Healthy Living Project for Working Poor Families in Kwai Tsing District

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**Health In Action**

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**Introduction**

Kwai Tsing District (KTD) is one of the poorest districts in Hong Kong with a median monthly household income at about $8100 and 15.7% of the population (about 77200 individuals) living below the poverty line. Poor households in KTD comprised relatively more working (42.5%), with-children (38.2%) and single-parent (8.7%) households. These proportions are all higher than the general poor households throughout Hong Kong.

**Objectives**

Health in Action (HIA) aims to explore barriers which affect health status of working poor(WP) using a social determinants of health and health equity framework, in order to define solutions to improve health access and thus meeting the need of this neglected group in community.

**Methodology**

Over 230 WP families were engaged in 2015 through direct community service, provide health consultancy to community NGO and groups. Data was gathered by survey from direct services through multidisciplinary health professionals, together with information from interviews and focus group discussions.

**Result**

42% and 30% of WP individuals are obese and have one or more of the 3-High’s respectively. More than 35% experienced musculoskeletal strains which hinder them from normal works without access to physiotherapy from either public or private services. Over 20% expressed stress-related symptoms and would like to receive mental health support.
Four specific health concerns and three main health barriers of WP were identified: (1) lack of awareness, knowledge and skills of healthy lifestyle; (2) financial burden in health maintenance and access to timely treatment; (3) Difficulty in access to public healthcare service due to prolonged working hours and schedule.

Health indicators from this study are in line with government population statistics. Further, WP prioritise income generation to maintain household livelihood over preservation of good health, ultimately affecting their work ability and quality of life; leading to a vicious cycle of deteriorating health.

After 1-year ground work, HIA developed 4 strategies to improve health gaps of WP with new community health project: (1) Education and empowerment through train-the-trainer workshops, talks and groups to disseminate information to families and communities; (2) Medical Subsidy for supporting private investigation advised by public sector doctors, mental health services and purchase of medical devices & medication; and (3) family approach on tackling 3-Hypers (4) pain management programs. HIA has developed the role of community health consultant through bridging the community to multidisciplinary health professionals; collaborating with Hospital Authority as well as local NGOs and community partners to promote Medical-Social-Community collaboration in Hong Kong.