A focus group study on concepts of social inclusion among stakeholders in Hong Kong

Kara Chan
Hong Kong Baptist University, karachan@hkbu.edu.hk

Follow this and additional works at: https://repository.hkbu.edu.hk/hkbu_staff_publication
This document is the authors' final version of the published article.

APA Citation
Chan, K. (2013). A focus group study on concepts of social inclusion among stakeholders in Hong Kong. 3rd ENSACT Joint European Conference. Retrieved from https://repository.hkbu.edu.hk/hkbu_staff_publication/3903

This Conference Paper is brought to you for free and open access by HKBU Institutional Repository. It has been accepted for inclusion in HKBU Staff Publication by an authorized administrator of HKBU Institutional Repository. For more information, please contact repository@hkbu.edu.hk.
A focus group study on concepts of social inclusion in Hong Kong

Prof. Kara Chan, Professor, Department of Communication Studies, Hong Kong Baptist University
Dr. Marcus Yu-Lung Chiu, National University of Singapore
Dr. Sherrill Evans and Prof. Peter J. Huxley, Swansea University

3rd Ensact European Conference
Istanbul, Turkey
April 16-19, 2013
This focus group study is part of a wider study that:

is funded by the UK Economic and Social Research Council (ESRC)
is a collaboration led by Swansea University
aims to produce a Hong Kong Chinese cultural adaptation of the Social and Community Opportunities Profile (SCOPE)
uses the same methods as an earlier UK study

The purpose of the Hong Kong focus groups is to see:

if social inclusion is understood in the same way in Hong Kong as in the UK
in what ways understandings of social inclusion are similar and different
Hong Kong is an affluent city
But with a dark side too
What does social inclusion mean to people?
Use of the social inclusion measure as an outcome measure for mental health service providers
Method

• A focus group study

• Conducted in Sep / Oct / Nov 2012

• When you think of social inclusion, what ideas come to your mind?
Social inclusion in the mental health services context
## Stakeholders group

<table>
<thead>
<tr>
<th>group</th>
<th>number of participants</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>8</td>
<td>Non-professional workers of a mental health association</td>
</tr>
<tr>
<td>2</td>
<td>11</td>
<td>Senior residents from a neighborhood elderly centre</td>
</tr>
<tr>
<td>3</td>
<td>9</td>
<td>A group of parents, adults, and community residents contacted through a rehabilitation services centre</td>
</tr>
<tr>
<td>4</td>
<td>8</td>
<td>Mental health service users of a mental health association</td>
</tr>
</tbody>
</table>
## Stakeholders group

<table>
<thead>
<tr>
<th>Group</th>
<th>Number of participants</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>12</td>
<td>Social service providers including social workers and clinical psychologists. This was the largest group with participants from different mental health professionals</td>
</tr>
<tr>
<td>6</td>
<td>7</td>
<td>Communication undergraduate students at a university</td>
</tr>
<tr>
<td>7</td>
<td>6</td>
<td>Social work undergraduate students at a university</td>
</tr>
</tbody>
</table>
Procedures

• Groups contacted through social and professional contact
• Obtained an informed consent statement before interviews
• Voluntary and no identifier
• Conducted in Cantonese
• Duration ranged from 51 to 82 minutes ($M = 65.1$, $SD = 12.5$)
Procedures

1. Write three ideas of “social inclusion”
2. Elaborate and discuss
3. Post the ideas on a whiteboard
4. Generate more ideas
5. Place similar items together
社交能力
溝通
渠道
失去自我
探索
社交能力
社區資源
(設施)
資源
(僱主)
資源
(弱勢人群)
教育資源
社區
家庭背景

社區資源
(設施)
Procedures

- Confirm placement
- Label groups of ideas
- Interviewees agree the final outcome
- Describe relationships between the groups
Results
Diversity

- Language diversity
- Skin color / race
- Social statutes
- Culture

Reported among non-professional workers, social service providers, social work students
Equality

- Equal education / job opportunity
- Equal opportunity to participate
- Equal treatment
- Access to society’s resources

Reported among non-professional workers and social service providers
“Different social classes and people of different background should have equal rights and opportunities to participate. Their voices are being listened and they have opportunities to express their opinions. Their opinions are being respected and valued.”

Group 5: Social service providers
Resource for the weak

- For employers to hire people with mental illness
  - Facilities
  - Educational resources

Reported among non-professional workers and parents, adults, and community residents
“There are insufficient facilities for people in a community to use together. Sometimes, people don’t even have the opportunity to meet up. So, how can we achieve inclusion?”

Group 3: A group of parents, adults, and community residents
“If employers are given more resources, they can employ people with mental health problems and people with physical disabilities. In this way, these people can integrate into society through work. These people have the ability to contribute to society. Without government support, most of the employers are reluctant to hire them. These people therefore do not have a chance to integrate into society.”

Group 3: A group of parents, adults, and community residents
Relationships

- Harmonious interpersonal relationship
- No discrimination among colleagues
- No discrimination by employers

Reported among parents, adults, and community residents and mental health service users
“I think interpersonal relationship is important. It is because normal people misunderstand us. They discriminate against us. We hope other people can accept us. That’s why interpersonal relationship is important. (Interviewer: What do you mean by misunderstanding?) They are afraid of us and think we are crazy. Social inclusion needs government’s publicity. Not every person with mental problems has violent tendencies. They need to understand more about this illness.”

Group 4: Mental health service users
“For example, in the McDonald’s case I mentioned, a staff with learning disability was bullied by a customer. However, her colleagues didn’t help her. The colleagues discriminated against them. Some colleagues make joke on them. (Interviewer: Why do they do that?) They think doing this kind of thing is funny because they can’t communicate with each other.”

Group 3: A group of parents, adults, and community residents
Desirable attitudes

- Assistance
- Mutual support
- Accommodating
- Taking initiative
- Empathy
- Inclusive
- Respect

Reported among social service providers and communication students
“We need to take an active role for social inclusion. Some elderly and people with low self-esteem would stay at home and they don’t want to meet people. If you don’t go out to meet people, they can’t find you and interact with you. I think you need to take initiative to integrate into society.”

Group 6: Communication undergraduate students
Discussion

• This 5 main concepts occur in various forms and are inter-related
• Most of the participants were able to define social inclusion based on their observations or their experiences
• The mentally ill patients expressed a strong desire to be included, especially in the work context
The UK Model of Social Inclusion
Discussion

Chinese subjects are more concerned with tangible aspects of inclusion such as employment, social networks, government policy and the affective needs such as no discrimination, than with religious freedom, citizenship, and participation.

In most ways understanding of social inclusion was similar in Hong Kong and UK.
May be tied to the general situation of people with severe mental illness

• Serious societal stigma
• Little employability in the competitive economy
• The lack of legal protection
• The lack of national/government mental health policy and inclusive strategies
• Lack of venue and opportunity to create new social relationship
Q&A