commitments in a domestic setting. However, the safety and health issues related to the working conditions of domestic workers and homemakers are largely invisible. Figures show that domestic accidents are common and hazards do exist in a domestic work setting.

In a bid to address their neglected need of OSH, this project aims at providing basic OSH knowledge and practices to the women domestic workers and unpaid homemakers in order that they can work in a "safety home". Furthermore, this project strives to establish a "safety community" that aims at promoting a culture of safety in the community, not only for the individuals, but also for family, local organisation as well as business sector.

The project will adopt a *community-based approach* and complement the existing service gap in OSH promotion by engaging workers in the domestic setting, who are predominantly women, in the community education and awareness of OSH.

### **Purposes/Objectives:**

- To provide OSH knowledge and community resources to women who work in domestic environment, including paid domestic workers and unpaid homemakers;
- To introduce preventive measures to domestic workers and homemakers in order to prevent or minimise the OSH hazards in their work setting;
- To educate women on the principles of safe conduct at work and to be resourceful in basic OSH;
- To motivate women to engage in community health promotional activities; and
- To promote the concept of "Safety Community".

### **Activities/Programmes:**

Educational activities: community booths, OSH talks in the community, educational pamphlet (tips and checklist for homemakers' OSH) and sharing forum.

Training: in-service training workshops for peer health educator.

Referrals service: information-giving and case referral service

**Targets/Recipients:**

Women who are paid domestic workers; and

Women who are unpaid homemakers, looking after their own home without pay.

**Expected Attendance/Participation:**

10,000 persons including those who work in domestic setting and the general public to receive information on OSH;

480 enrolment to participate in OSH talks and learn basic OSH knowledge;

60 peer health educators to serve the larger community in the long run; and

100 women domestic workers, unpaid homemakers, and general public to share their experience of achieving OSH at domestic setting.

**Expected Benefits Derived:**

To raise the public's awareness and concern for OSH in the domestic setting;

To educate domestic workers, homemakers and the public on the principles and basic knowledge of OSH at domestic setting;

To equip women as an educator in OSH at home and promoter in the community; and

To share promotion model and the experience with other NGOs and the public.

**Acknowledgement:**

1. Dr. CHAN Kan Kam
2. The Hon CHAN Yuen-han, JP
3. Dr. IP Fu-keung
4. The Hon LI Fung-ying, BBS, JP
5. Mr. Eddy LO King Sang
6. Prof. Ignatius YU Tak Sun

Poster No.: G1

Project No: 110905

**Project Title:** Active living – the way to healthy ageing

**Administering Institution:** CUHK-WHO Collaborating Centre for Sports Medicine and Health Promotion

**Co-organiser(s):** <sup>1</sup>Department of Orthopaedics & Traumatology, CUHK  
<sup>2</sup>Department of Sports Science & Physical Education, CUHK

**Project Team Members:** Chan KM<sup>1</sup>, Wong S<sup>2</sup>, Ha A<sup>2</sup>

**Project Commencement Date and End Date:** 1/3/2000 to 31/3/2002

Purposes/Objectives

To enhance the awareness of elderly on the health benefits of leading an active lifestyle;  
To introduce beneficial physical activity in daily life where elderly can easily begin with; and  
To provide support to workers in elderly centres to increase the provision of physical activities through modification of the programme.

### **Activities and Programmes**

Resources materials

A Resource Manual for social workers in elderly centres on the ways of promoting active ageing;

A 20-min video on “Active and Healthy Ageing” ;

A Health Passport – a self-monitoring log book;

Briefing sessions were organized to introduce the set of materials.

A 3-month pilot programme for 200 elderly at an elderly centre which includes:

Pre- and post-test: Functional assessment and physical activity questionnaire before and after an exercise intervention;

A 12-week Exercise Intervention: 1-hour exercise, 2 days/week, including warm-up, stretching, strength training and cool-down exercises, for the experimental group;

Monthly Health Talks and Counseling Sessions on:

“How to lead an active ageing life” ;

“Exercise and Nutrition” ;

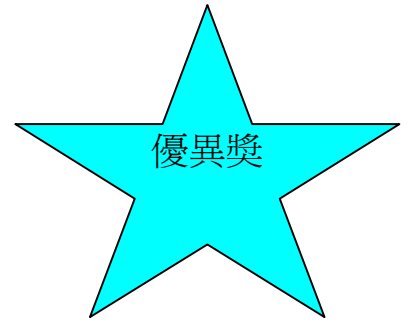
“Exercise and Osteoporosis”

**Targets/recipients:** Sedentary elderly through the network of elderly centres.

### **Expected and Actual Participations**

**Expected:** to reach out over 100,000 elderly via the network of 400 elderly centres with the comprehensive set of resources materials;

**Actual:** resources materials were sent to the elderly centres, with another 200 elderly from one of



the centres participated in the pilot programme and monthly health talks. (The no. of participants in the pilot programme is limited by insufficient funding).

### **Benefits Derived**

A new concept of health promotion among elderly incorporating physical activity in daily life – a safe and economical way;

Hopefully, in long run, the concept helps reduce the escalating cost of medical care for elderly.

### **Extent of Objective Achieved**

The pilot programme proves its effectiveness in introducing and promoting beneficial physical activity, which is easy and simple, to elderly in their daily lives;

The comprehensive set of resources materials developed essentially help disseminate the message of active living, which in turns help raise the awareness of elderly on the health benefits of leading an active lifestyle;

The resource materials together with the programme design provide supports to the health-care workers in their promotion of physical activities among the elderly.

### **Conclusions/Implications**

Hong Kong is faced with the world trend of an ageing population which poses an immense burden to the society; and keeping elderly healthy is one of the ways to ease such burden;

The project also helps change and shape the attitude of elderly in becoming more active in their daily lives;

The innovation of self-monitoring health passport can be and has also been adopted in other health promotion programme, such as the promotion of Tai Chi among elderly, which essentially provide another alternative to elderly to lead a healthy lifestyle.

### **Acknowledgement (in the alphabetical order)**

Audio-Visual Division, The Chinese University Press  
Central Health Education Unit, Department of Health  
Hong Kong Family Welfare Society

**計劃編號:** G3

**計劃編號:** 114007

**計劃名稱:** Healthy Elderly into the 21<sup>st</sup> Century (健康長者新紀元)

**主辦機構:** 香港傷健協會赤柱石澳長者鄰舍中心

**計劃成員:** 陳澤強

**計劃開始及完成日期:** 4/2001 至 12/2002

**目的/目標:**

加強長者對健康資訊的認識，從而減低疾病的形成，減緩退化的速度。  
使長者明白及接納老化的過程，愉快及積極地安享晚年。

**活動/推行大綱:**

計劃分為「醫、食、住、行」及「特備活動」兩方面推行，包括：「醫」方面 - 健康講座、健康檢查、健康密語(健康資訊)；「食」方面 - 滋粥常樂、百麵玲瓏(午膳服務)及健康月餅送贈；「住」方面則有家居清潔大行動；「行」方面 - 健身器材使用、健體香功、太極氣功十八式及土風舞班；「特備活動」則有健康長者推廣計劃、健康長者新紀元開幕禮、健康長者新紀元閉幕禮。

**對象/受惠者:** 赤柱區內長者及坊眾

**預期參與人數:** 3130 名

**實際參與人數:** 34660 人次

**效益:**

是次計劃最重要的是讓長者們可從認知上(例如：健康講座、健康密語)去加強對健康資訊的認識，此外，透過健康檢查、使用健身器材、參與各類運動班，也能做到「身體力行」去鍛鍊自己的身體。

**已達成的目標:**

長者們能從認知上(例如：健康講座、健康密語)去加強對健康資訊的認識，在潛移默化之下，不斷加強其關注健康的重要性，故預期目標是能達致的。

**總結/影響:**

健康檢查及健康講座活動亦繼續舉辦下去，並將此延展至南區其他偏遠地區，包括：石澳及大浪灣，令更多偏遠長者能獲得相關服務。

**鳴謝:**

社會福利署 香港紅十字會 香港航海學校 明愛赤柱青少年綜合服務

香港青少年培育會 佛教華夏中醫學院 所有曾協助本計劃的義工團體及朋友

**Poster No.:** G4

**Project No.:** 115006

**Project Title:** A reminiscence project: Revitalizing lives of community-dwelling older adults

**Administering Institution:** Department of Rehabilitation Sciences, The Hong Kong Polytechnic University

**Co-organiser(s):** Occupational Therapy Department, Kwai Chung Hospital

**Project Team Members:** Chung JCC, Lee G, Man V

**Project Commencement Date and End Date:** 6/2001 to 8/2003

**Project Objectives:**

The project aimed to (1) promote psychosocial wellbeing of community-dwelling older adults through a structured reminiscence Programme, and (2) to develop a culturally-relevant reminiscence resource kit to be used by elderly service units.

**Activities:**

*Phase I:* A case-controlled study on reminiscence was implemented to community-dwelling older people. The intervention group attended a 12-weekly session reminiscence Programme implemented by an occupational therapist while the control group attended usual Programmes of the community centres.

*Phase II:* An evidence-based reminiscence resource kit was developed, with the generous support from the Hong Kong Museum of History. The resource kit consists of a user manual, an information booklet, a pack of 52 reminiscence picture cards, and a computer-based reminiscence Programme.

**Targeted Participants:**

*Phase I:* Participants of the structured reminiscence programme were older people who live in the community. *Phase II:* Targeted recipients of the reminiscence resource kit were (1) elderly services units of Hong Kong such as geriatric day hospitals, day care centres for elderly people, care & attention homes, and nursing homes, (2) overseas organizations serving Chinese elderly people who came from Hong Kong, (3) local museums, and (4) school libraries.

**Actual Attendance / Participants:**

*Phase I:* Eighty-seven community-dwelling older adults participated in the reminiscence study in which 44 attended the reminiscence programme and 43 were controls. At completion, all participants attended a debriefing session in which they shared and discussed their experience and likeliness of reminiscing past events.

*Phase II:* A seminar on 'Application of reminiscence to elderly care services in Hong Kong' was held in late March 2004, with an attendance of about 250 frontline practitioners of various

service providers for elderly people. Results of the reminiscence study and the contents of the resource kit were discussed in the seminar. In addition, one thousand reminiscence resource kits were produced and disseminated to the local service units for older people, libraries and museums.

**Benefits derived:**

The case-control study showed that reminiscence had the value in maintaining quality of life, particularly physical wellbeing, of community-dwelling older adults. The development of a culturally relevant reminiscence resource kit supports a wider application of reminiscence to local older adults, including those who are healthy, with chronic illnesses, with cognitive impairments, and with psychosocial adjustment problems.

**Extent of objectives achieved:**

The two study objectives were achieved.

**Conclusions/Implications:**

Reminiscence is recommended as one of the health promotion activities for the maintenance of psychosocial wellbeing of community older people.

**Acknowledgement:**

We are grateful to the generous support of the Hong Kong Museum of History, and the active participation of the 87 older participants and four participating centers, namely Chan Kwan Tung Social Centre for the Elderly, Caritas Social Centre for the Elderly - Lai Kok, Ho Yee Social Centre for Senior Citizens, and Lok Fu Social Centre for the Elderly. We thank Nina Cheung, Amy Leung and Crystal Tse, occupational therapy graduates, for their creative ideas in the development of the computer-based reminiscence programme.

**Poster No.:** G5

**Project No.:** 18040284

**Project Title:** An Intergenerational Reminiscence Project for older people with early dementia

**Administering Institution:** Department of Rehabilitation Sciences, The Hong Kong Polytechnic University

**Co-organiser(s):** The Hong Kong Alzheimer's Disease Association

**Project Team Members:** Chung JCC, Dai DLK, Yuen AS

**Project Commencement Date and End Date:** 15/9/2005 to 14/3/2007

**Project Objectives:**

The project aims to (1) impact positively on the mental health of elderly participants with early dementia and (2) promote awareness of adolescence participants on brain health and positive images of dementia sufferers.

**Activities:**

In this Intergenerational Reminiscence Project (IRP), the student participants of secondary and tertiary education level will attend a 6-hour training programme organized by an occupational therapist. During which, they will be introduced to the aspects of developmental characteristics of older people, prevalence and clinical presentations of older people with early dementia, communication strategies, concepts of reminiscence, life story books, and the use of the reminiscence resource kit (Chung & Lee, 2004). Moreover, the reminiscence activity protocol to be used with the elderly participants will be introduced and discussed.

Two student participants will be paired up and assigned to one elderly participant with dementia. This dyad will engage in a reminiscence programme for a period of 12 weekly sessions. During which, the student participants will support the elderly participants to develop a personalized life-story book; and at the same time, the elderly participants are given the opportunities to share their knowledge and past experiences to the younger generation. The occupational therapist will provide ongoing support to the student participants and monitor the participation performance of the elderly participants.

After the main reminiscence programme, a poster exhibition and a publication will be produced to illustrate the essence of the IRP and the life stories of older people with dementia.

**Targeted Participants:**

50 elderly participants with early dementia and 100 secondary / tertiary school students will be recruited.

**Expected Benefits derived:**

The IRP aims to bring together the old and the young generations and to facilitate a win-win

situation for both groups. The adolescence group will gain the knowledge of brain health, aging and dementia, and to learn communication skills with older people. By listening to the old-time stories and experiences of the elderly participants, students will develop a respect for their past contribution the family and the society. Moreover, they will develop an enhanced self-esteem and confidence by rendering support to the elderly participants for the production of the life-story books.

As for the elderly participants with early dementia, they are facilitated to engage in reminiscence, a cognitive-stimulating intervention, in which they are supported to develop a personalized life-story book, which will become an important asset for the elderly participants and their families.

**Poster No.:** G6

**Project No:** 117005

**Project Title:** Golden Twilight Years – Elderly Mental Health Promotion Programme  
豐盛晚年 - 長者心理健康推廣計劃

**Administering Institution:** The Mental Health Association of Hong Kong

**Project Team Members:** Foo TN, Wong W, Mang S

**Project Commencement Date and End Date:** 1/2002 to 6/2002

**Purposes/Objectives:**

To make the elderly aware of the importance of mental health to their well being.

To arouse awareness in private home operators and their caring staff that the mental health of the elderly is important for their well being as well as for smooth operation of the homes.

To encourage private home owners/operators to provide mental health training for their caring staff and design social and recreational programme for their elderly residents in order to promote the latter's mental health.

**Activities/Programmes:**

A 4-session (2 hours/session) mental health training course for 20 volunteers.

A 2-session (2 hours/session) training course for caring staff.

A 2-session (1-2 hours/session) social and recreational programme for the elderly.

**Targets/Recipients:**

Elderly residents, operators, caring staff of private residential homes, relatives or family of the elderly

Elderly residents and caring staff of other private homes (through distribution of fliers only)

**Expected and Actual Attendance/Participation:**

We expected and successfully invited 28 private homes for the elderly to join our programme. The total number of elderly participants was around 1000 and there were over 100 caring staff participants.

**Benefits Derived:**

The mental health of the elderly residents in private residential homes and relationship with relatives will be improved.

The caring staff will strengthen their skill, treat the elderly with respect and render them emotional support.

Through the publicity on the project, the public will gain an awareness of the importance of promoting mental health among elderly in residential homes.

The 20 volunteers will acquire knowledge about and experience in mental health.

Experience obtained from this project will be beneficial to launching future programme to promote elderly mental health.

**Extent of Objectives Achieved:**

The elderly really enjoyed the recreational programme and the caring staffs were more aware about their knowledge on psychology of elderly.

**Conclusions/Implications:**

From the feedbacks and result of the questionnaire, we can see that there is a need to increase the awareness for the importance of mental health of the elderly and to sharpen the skills of the caring staff. Moreover, our success was that the elderly, the caring staff and the volunteers who participated in this programme derived great pleasure from this programme. They all wished for more programme of this nature.

**Acknowledgement:**

We should thank the funding body for giving us a chance to hold this programme and our success was that the elderly, the caring staff, and the volunteers derived great pleasure from this meaningful programme.

**海報編號：**G7

**計劃編號：**18040404

**計劃名稱：**同行松柏路—弱智人士老年健康計劃

**主辦機構：**基督教懷智服務處

**計劃成員：**王小慧、陳子菲、葉志榮、鄧志榮

**計劃開始及完成日期：**1/11/2005 至 31/10/2007

**目的/目標：**

推動弱智人士及照顧者關心身心健康，認識老化的過程和影響；  
建立以弱智人士及照顧者為讀者群的健康與教育資源網站。

**活動/推行大綱：**

製作弱智人士身心健康為主題的網站，幫助弱智人士及其照顧者認識健康資訊和照顧技巧。

舉辦分區教育巡迴展覽給全港弱智人士及照顧者參加；

運用海報傳達弱智人士關注身心健康的訊息。

**對象/受惠者：**弱智人士及其照顧者，包括家人和復康機構職員。

**預期參與人數：**

到訪網站的人數 20,000 人次或以上；

網站推出期間處理對弱智人士老年健康的諮詢達 500 個；

巡迴展覽中共有 3,000 位弱智人士和照顧者參加。

**預期效益：**

發展一個具本地特色的弱智人士的老年健康教育與資源網站。

使弱智人士及照顧者關心身心健康，得享健康高齡生活。

**海報編號：**G8

**計劃編號：**18040434

**計劃名稱：**『心裡陽光耀晚晴』長者精神健康計劃  
Sun Shine in the Heart, Lit up the Life of the Elderly

**主辦機構：**鄰舍輔導會

**協辦機構：**葵涌醫院

**計劃成員：**張嘉懿、李月英、李蔭國、文秋月

**計劃開始及完成日期：**23/5/2005 至 22/11/2006

**目的/目標：**為疑患有認知障礙或抑鬱症長者及其照顧者提供復康及支援服務，以提倡『豐盛晚年』。

**活動/推行大綱：**服務內容包括社區教育講座、辨識評估、復康小組訓練、家居復康諮詢、照顧者支援服務及轉介服務，並印製預防長者精神疾病的單張及舉辦大型研討會作經驗分享。

**對象/受惠者：**居住於深水埗、葵涌及東涌區六十歲或以上的長者。

**預期參與人數：**計劃推行至今已有 910 位及 198 位長者分別參予講座及認知或情緒評估，當中約有兩成長者需由職業治療師/社工再作跟進。20 名長者經評估後參加『記憶力訓練小組』或『健康生活模式改善情緒小組』，他們在短期記憶或情緒方面均有改善。計劃預期共有 60 名長者參加復康小組/治療及 200 名專業同工參加研討會。

**預期效益：**計劃可推廣公眾對長者精神健康疾病的認識，並為有需要的長者及其照顧者及早提供復康訓練及支援服務。計劃亦希望提高同工對預防長者精神健康疾病的意識及互相分享經驗，以攜手提升服務質素。

**鳴謝：**深水埗及東涌區安老服務單位及香港理工大學復康治療學系。

**海報編號：**G9

**計劃編號：**18040514

**計劃名稱：**「長青康健共一家」社區健康促進計劃

**主辦機構：**香港聖公會麥理浩夫人中心

**協辦機構：**區內學校及地區長者中心

**計劃成員：**家庭活動及資源中心主任及兩名註冊社工統籌

**計劃開始及完成日期：**10/4/06 至 10/3/07

### **目的 / 目標：**

本計劃宣揚「青」少年、「家」庭、「長」者之共融，以「青」少年為核心，推廣健康訊息

理念：

- ~ 青少年朋輩之互助網絡，有助將健康訊息廣泛推廣，及早預防社區問題之產生。
- ~ 青少年具多方面潛能和創意觸覺，乃社會之重大資本，他們具備回饋社區之能力。
- ~ 跨代參與有助擴展青少年之視野和對健康生活之體驗。

目的：整個計劃之整體目的，包括下列各項：

提升青少年對健康生活模式概念之理解，從認知層面以致實踐階段的過程中加強他們建立身心及社交健康的正面態度。

透過培訓、教育及實踐，促進青少年參與社區健康活動之動機，增強其自我價值感。

推動青少年社區參與及互助精神，凝聚核心之「健康大使」隊伍，以助本計劃及未來其他社區促進計劃之推動。

### **活動 / 推行大綱：**

整項計劃包括三大部份：

教育培訓系列之「活得健康」講座系列、「凝聚動力」互動教育及「健康大使添動力」

義工招募及培訓；

健康推廣實踐之「長青互愛」長者探訪計劃、「健康滲透社區」巡迴展覽、「家庭生活健康樂」教育活動；

知識經驗凝聚之「健康的動力」社區教育嘉年華暨嘉許禮及「您我健康創動力」經驗分享及電腦光碟製作。

**對象 / 受惠者：**以青少年為主，及服務長者和家庭

**預期參與人數：**共約 6,000 人

**預期效益：**能成功與學校合作培訓青少年義工隊，成為「社區健康大使」，為弱勢社群推廣健康訊息。大使們更配合區內獨居長者之需要，為他們提供家訪慰問及向長者們宣揚健康生活之訊息，以促進長幼間之共融及互助。義工們更擔當家庭活動之協助支援之角

色，為親子舉辦以健康為題之遊戲活動，讓他們將所學到的知識貢獻社區，有效地提升他們之自信心和能力感，讓參加者由服務對象提升為服務提供者。

## 健康護理及促進基金委員會 (2004-2006)

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## 小組委員會 (2004-2006)

Promotion Sub-committee (2004-2006)

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## **健康護理及促進基金**

-非研究性質的促進健康計劃

透過提高公眾的健康意識，改變行為習慣，以及締造健康生活環境，鼓勵市民選擇和維持健康的生活方式。

Health Care and Promotion Fund

- Non-Research Health Promotion Projects

To help people adopt healthier lifestyles by enhancing awareness, changing behaviour or creating an environment that supports good health practices.

### **聯絡我們**

研究基金秘書處

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