PARTICIPANTS' PAPERS

COUNTRY REPORT - HONG KONG (SAR)

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I. CURRENT SITUATION OF SEXUAL OFFENCES IN HONG KONG

There is inevitably sexual crime, either violent or non-violent in nature, happening around the world everyday. Hong Kong is no exception. In 2005, there were 99 rapes and 1,136 indecent assault cases, signalling an increase of 7.6% and 9.9% respectively against the 2004 reports. Statistics from the Police below reflects the fluctuation of sexual crime cases within the past six years in Hong Kong. Fortunately, the information does not represent an upsurge in sex crime in general.

Table 1: Crime Statistics from Hong Kong Police (cases reported)

Year	2000	2001	2002	2003	2004	2005
Rape	104	95	95	70	92	99
Indecent Assault	1124	1007	991	1018	1034	1136
Other Sexual Offences	938	753	773	900	1082	1042

But in brief, we are still facing a sex crime situation in Hong Kong with one sex violence case, either rape or indecent assault, taking place roughly every seven hours.

Some researches suggest that most of the sexual offenders were only arrested after several attempts of sex abuse. In other words, the number of reported cases could be far less than the actual number of victims involved in sex abuse. A survey by the Hong Kong Social Welfare Department (SWD) in 2003 on their clients having committed sex offences generated an interesting profile. Almost 80% of sexual offences were committed by offenders aged below 40 and the age at which they first committed a sex offence was also mostly under 40.

Table 2: Age of Sex Offenders

Age of Offenders	Percentage
18-25	36%
26-30	16%
31-35	9%
36-40	18%
41-45	6%
46-50	6%
51-60	9%

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Age First Committing Sex Offence	Percentage
10-15	16%
16-20	36%
21-25	12%
26-30	12%
31-35	12%
36-40	6%
41-60	6%

Table 3: Age when First Committing a Sex Offence

On the other hand, the survey reinforced the research suggestion that sex offenders normally have reoffending records, and some of them started committing sex crime in their early boyhood. It is astonishing to note that more than half of the offenders within the sampling pool have committed a countless number of sex offences with scores of victims. Despite the fact that the survey could not by itself authenticate the full picture of the sex crime situation in Hong Kong owing to limitation of the size of the survey, our attention has already been drawn to the general profile of sex offenders and the harmful impairment caused to the huge number of victims involved in sex crime. The following tables obtained from the same survey are strongly indicative of the mentioned situation.

No. of Offences	Percentage		
1-5	15%		
6-10	9%		
11-50	24%		
51 & above	52%		

Table 4: Number of Sex Offences Committed

Table	5:	Numb	er of	Victims
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No. of Victims	Percentage		
1-5	30%		
6-10	6%		
11-50	12%		
51 & above	52%		

We all understand that sexual abuse or even simply an unwelcome sexual advance will bring about emotional distress and depression to the victims, either in terms of social life, interpersonal functioning, work performance or other aspects of daily living. A sexual offence is not merely traumatic to victims at the time when it happens. Victims also have to suffer from a wide range of physical and psychological consequences. Being members of the criminal justice system, we have to appreciate and share the public's concern for offences involving sexual abuse, particularly when they are persistently happening. Apart from preventive measures, such as enhancing public awareness of the situation, there should be measures

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adopted that perpetrators of such offences be brought to justice, and if convicted, sentenced in such a way to reflect the gravity and seriousness of sexual abuse.

II. LEGAL FRAMEWORK OF PUNISHMENT

At present, there are a number of laws in Hong Kong which provide protection to victims against sexual abuse. The major one is the Crimes Ordinance, Cap 200, Laws of Hong Kong. Throughout the years, the Crimes Ordinance has been reviewed and amended to lift the maximum imprisonment term appropriate to the gravity of the relevant offences. Just to mention a few examples - the maximum penalty for incest with a girl between the age of 13 and 16 was increased from seven years to 20 years; indecent assault towards a child under 16 was increased from five years to 10 years; the requirement of corroboration in respect of sexual offences was abolished to ensure that evidence given by victims in sexual offences is accorded the same treatment as evidence given by complainants in other kind of cases. The price to be paid for committing serious sex crime is in no way insignificant. Conviction for some sex offences such as rape, buggery, and sexual intercourse with a girl under 13 can result in a maximum term of imprisonment for life. Extracts of the common sections of the Hong Kong Crimes Ordinance below are illustrative.

Table 6: Extracts of Crimes Ordinance (Cap 200), Laws of HK

Section 118 (1): Rape

A man who rapes a woman shall be guilty of an offence and shall be liable on conviction on indictment to <u>imprisonment for life</u>.

Section 118 A(1): Non-consensual Buggery

A person who commits buggery with another person who at the time of the buggery does not consent to it shall be guilty of an offence and shall be liable on conviction on indictment to imprisonment for life.

Section 118D Buggery with Girl under 21

A man who commits buggery with a girl under the age of 21 shall be guilty of an offence and shall be liable on conviction on indictment to <u>imprisonment for life</u>.

Section 122 (1): Indecent Assault

Subject to subsection (3), a person who indecently assaults another person shall be guilty of an offence and shall be liable on conviction on indictment to <u>imprisonment for 10 years</u>.

Section 123: Intercourse with Girl under 13

A man who has unlawful sexual intercourse with a girl under the age of 13 shall be guilty of an offence and shall be liable on conviction on indictment to <u>imprisonment for life</u>.

Section 124 (1): Intercourse with Girl under 16

Subject to subsection (2), a man who has unlawful sexual intercourse with a girl under the age of 16 shall be guilty of an offence and shall be liable on conviction on indictment to <u>imprisonment for 5</u> years.

Other than incarceration, Post-release Supervision of Prisoners Ordinance, Cap. 475, inter alia. requires that offenders convicted of certain categories of sexual offence and sentenced to two years or more shall be

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subject to statutory post-release supervision for six months to two years at the discretion of the Post-Release Supervision Board. These sexual offences are:

- Incest
- Rape
- Buggery
- Gross indecency by a man with another man
- Bestiality
- Indecent assault
- Unlawful intercourse
- Indecent conduct towards a child under 16

The supervision terms, other than those generic law-abiding requirements, may include psychological treatment and follow-ups.

III. TREATMENT OF INCARCERATED SEX OFFENDERS

In managing sex offenders incarcerated in a prison setting, there is not much in particular we can do in terms of custodial care. Other inmates alike, we are duty bound not to label them but to render appropriate assistance to facilitate their path to rehabilitation. But as a rule of thumb, sex offenders will be singly located in cellular accommodation to prevent them from nuisance of any sort caused by other inmates.

As sex offenders in a correctional setting are a group of people with an identified risk of recidivism, reducing their re-offending risk is a way to reduce the overall sex crime in Hong Kong. As far as a treatment programme is concerned, psychological therapy has definitely played a more important role in recent years in the prevention of re-offending of sex crime. In the last decade, psychologists have contributed greatly in developing the psychological services for incarcerated sex offenders in Hong Kong with a view to reducing recidivism.

The establishment of the Working Group on Assessment and Treatment of Sex Offenders in 1991 was a milestone of the Hong Kong Correctional Services in initiating a service team to focus on sex offender treatment. In 1998, the formation of the Sex Offender Evaluation and Treatment Unit (ETU) materialized the first residential treatment centre for sex offenders in South East Asia. The Unit provides thorough psychological assessment and renders a wide range of specialized treatment programmes conducive to reducing recidivism of sex offenders.

We all understand that sex offending is intertwined with biological, psychological and sociological factors. Every sex offender has a distinctive deviant behaviour to release sexual urges. A more focused methodology to assess sex offenders and to provide them with appropriate treatment will be more constructive than long-term penal custody which is purely punitive in nature.

IV. DEVELOPMENT OF PSYCHOLOGICAL SERVICES FOR SEX OFFENDERS

Tracing back to the 90s, individual therapy is the only major intervention method to treat sex offenders. In other words, sex offenders will be treated individually by clinical psychologists on a needs basis. During the treatment process, it is not uncommon to find sex offenders denying their offending behaviour and refusing psychological therapy. Low motivation for treatment thereby greatly hindered the treatment process in the past. The transfer of inmates and change of the service personnel are also a hindrance to the therapeutic process.

Seeing the need to improve the situation, a special working group of clinical psychologists was formed in 1991 to study the means to improve the assessment and treatment of sex offenders incarcerated in the penal environment. A number of changes towards related rehabilitative service were made as a result of the uplift of service between 1991 and 1998. In the course of development, the clinical psychologists have tested different modalities of psychological treatments for sex offenders. For instance, starting from 1993, a self-help treatment programme with manuals and audio-visual aids was utilized to supplement individual therapy. On the other hand, group therapy had been tried out and found to be more effective than the individual treatment adopted in the past.

Summing up the above and making reference to overseas experience, it was determined that a separate therapeutic unit to accommodate sex offenders for assessment and treatment would be conducive to a quality service delivery. Based on this premise, the Sex Offender Evaluation and Treatment Unit (ETU) was set up in one of the correctional institutions exclusively for offenders with re-offending risk.

V. SEX OFFENDERS EVALUATION AND TREATMENT UNIT

The Sex Offender Evaluation and Treatment Unit (ETU) is a residential treatment centre for sex offenders and is one of the service pioneers in South East Asia. It aims at providing comprehensive and systematic psychological evaluation and treatment services for sex offenders in a therapeutic environment, with a view to enhancing their motivation for treatment. There are three programmes offered in the Unit, namely, the Sex Offender Orientation Programme, the Self-help Programme, and the Core Treatment Programme.

Newly sentenced sex offenders will first go through a 14 day Sex Offender Orientation Programme. During this period, individual interviews will be arranged to enhance motivation for treatment. Group discussion among existing and new Unit participants will be conducted to facilitate positive influences and to increase their confidence about the effectiveness of psychotherapy. Participants will be assigned to complete three self-help packages. At the same time, systematic risk assessment of possible recidivism will be carried out. It is expected that after completion of the orientation programme, the profile and treatment plan specific to each participant could be drawn up. Simply speaking, low-risk offenders will be sent back to parent institutions to receive individual treatment as necessary; moderate-risk offenders will participate in the Self-Help Programme; and high-risk offenders will join the Core Treatment Programme.

The Self-Help Programme is a highly individualized programme, which may start and end on any day. Depending on the progress of individuals, the programme lasts from 2 to 26 weeks. The programme is run by means of self-help manuals, audio-visual materials and interactive exercise to help the participants. There are over 30 manuals covering a variety of topics. Offenders will be required to work on questions and answers, reading assignments and feedback, case studies, empathy training and so forth. A clinical psychologist serves as a personal tutor to monitor participant's progress, to prescribe new self-learning exercises, and to provide psychological intervention.

The 52 week Core Treatment Programme, however, is to deal with offenders with a high-risk of reoffending. The programme consists of comprehensive and intensive group therapy to be conducted on a weekly basis. Apart from the focused therapy modules, group discussion, assignment of therapeutic exercise and role-play is conducted throughout the treatment process. Similar to the Self-Help Programme, those participants having completed the programme are re-assessed with a standard psychological assessment package to identify their change, re-offending risk and future treatment needs. The following programme contents are the core issues included in the treatment of sex offenders:

- Sex knowledge
- Dealing with a deviant sexual attitude
- Dealing with a deviant sexual interest
- Relationship skills
- Mood management
- Victim awareness and empathy training
- Offence cycle and relapse prevention
- Building support and community reintegration

It is meaningful to quote some dialogues of the sex offenders to represent their inner world and the changes occurred after going through psychological treatment. The following are two insightful examples:

"I did not use any violence and the victim never struggled; how could it be rape?" "Sex without consent is rape. The victim did not struggle because of fear rather than consent to have sex." "Since the victim is not a virgin, raping her would not bring her any harm." "Being forced to have sex is a humiliation for women. Its traumatic impact can be life-long."

Other than receiving positive responses from the sex offenders, these programmes must also be

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evaluated on a scientific basis in order to assess their overall effectiveness. Between the period of September 1998 and February 2005, there were altogether over three hundreds sexual offenders admitted to the Unit. Among them, almost half of them had participated in either the Self-Help Programme or Core Treatment Programme. We studied this group of offenders having gone through the ETU programmes and found that the percentage maintaining an abstinence from sex offending after discharge is relatively high. On the other hand, the percentage of denial of low-risk sex offences having gone through the Sex Offender Orientation Programme is lower by around one-third than those without programme treatment in the past. In other words, sex offenders, after psychological intervention, tended to admit their fault in committing sex crime as well as causing harm to the victims.

The above information is a strong testimony that psychotherapeutic treatment can help sex offenders understand their own problems and prevent them from re-offending. Efficacy of psychological services in the therapy of sex offenders is manifest.

VI. CONCLUSION

In the West, treatments with a similar theoretical framework and programme structures are able to significantly cut down sexual recidivism. In Hong Kong, the preliminary data in hand support a similar proposition that our treatment programmes are effective to rectify criminal thinking and enhance relapse prevention. Despite that, there remains a strong necessity for systematic treatment evaluation, programme development, improvement of evidence based assessment tools of re-offending risks and rehabilitative needs to further enhance the treatment efficacy for sex offenders.

Apart from professional therapy, equally important is interdisciplinary collaboration as well as a joint effort by the community in rehabilitating sex offenders. The chance of relapse into further sex offences could not be totally ruled out after an offender's completing psychological treatment. After discharge, they have to face situations that may trigger off their urges of re-offending. Continuous development of rehabilitative services for sex offenders in the community, including religious bodies and non-government organizations and enhancement of cooperation among professionals are very important.

Last but not least, is the community at large aware of the causes of sexual deviance? Is it possible that public awareness and education can be reinforced to help better understand sexual offenders? It is not until the day when public concerns are adequately solicited could a policy decision be aptly orientated to the correction and rehabilitation of the group of perpetrators of sexual offences. It is undisputed that sexual abuse and violence are highly detrimental to the victims, but what deserves deeper consideration is our attitude towards these perpetrators. Should the community treat them as offenders, deviants, or patients?

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