Social Worker's Role and Service of Human Trafficking Victim Identification and Crime Investigation

Yu-Sien CHEN
Taipei Women's Rescue Foundation
Taiwan

In Taiwan, social worker's services of escorting crime victims in investigation of suspected human trafficking cases is an unique protection services in order to help many migrant workers who are constrained to access sufficient information and social support in local society which causing migrant workers vulnerable to be trapped inhuman trafficking crime. In Hong Kong, we can also find a similar social environment, however, the current procedure of victim identification in Hong Kong does not involve social worker’s service. Social worker's feature of escorting crime victims to investigation is ideally to provide emotional support and impart rights for suspected victims in investigation. Although Taiwan has a well-established system for human trafficking and has been ranked first by the Trafficking-in-Persons Report for nine consecutive years, the escorting crime victims to investigation system is still not completely functioned in investigation. In response to stakeholder’s different expectation and cognition during the investigation stage, social workers of escorting crime victims must develop flexible work strategies which make social workers active but implicit in the service.

Both Hong Kong and Taiwan are highly dependent on migrant workers’ contribution. This study compares Hong Kong and Taiwan's human trafficking prevention regulations and services, and discusses the more active roles social workers could play in human trafficking crime, and shares social worker’s experiences of escorting crime victims in investigation in Taiwan.
The Establishment of a Three-dimensional Service System for Hospice & Palliative Care in China: A Stakeholder Theory Perspective

Ze-Tao ZHANG
Hospice Palliative Care Alliance of China Foundation
China
Ya-Guang LI
Xiang-Fei PENG
Chinese Academy of Social Sciences, Graduate School

The great demand caused by problems such as the aging and the high incidence of malignant diseases has formed a great contrast with the lagging hospice palliative care in China. From the perspective of the national pilot programs and studies the authors participated in, it is both imperative and urgent to accelerate the development of hospice palliative care and service system. This article analyzes the current situation and problems of the development of the hospice palliative care in China, summarizes the research progress of the hospice system, and comprehensively sorts out the stakeholders of hospice palliative care for the first time, classifies them into eight categories and uses Mitchell scoring method identifies core stakeholders.

On this basis, a three-dimensional service system for hospice palliative care was constructed: First, the framework of the three-dimensional service system for hospice palliative care was designed, and the horizontal and vertical relationships among various stakeholders were straightened out. Second, propose countermeasures to build a three-dimensional service system for hospice palliative care, including propaganda and education, policies and regulations, quality management, talent supply, and information systems, etc. According to the combing and induction of the literature, this article believes that the current academic community lacks systematic research and in-depth analysis of the construction of hospice palliative care stakeholders and service system with inter-departmental mechanisms. There are few studies focusing on strategic level and micro-practice, and they are relatively scattered. There is a lack of deep research on the value consensus, concept, and universal model of collaboration, and lack of representative theory; especially at strategic heights to examine China. There are also few studies on the government inter-departmental mechanism construction under the big governments.
Research on Problems and Countermeasures of Chinese Hospice & Palliative Care: Summary of Phased Exploration Based on National Pilot Studies

Ze-Tao ZHANG  
Hospice Palliative Care Alliance of China Foundation  
China

Ya-Guang LI  
Chinese Academy of Social Sciences, Graduate School

Zhong-Wei LUO  
Chinese Academy of Social Sciences, Institute of Industrial Economics

Yuan QIN  
Beijing Haidian Hospital, Hospice Palliative Care Unit

To explore the strategy of constructing a high-quality and advanced hospice care service system and management pattern. Hospice care is to provide a soothing service to the end-stage patients who have no use in curative treatment, and to complete their final journey of life with dignity. Problems such as the aging and the high incidence of malignant diseases of China have triggered a large number of needs for hospice care. However, Chinese long-term neglect of “death quality” has caused the ranking of death quality to be almost at the bottom. Therefore, it is urgent and necessary to speed up the development of the hospice care. From October 2016 to October 2018, the authors participated in a total of 300 patients of national pilot studies about hospice & palliative care in China, the STOF business model with sustainability, social responsibility & ethics was taken. Some strategies were adopted to improve the construction of subject, it included the status quo of subject development analyzed with SWOT theory, development objectives formulated according to SMART rules, PDCA rules employed to promote quality improvement of service system, KPI evaluation system established to improve work efficiency.

This paper reviews the current situation of China’s hospice care, summarizes the national pilot programs, conditions and relevant policies that have been issued, and reveals the current problems encountered in Chinese hospice care in terms of concepts, funds, teams, and legal safeguards, and then proposes targeted countermeasures. The issues mentioned above can be addressed through these initiatives: strengthen publicity and education to establish the right concept of hospice care under Chinese cultural environment; improve the institutional system to protect the rights and interests of doctors and patients; adjust the cost standard and improve healthcare security; and optimize talent incentives and build a care team with Chinese characteristics.
Strategies for Siting Community Centres for Mental Wellness in Hong Kong

Prof Daniel W L LAI  
Dr Vincent W P LEE  
Department of Applied Social Sciences, The Hong Kong Polytechnic University  
Hong Kong  
Xiaoting OU  
Department of Applied Social Sciences, The Hong Kong Polytechnic University  
Yan Y X RUAN  
Department of Applied Social Sciences, The Hong Kong Polytechnic University

Integrated Community Centres for Mental Wellness (ICCMWs) provide district-based community support services for discharged mental health patients and other residents in Hong Kong. However, the siting of ICCMWs has been a challenge, mainly as a result of community opposition. This has presented barriers to responses to service users’ interests as well as the operation of individual centres. This paper examines facilitating factors and barriers associated with the siting of ICCMWs among different stakeholder groups, in order to identify effective ways to reduce public opposition and future approaches to successful siting.

We conducted 74 individual interviews with key informants, including government departments, service operators, politicians, residents’ representatives, community activists, and service users to learn about their knowledge, experiences, and viewpoints associated with ICCMW siting processes. Interviews revealed that neighbourhood consultations for establishing ICCMWs take too long and are unable to facilitate consensus and gain support from residents. In some cases, the government decides to delay or withdraw siting plans in the face of strong public opposition, which is due mainly to bias and misunderstanding toward service users. However, the role of local politicians in mediating neighbourhood opinions and the determination of the government in carrying out siting plans could contribute to a successful siting process. We recommend that stronger government interdepartmental collaborations be developed to study the targeted neighbourhoods and lobby stakeholders at earlier stages. This should include identifying key stakeholders, political and social dynamics and controversies, and community demographics. A protocol that specifies a specific time frame should be implemented to facilitate smooth and effective public consultation and ICCMW siting.
Reported Intention for Nursing Home Placement and Its Associated Factors among Urban Chinese Older Adults

Dr Hao LUO
Dr Gloria WONG
Jin-Bao ZHANG
The University of Hong Kong
Hong Kong

China’s national aging policy has set up a goal to develop a long-term care system with home-based care as the “basis,” community-based services as “backing,” and institutional care as “support.” Whether the aging-in-place preference of Chinese older adults echoes with this policy initiative remains unclear. This study aims to investigate the reported intention for nursing home placement and its associated factors among older adults living in urban areas. Methods: The GALLUP-Tsinghua University China Elderly Service Study (CESS) was designed to investigate the recent development of elderly care services in major Chinese cities. A total of 2202 respondents who were 60 years old or older completed the twenty minutes computer-assisted telephone interview. Using data from CESS, we applied multilevel logistic regression models to examine the relationship between reported intention for nursing home placement and levels of satisfaction regarding the neighbourhood support, controlling for personal characteristics. Results: When asked about the plan for living arrangements in the later years, 57.5% of the participants indicated a preference of ageing-in-place, 13.0% intended to move to nursing homes and 22.7% indicated no plan. The regression result showed that dissatisfaction with medical services [odds ratio (OR) = 1.5, p = 0.019], community service and environment (OR = 1.5, p = 0.020), and food quality (OR = 1.4, p = 0.040) were significantly associated with reported intention for nursing home placement. Conclusions: The percentage of urban older adults who reported an intention of nursing home placement was unexpectedly high. However, improving medical services and community services may play a substantial role in changing the intention.