



社工的話 Social Worker's Remark

攜手扶弱

我們為病弱人士所推行的各項「慈惠服務」，乃基於社會的需要，在無當局的財政支持下，藉著善長們提供的指定捐助，以可為有需要者有著「到位」的解困及關懷服務。

社會福利服務，在大家傳統的觀念上，多認為有關的福利機構，理應可有助力支付員工的薪酬，方會推行有關「慈惠服務」；但對我們針對社會需要而職志要開拓各項社會新服務的員工來說，每項新事工的開拓，均是在欠缺薪酬的支持下，挺身向難而行；可幸，我們當中部份員工的薪酬，乃是來自一名善長指定的支持，故可於短時間內推行各項事工。

集合有關商業機構的捐款和社署等額的款項成配對，我們所推行的「扶病助弱計劃」，很高興申請得由本年6月至明年5月底止的社署「攜手扶弱基金」方面撥款85萬圓支持，以令我們可推行有關認定的工作，確實令全人興奮莫名。

此基金將用作二名專業同工(藥劑師及行政人員)的薪酬之用，在四名社工及三名職員協助下執行服務；而餘下款項將用作指定服務事工的推行；惟此基金只容許用作有關指定教育及輔導服務(如視像問藥計劃、藥療輔導服務、社區健康及用藥講座及外傭訓練課程)營養福袋餽贈，以及宣傳及義工等費用的支出；而我們的有關其他扶病助弱的援助，如贈藥治病、電器贈長者、專科專藥補助、電費助貧弱、診病交通費支援、家居醫療用品支援、惠澤社區藥房、外展體檢，以及家居維修、閃燈門鐘、松柏之聲等等，均非配對資助之列；即是說，以上服務依然均是全無任何當局的資助，仍待急須大家的濟助；故從本月起，我們將「健康寶庫」英文正名為Health Bank，以資與受資助項目識別；而從本月起每期月報之第十二版「參與行善之方法」，亦會列出急須大家捐贈的項目。

隨著「健康寶庫」的社會接觸面擴大，及服務日見有「到位」的立竿見影成效，令越來越多貧病交迫人士被轉介而來，申請有關扶病助弱援助的有關項目，在政府並無對他們的扶助下，我們正像有跨越一個高山，又見另一座高山的「黑洞」感覺，倘沒有你們的捐助扶持，我們定將會在此黑洞中消失。懇請大家繼續為我們、為無助貧弱者伸援手。

Work together in helping the disadvantaged

Our provision of "Charitable Services" is based on community need. Without financial support from the authority, we depend on philanthropists' use-specified contribution and support to render these services to the needy.

Traditional approach is for welfare institution having the ability to pay for the salary of their staff before launching any "Charitable Services". Nevertheless, our conviction and job nature is to develop new services and hence we move ahead even before getting adequate money for salary. Fortunately, we are able to finance part of our staff salary from a philanthropist and hence capable of launching certain programs within a short time frame.

Gathering commercial institutional contributions and the dollar to dollar matching fund from the Social Welfare Department, our "Care for the Vulnerable Program" can now be launched. We are delighted that the Social Welfare Department is allocating us HK\$ 850,000 from its "Partnership Fund for the Disadvantaged" for June 2010 to May 2011. This will enable us launching certain specified programs which we are truly excited.

This fund will be used for the salary of two co-workers (a pharmacist and an administrator) and with the help of four social workers and three office workers, we are providing a whole range of services mentioned hereunder and balance of the fund will be used for the promotion of certain dedicated services. As the fund can only be used for certain educational and coaching services, such as 'Tele-Pharmaceutical Consultation Service', 'Individual Medication Consultation Session', 'Health Education Presentation Programs', 'Medication knowledge course for foreign domestic helpers', "Nutritional Supplement Program": and expenses for advertising and volunteer workers etc.; and our other support for the disadvantaged such as 'Medication Subsidy Program', 'Electrical Appliances for the Elderly Program', 'Specialty Medication Assistance Program', 'Power Subsidy - Ailing & Handicapped', 'Patients Travel Subsidy Plan', 'Home Use Medical Equipment Support Program', 'Philanthropic Community Pharmacy', 'Outreached Physical Examination', 'Home Maintenance Services', 'Flash Light Door Bell for Deaf' and 'The Voice' etc. are excluded from it. That is to say all of them still have to depend on your timely and generous contribution and support. Hence, starting from this month, we name the last projects as Health Bank projects as a different to the ones supported by Partnership Fund for the Disadvantaged of SWD. And from this monthly report's 12th page-- 'How to donate in these Program?' on we would list all those urgent items that appeal for your consideration of donation.

As the Health Bank is spreading its contact with the community and the services are reaching their targets with instant result, a greater number of the poor and disadvantaged are being referred to us for help. Without government subsidy we feel like lost in the dark not being able to see light ahead had we not get your generous contribution and support. Hence we once again appeal for your continual support in helping the disadvantaged.



「重拾對生活嘅希望」

當我們年青健康時，由於可自由行動，又有職業之穩定收入，兼有家人及朋友在旁可作出幫忙時，確是人生最快樂之時刻；雖一旦有點生活困難，在能力、健康、經濟及友儕的幫忙下，都會迎刃而解，仍會有「還有明天」的感覺，但對體力衰退高齡的長者而言，若他們多病多痛兼傷殘行動不便，加上經濟困拙，缺乏親友照料時，在一切需要「自行照顧」下，相信他們會有著「沒有明天」的感覺，試問人生活至此階段，其心境會是如何呢？

70多歲獨居的何惠英婆婆，自退休後多年不久，便開始依賴綜援為生。「人老了，親友多在內地，在港就算有，不是老就是死，年青的，點會識我呢？」她既無奈又無助說。

「求助鄰居，人哋都有家人要照顧又要返工，點可以長期幫你呢？」

「況且是個人衣物的清潔問題，怎可要人代你清洗呢？」何婆婆用已變形的雙手拿著衣物說。「我雙手的手指關節乏力，不能夠屈曲及提取重物，試問怎可洗衣呢？所以所有衣物只可以用皂水浸，不能夠洗；浸夠時間，就用水沖，沖清皂水後，便拿去掛在曬衣竹上，直至滴乾及曬乾為止，便算了。」

「很多時，當穿上衣物時，總覺有異味，衣服仍然有污積，真是失禮人；實在有自悲感，連去老人中心參加活動也不敢！」

「真係好多謝你哋送咗部洗衣機給我，師父不但替我安裝，還教我用，真係多謝。」何婆婆很高興地用雙手撫著洗衣機說：「我現在可以有清潔的衣服穿，身體異味已沒有了，以後可以回老人中心參加活動了。」

「今後我可重拾自我照顧的樂趣，謝謝善長的慷慨解囊，令有困難的人得到幫忙，解決我們的困境，使我哋重拾對生活嘅希望。」



Regaining the hope in life

When we were young and healthy, we could move freely, had a job, a steady income and family members and friends by our side to help out and that really was the happiest moment in life. Even on occasions of difficulty, but being healthy and capable and having financial means and helps from peers, there was no difficulty that could not be resolved. Besides, there was always the feeling of 'hope for tomorrow' being better. However to the frail and aged elderly if they were suffering from illnesses, movement restriction and financial difficulty and without help from friends and relatives and having to deal with everything alone and the feeling of no tomorrow, then how do you think their state of mind would be at this stage?

The 70 years old lady Ho has been living alone. Soon after her retirement, she started to rely on CSSA for her living. "As I get old and with most of my friends and relatives living in China, those left in Hong Kong have either passed away or are getting old too and the young ones do not know me" said she rather helplessly.

"As for asking neighbour for help, they have to work and look after their own family members, so how can you expect them helping you out long term?"

"Besides, washing your own clothing is a personal matter and no way asking others to do that for you?" said old lady Ho holding her clothing with her deformed hands. "My finger joints are weak, cannot bend or carry load so how can I wash my clothes properly? All my clothing used to be left soaking long enough in suds, then just rinsing off with water and hung out to drip and sun dry, that was it".

"Very often when I put on my clothes I could smell some strange odour, there were still some stain left on my clothing, how shameful. I was really down and dare not go to the elderly centre to join their activities!"

"My hearty thanks for your sending me this washing machine and having the technician to install it and to teach me its proper use" said old lady Ho happily while touching the washing machine with both hands. "I now have clean clothing to wear; no more body odour and I can go to the elderly centre and join their activities."

"From now on I have regained my joy in looking after myself. Thanks to the kind hearted people who help me in my difficulty situation enabling me to regain my hope in life."

何婆婆側著身體，高興地讓我們看看她身上穿著清洗後的衣服。
Old lady Ho proudly shows her clean washing.

電視贈長者 生活添色彩

A TV set can color the life of an elderly

香港氣候比較潮濕，天氣突變，加上電器可能日久失修，出現短路及漏電的情況十分普遍。電器壞了，又或想更換已使用多年而經常出現問題，可能會引來短路發生火警的陳年電器，對一群領綜緩的獨居貧困長者來說，只能是奢望。

聖雅各福群會的「電器贈長者」計劃，呼籲社會熱心人士慷慨捐助，用以購買電視機，讓正輪候的獨居貧困長者受惠，為苦悶日子添上色彩。

電器損壞，除了對貧困長者造成不便，嚴重者更可能危害他們的性命與財物。年75歲獨居的張伯伯自從太太於7年前離世後，便孑然一身，由於行動不便，唯一娛樂便是看電視；近日因天氣潮濕，使用了12年的電視機亦出現故障。張伯伯苦著臉說：「個電視時好時壞，一開個電視就咻咻聲，無晒畫面；試過一次成屋無晒電，真係嚇死我。真係好想換過部電視機，唔使一路睇電視，一路驚有事會發生。」其實張伯伯的個案，正也是眾多輪候電視機的14名貧老的真實寫照，你可有意伸援手作關懷？

聖雅各福群會的「電器贈長者」計劃現正呼籲各界善長伸出援手，捐款或捐贈購買未滿五年而運作良好21吋以下的電視機，讓獨居老者的苦悶生活可有所排遣，企盼你伸援手。施善熱線：2835 4321或8107 8324。

Hong Kong is relative humid and wet. The abrupt change of weather adding to aging electrical appliances, causing short circuit and electric leakage easily happen. It is risky to continue using the damaged, aged or out-dated appliances, but for those poor elders supporting by CSSA, it would be a luxurious hope for them to replace with a better one.

"Electrical Appliances for the Elderly Program" as launched by St. James' Settlement now earnestly called for your kindest donation target to buy 14 TV sets for those poor elders on queue, coloring their boring life

The damaged machines not only cause inconvenience to poor elders, their life and possession may also be in danger. The 75 years old Mr. Cheung who is now living alone after the death of her wife 7 years ago, his only entertainment is watching TV. Because of recent humid weather, the 12 years old TV set was broken down. Mr. Cheung said sadly, "The TV set was sometimes good and sometimes bad. It might have scramble image when I switched it on or the home electricity was completely out. I really want to replace the TV set. I am scare that something would be happened one day." The case of Mr. Cheung has been the case of many poor elders who are on queue. Do you want to give your helping hand?

"Electrical Appliances for the Elderly Program" launched by St. James' Settlement has not been funded by government or financial institutions. We are now calling your contribution to the program. No matter money donation or donation of 21 inches TV sets under 5 years of age. It really helps poor elders to have some entertainment out of their boring life. Please call our helping hotline at 2835-4321 or 8107-8324.



得著善長的捐助，令受助者的生活帶來姿采。
Donor's help brings colour to the deprived.



受惠者言
Client's Remark

不怕老伴 再跌倒了

陳伯伯和黃婆婆向居於元州邨，能可「有瓦遮頭」本該是依賴綜援為生的他們晚年的樂事，唯偏偏家中向以「發光」及「照亮」他們家居生活的光管壞了；近日因而令他們有「居不寧」、晚間「動不得」的困境。

80歲的黃婆婆說：「我們膝下無兒無女，體弱又多病，多年來照顧自己都有困難，有事時真係求助無門；幾年前身體機已開始衰退，連執紙皮也做不了，加上要照顧十多年前開始每刻都要照顧的老伴，實在是令我心力交瘁。」

黃婆婆接著說：「患有青光眼及視力不斷衰退的老伴，在這幾個月來已經跌倒過好幾次了，每一次跌倒我都怕他不能再爬起來，真的把我嚇死。」眼有恐荒的婆婆說：「為甚麼會跌倒？因為他行動慢、反應又差，最近光管壞了，時亮時不亮，晚間令我們生活很不方便；光管不亮時，我們要摸黑，生活很是不方便，當然更容易跌到引來骨折的危險；我們真是好驚，當光管不亮時，晚上不敢離開床邊走動，真是動不得。」

「聽街坊說，請師傅上來更換一支光管及火牛要起碼\$200費用，\$200對我們來說，確實不少；事實上，我們要節衣縮食才可有\$200；另一方面，我們亦不知何處尋找電器師傅幫忙修理。」黃婆婆擔憂地說：「我們以後晚上真是不知如何怎樣過。」

「我和老伴實在感謝善長們的慨助，因為老弱的我們確實沒有金錢和能力付費安裝光管。」黃婆婆於本會「家居維修服務」義工免費替他們更換光管座及光管後感謝地說：「現在因為善長的捐款和家居維修義工們的辛勞，我再不用怕老伴跌倒了，他晚上去廁所時，也不用我起床扶他往廁所。」陳伯伯在一旁也附和笑著地說：「真係好感激。多謝善長們。」

善長們捐款的賜助與維修義工的幫忙，帶來倆老的歡欣與生活的改善，正正是大家施善的效果。

Fear of his falling gone

Mr. Chan and Ms Wong live in Yuen Chau Estate. They should be able to enjoy their old age since they have a roof over their heads but for the fluorescent tube, the only source of lighting, which has not been functioning properly.

80-year-old Ms Wong said, "We are childless, weak and afflicted with various illnesses. It's been an ordeal to look after our own selves. If something happens, we have no one to fall back on for help. My health has got so poor several years earlier that I couldn't collect and sell card-boxes any longer. In addition, I have to take care of my spouse, who needs constant care starting from over a decade ago. It's exhausting."

Ms Wong went on to say, "My spouse suffers from glaucoma and his eye sight keeps on deteriorating. He has fallen several times within the last few months. Each fall frightens me out of my wits. I fear that he won't be able to get up again." With a fearful look in her eyes, Ms Wong continued, "Why does he fall? It is because he moves slowly and has poor reflexes. Recently, the fluorescent tube is not working sometimes. When it doesn't work, we grope in the dark and we dare not move far from the bed. There is also the danger of breaking our bones if we bump into something."

"My neighbours told me it cost \$200 per visit for a technician to come and put in new tube and starter. \$200 is a big considerable amount to us. We have to cut down our food bills so as to save \$200. And, in fact we don't know where to go for an electrical technician." Ms Wong concluded in a worrying tone, "I don't know what we're going to do with the lightless nights ahead."

"My spouse and I are thankful to the benevolent people's generosity. We are old and feeble; we can't afford the cost of installing a new fluorescent tube." After volunteers from St. James' Settlement's Home Maintenance Services had replaced a new set of fluorescent tube, Ms Wong remarked gratefully, "I have no more fear of my spouse falling after the volunteers had put in the new tube for us. This is possible because of donations as well as voluntary work. When he goes to the toilet at night, I don't have to get up to help him." Mr. Chan, standing alongside Ms Wong, added smilingly, "I'm truly grateful to the benevolent donors."

The improvement and joy brought to the couple as a result of benevolent donors' donations plus help from voluntary workers are a proof of charity.

陳伯伯和黃婆婆：「謝謝你們的慨助，給予我們一個安全的居所。」
Mr. Chan and Ms Wong, "thank you for your generosity and help. Our home is safe to live in."





助我購買 該要食的藥

「香港經濟好轉，樓市及股市大旺，但同時亦對我構成很大的生活壓力。」長期病患者72歲的張伯伯患有高膽固醇、糖尿病及腎衰竭，需要長期服藥，擔憂地說：「因為樣樣都加價，連帶我所服食的自費購買的糖尿病藥物亦加價，一加就數十元，我賴每月的綜援金為生，長短期來說，我實在付不起。」

香港近月經濟好轉，需依醫生處方自費購藥的長期病患者發現，近月部份專利藥物加幅明顯。「加幅實在太大，我根本不能負擔，我要自行將藥量減半，甚或打算會停藥。」張伯伯說，他患有糖尿病，此病會引來併發症，膽固醇過高，現在也要遵醫生處方購買膽固醇藥服食。「醫生原本叫我每日食一粒膽固醇，但藥費加價10%，要每月近一千元，我只可與糖尿病藥一樣，分別每日食半粒；在手緊的月份裡，我只能隔日食半粒。」

「我所服食的藥物是專利藥，是獨市的藥物，藥廠因為沒有競爭對手，他們鍾意加價就加價，加幾多錢就幾多錢，我要保住生命唯有『焗住買』。」張伯伯說：「連同我要服食自費購買的糖尿病藥物在內，要我買齊兩種藥，每月我都要俾超過一千多元的費用，你話我每月只有二千多元的綜援金，我怎有資格食藥呢？」

「好彩有聖雅各福群會的惠澤社區藥房及贈藥治病計劃，資助我半年購買藥物的款項，同時在藥房以優惠價售賣糖尿病藥給我，大大減輕我的財政負擔，令我可有藥食，助我穩定病情，不致因糖尿病惡化而引發腎衰竭的問題。我現在雖然要用數百元買藥吃，但總好過沒藥食，引來疾病的惡化，以後唯有節儉些啦。」

張伯伯說：「如果無聖雅各福群會暫時的幫忙，讓我鬆一鬆氣，我的生活更慘。當然我希望聖雅各福群會可以幫多啲及幫耐些啦，但她也靠善長的捐款支持，根本也愛莫能助。希望知道我們困苦的善長們，多多捐款支持，助我們一群無助的貧病交迫人士，可有財力以購買該要吃的自費藥。」

Helps me buy my needed medication

"Hong Kong economy is turning around and the real estates is booming, however, it also constitutes tremendous pressure on my daily living," said the worrisomely 72 years old man Cheung who is suffering from high cholesterol, diabetes and renal failure, all requiring long term treatment and medication. "Prices are going up on everything by scores of dollars including my self-purchase diabetes drugs. My living on CSSA simply cannot afford it long or short term."

Chronic patients on self-purchase medication has found that some of the patented medication has dramatical price increase as the Hong Kong economy is turning around. "The increase is too steep, well beyond my afford-ability. I need halving my dosage or stop taking altogether," said Cheung. Both his diabetes which could have complication and high cholesterol need regular medication. "The doctor asks me to take one cholesterol pill a day, but with 10% cost hike, costing me close to HK\$1,000 a month, I have to cutback to half a pill a day or on even tighter financial condition half a pill every other day, like my taking diabetes medication."

"The medicine I am taking are patented from sole manufacturer without competition. The manufacturer could increase their prices at will and the patient have to pay what they ask without choice, said Cheung. "How can I afford the HK\$1000 plus medical cost from my HK\$2000 odd CSSA. How can I be qualified for taking such medicine?"

"Fortunately, the Philanthropic Community Pharmacy and Medication Subsidy Program are giving me a six months subsidy on my medicine cost and the Pharmacy sells me medication at close to cost, thus greatly reduces my financial burden, rendering me with affordable medication to ease my condition. Control on diabetes condition helps to avoid worsening of my renal condition. I am now spending few hundred dollars on the medication which prevents worsening of my condition though still I need to live even more frugally.

Cheung said, "With the help from SJS I can be somewhat at ease. Of course I wish SJS can provide more help to me and for a longer period. However, they have to depend on the support of benevolent people. I just wish that those who understand our dilemma can be more generous and donate more to help people like me to pay for the self-purchase medication."

有必要擴大推行的服務

「有病要依照醫生的指示服藥，方可有助控制病情，不致因而引來各種併發症。」Jeanine是一名參與本會與香港醫院藥劑師學會合辦「病患者藥療輔導服務」的義務註冊藥劑師說：「很多時因工作太忙，在醫院派藥時，未可向病人詳細講解服食藥物的問題，做這服務可以有更多時間詳盡地教病人正確用藥，發揮藥劑師的功能，真是開心。」

「我在這裡輔導過一位高血壓的病人，她本來需要服三種血壓藥，她卻私自停服了其中一種又擅自減低了另一種血壓藥的劑量。於是，她的血壓便徘徊於160/90mmHg(收縮壓/舒張壓)。這位病人的血壓距離受控之水平(低於140/90mmHg)還很遠。」Jeanine說：「這真是令我嚇了一跳，因為這不但當然令她的血壓還未受控，還引來她的身體連串不適，令情緒低落

「我細心聆聽她的說話，由每種藥的服法、藥物份量、時間、習慣、服藥後反應以及正在所服食的成藥等資料，都會問她；亦要她告訴我，她的治病態度及取向…」Jeanine續說：「最後她也瞭解當收縮壓低及頭暈的原因，以及身體的不適，乃是她自行停藥的結果。」

「其實跟她一樣不太清楚自己的血壓或接受治療的目標血壓大概是多少的病人為數不少。當中亦有部份因血壓還未受控，但因誤以為自己血壓過低便自行減藥。」Jeanine說：「好彩，婆婆明白事理，經我的指導後，便發現問題；因為若她再繼續停服藥物，便會容易導致併發症，如心臟病、心臟或腎衰竭及中風…等及對相關器官的損害。」

「為免患上併發症或重要器官受損才悔不當初，病人當於覆診時跟醫生或藥劑師了解自己的血壓及理想的血壓，藥物或藥量加減及原因，如懷疑有副作用時應及早向醫生反映，務求就治療達成共識，並依從醫生及藥劑師的吩咐定時服藥。」Jeanine說：「可惜，大部份人根本並未有服藥知識，藥物輔導實有必要擴大推行。」



Service Expansion Required

“Taking medication according to doctor’s instruction is the only means of guaranteed control and prevention of complications,” said Jenny a registered pharmacist participating in the “Pharmaceutical Care Service for Patients Project” jointly held by SJS and Hong Kong Hospital Pharmacists Association. “Most of the time at the hospital while dispatching the medication to the patient, we are too busy to explain in full details drug related questions to them. This project enables me to properly explain to the patients enough details on the prescription drug properties. I am really very happy being able to do that here.”

“Here I once coached a patient suffering from high blood pressure, she is supposed to take three different drugs but she stopped on one, reduced the dosage on another at her own will. As a result, her blood pressure fluctuated between 160/90 mmHg (SYS/DIA). This is far from the desirable control level to under 140/90 mmHg,” said Jenny. “I was alarmed because her blood pressure was not under control but could give rise to a whole series of bodily problem, discomfort, resulting in depression.”

“I listened carefully to what she said, from how each drug was taken, dosage, frequency, her practice, the after effect and asked for information on any other formulated medication taken by her and how she feel her given treatment …,” said Jenny. “Finally she understood the causes for low SYS reading and dizziness and discomfort were all caused by her improper medication handling.”

“In fact there are lots of people like her not clear about their own blood pressure and what should be the control target. Some having blood pressure problem but mistakenly thought them being too low and reduced the dosage at will,” said Jenny. “Luckily, this old lady is reasonable and upon my instruction, she found her problem. Had she continued stop taking proper medication, complications such as heart attack, heart or kidney failure, stroke etc and the associated organ damages could set in easily.”

“To avoid regrets for not preventing complications or damages to body organs, the patients should on follow-up consultations, try to better understand from the doctor or the pharmacist their own blood pressure readings and the ideal levels; the reason for taking the prescribed drug(s) and the cause for dosage increase or decrease; and promptly reflect to the doctor if suspicion of side effect/discomfort, in order to reach a treatment consensus. Patients need to heed the instruction of the doctor and the pharmacist and take the medication on time.” Jenny said, “Unfortunately, most of the patients do not have this knowledge and hence this coaching needs to be promoted.”

「及早參加服藥輔導，可收治病事半功倍。」

“Half the work with double result by early participation in medication coaching”



夫復何求

「捐助要到位，起著助人解困的目的，是我捐款的目的。」Christine(化名)說：「我覺得人在貧病交迫及無助，而情況不能在自己控制及能力範圍改變下，眼見情況每下愈況時，確是令人失去一切的鬥志，沒有明天的感覺。」

Christine是一名經常致電本會，垂詢有關捐款及個案進展情況的善長。「我在未確定捐款贊助你們之前，其實我曾多次試探你們的工作態度，因為我要清楚知道你們的做事方針，是否合乎我的要求及行善目的。」

「起初我致電負責社工時，我問了很多刁難性的問題，以考驗他的工作手法及態度，而每次他都用心聆聽我特意且煩透的查問。」Christine說：「他都很有條理地答覆，而且還詳盡地講解服務對象的情況及需要。講真，反轉我是他，我也沒有這樣耐心講解。」

「另一方面，我亦曾致電他，假扮申請者，要求有關服務。他都會細心講解申請人士的資格，可予的服務等。當然，我會說得很貧乏，希望他會『將就』一下，給我一點方便。」Christine說：「但他竟說不能隨意一個來電，便會給予方便，還教我向熟識的社工申請，因為讓中介人轉介，服務會來得中肯與公平啱，而且他更強調必須要向捐助者交待。」

「當然，於每次作出捐助後，我都會要求向我報告工作，他必會致電匯報進展，有時在受患者同意下，他都會電郵給我當事人受惠時的照片。這真令我非常放心。」Christine說：「而且他更邀請我探訪受惠者，讓我清楚了解受助人生活改善的情況。」

「他們這樣的做法與工作態度，我在助人解決困難的事情上，夫復何求。」Christine最後說。

What More Could One Ask?

"In fact, helping others to overcome difficulties is the goal that I donate money," Christine said. "People suffering from illness and poverty and the situation cannot be change by own control or under area of competence, truly makes one's fights spirits lose."

Christine is one of the donors who usually care about our services. "Actually, I've probed into your work before my donation, because I must clearly knowing your policies whether to confirm with my request or not."

"At first, I sent a phone call to the social worker who is responsible and asked some heckled questions in order to test his attitude. And I found that every time he listen respectfully to me and tried to answer my thoroughly questions," Christine said. "His answers have orderliness and also explains the situations of targets and their needs exhaustively to me. In fact, if I were him, I would not have such patience to explain."

"On the other hand, I also had called him once as a applicant which ask for help, he explains the qualifications, service giving by organization and so on carefully. I tried to ask him to make my application more convenient for me to pass as I'm very much deficiently," Christine said. "He said he cannot make a decision by a call but tech me to ask a well know social worker help me apply for it because the service can come critical and fair by a middle ground transfer. Most importantly he stressed a given known to the donor."

I'll request for a report after each time make donates. Also, he'll tell me how's the case process being and email me some photos of the litigant to me under the beneficiary agreement which really makes me feel relieved," Christine said. "Moreover, he invites me to visit the beneficiary in order to let me know the improvement of their lives."

"Helping people with such procedure and works, what more could one ask?" Christine finally said.



師父中的師父

「我一個人力量有限，需要幫忙的老人又多，能令到更多人懂得有關技術，我不但教曉義工們，藉他們的服務，又可以幫到更多有需要的老人，何樂而不為呢？」在聖雅各福群會的「家居維修」義工隊已有20多年服務歷史的莫師父說。

「回想我10多歲做維修工作時，怎會有人教！」不斷「偷看」別人而學習，小學還未畢業的他透過不停地自學，現已持有各項水及電的合格牌照，而且更持有木工與油漆至高專科職業證書。「有人指導學習，總勝過書本的理论。」莫師父說。

「我所知的，都是從別人處學來的，也是別人教的，將所知的與別人分享，是一件快樂的事；而且遇有一些新知識及技術時，我也需要學習，因為世界之大，怎會有學懂的一天呢！」喜歡聽取別人意見及討論有關新事物的莫師父說。

事實上，聖雅各福群會「家居維修」的義工隊雖有350人之眾，惟所有人均非全科的維修及裝修專材，在服務20多年來，莫師父可說「徒弟」不少，水喉師父梁先生說：「莫師父教我正確拉及釘電線方法，當我沒有水喉工程時，也可使到我可從事有關電氣的工作，不用失業而沒有收入。」

「他教曉我落地膠、計位及鋪膠地板法，令到我可幫老人家做裝修。」現職出入口經理的李先生說：「莫師父教曉我後，我也可在家中維修電制了。」故當每一次莫師父領隊時，一眾義工總是問過不停，而莫師父總是帶著笑容，有耐性地作出講解。

Master's Master

"My power is limited, there are many elderly need help. I teach volunteers about relevant knowledge, so that they can help more elderly." Master Mok said.

"Nobody taught me how to do repair work when I was a young boy. Therefore, I learnt it from other people." Even though he hasn't graduated from primary school, he studied on his own, and now he has different kinds of plumbing, drainage and electrical licenses. Moreover, he holds carpenter and painter professional certificates. "Someone guides you how to do, it is better than you learn from books."

"All my knowledge is learnt from other people and they taught me. It is happy to share knowledge with others. I need to learn when there is new knowledge and technical skills. You cannot learn all knowledge in short time." Master Mok said.

In fact, although St James' Settlement almost has 350 volunteers, they are not all having professional technical skills or knowledge. In 20 years, Master Mok taught many people, Mr Leung, a plumbing repair master, said, "He taught me the correct method of relocate the electrical wire. When I do not have plumbing work order, I can do other relevant works. Don't worry about unemployed and earn no income."

"He taught me sizing, measure and stick the plastic flooring. This gives me the ability to help the old people." Said Mr. LEE, the manager of a import & export firm who is our volunteer. "After Master Mok taught me, I can do some electrical repair works at home." When Master Mok leads teams, volunteers ask many questions, and Master Mok always smiles and explains patiently.



樂於將知識與技能與義工們分享的莫傳(中)。

Master MOK(middle) is happy to teach other and share his experience.

AM730 鄧明儀

AM730 ELAINE TANG

長者的天使 Elderly Angels



演藝界資深傳媒人陳圖安早前跟我說：「很羨慕妳有祖父母陪著妳成長，妳又能陪著他們老去，這種經驗是我沒有的。」我是家中長孫，孩提時又與祖父母同住，所以得到祖父母的寵愛，因此長大後的我也特別喜歡老人家。像我，因為曾被老人家愛，所以懂得愛老人家的，還有在社工界赫赫有名的馬錦華及陳炳麟。

猶記得03年沙士時，我要撰寫《出路》一書，需要訪問百多位不同界別的有腦之士，當時好友李賢義牧師立即為我介紹「99年優秀社工」及長者安居協會總幹事馬錦華做訪問。後來知道馬錦華幼時家貧且健康很差，到四歲仍未能站起來，後來更因染上肺結核需要長期住在醫院，幸而得到護士及社工們悉心照顧才能痊癒。因為曾經受過別人的關愛，所以他立志長大後當社工，希望把這份愛延續下去。

再說在聖雅各福群會服務老人家三十二年的陳炳麟，他祖父曾是大地主，後來被清算，卻因為祖父曾做過不少修橋補路的好事，所以當時受過祖父恩惠的人紛紛協助陳家上下逃亡到香港，讓他從小體會到助人與受助的重要，並立志長大後要做助人的工作。縱然他02年患上鼻咽癌，卻從沒停下來，就算假日也為長者做義工。

對長者們來說，馬錦華與陳炳麟恍如頭上有光環的天使。能做的，他們會盡力去做；別人不願做的，他們也會盡量去做。其志可嘉，其情可敬。

Experienced actor Chan To On told me: "Admire your grandparent who bring you up, you are able to be with them in their old age, I haven't had this experience. "I am the first grandchild in my home. I lived with my grandparents when I was young, so they loved me very much. Therefore, I like the elderly when I was grown up. Like me, love by the elderly and return the love, as do well known social workers Timothy MA and Chan Ping-lun.

In 2003, I remember I wrote a book, I needed to interview over a hundred different talented people. At that time, my friend Li Yin Yi pastor introduced the best social worker in 1999 who was the Executive Director of Senior Citizens Home Safety Association, Timothy MA. And we know that Timothy was poor and in poor health when he was young, he cannot stand up until he was 4 year old. Then he contracted tuberculosis and lived in hospital, he was fortunate that he recovered as he was well taken care of by nurses and social workers. Because he received warm affection and care from others, he determined to become a social worker and continue the love to other people.

Chan Ping-lun, work in St. James' Settlement over 32 years. His grandfather was a landowner, and in the communist revolution his land was confiscated. As his grandfather did many good works, a lot of people help Chan's family to go to Hong Kong. He received help from others when he was young, so he determined to give assistance to others. Although he got cancer in 2002, he continued to help the elderly.

Timothy and Chan Ping-lun liked the halo of angels. Even though they faced many difficulties, they continued to work and help others. People respected, loved and honoured them for their good works.



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同一個病，影響著三代家庭。「祖父、爸爸同埋我，都患有腎衰竭。」今年才34歲的黃先生(化名)，一年多前因為一次意外跌倒，求醫下，才發現自己已經患上末期腎衰竭；腎功能只剩0.5%的黃生，從此，每天都要指定做同一個的動作—洗腎。

任職髮型師十多年的他，十多歲就踏入社會謀生，一直都自力更生。因為與家人關係不好，所以和祖母同住，直至祖母離世後，月前家人更將屋變賣，每日都要洗腎的黃先生，此時除家無居所外，因早前耗盡有限積蓄醫治腎病致一貧如洗，被迫拖著孱弱身軀到處租屋及往社署申請綜援，以面對困局。

「自從要洗腎後，我整個人都變到好似有潔癖咁，一切都要乾淨，社交活動全部推晒；我一來無錢，二來我怕去人多地方，怕細菌感染。」黃先生現租住的地方，放滿了每天洗腎用的腎水、醫療及消毒用品。

「一袋一袋的腎水，需要用電額加溫才可使用；這樣，用來注入身體的腎水才不會冰涼，我感覺才會舒服一點。」租住屯門一村屋的黃生表示，每次都要開動電額多個多小時，才能將一包腎水完全加溫。「每次開住個電額，除左包腎水加咗溫，連帶我 憂慮都跟住上升！加上村屋 衛生好極都有限，不時都有啲蛇蟲鼠蟻走入嚟，我只好長期關窗，咁又被迫要開冷氣。唉！為咗呢個病，我要做好多好似好奢侈嘅野，如整天開冷氣及用消毒水消毒，但全部都係逼於無奈！」

每個月扣除租金後，只有二千多元作生活費的 先生說：「食用都用咗一大截錢啦，即係只剩於不足一千元以支付往醫院覆診的交通費、食水、煤氣同埋屋企嘅電話費同上網費，還要交每期超過\$800的電費；但我就偏偏連呢幾百蚊嘅錢都拿出來都有很大很大的困難；我要保住條命，捱餓都要俾出來。」「電費助貧弱計劃」得悉黃先生的困難後，正苦思量資助黃先生八成電費資助半年，盼可減輕黃先生一點點的困境，企盼大家亦可伸援手，以解「電費助貧弱計劃」的急需。



“Power subsidy - Ailing & Handicap” program

A single illness, renal failure, has plagued a family for three generations. “My grandfather, father and me,” said the only 34 years old Mr. Wong (alias). Just over a year ago, I went to see the doctor after an accidental fall and found that I had final stage renal failure. Since then kidney dialysis becomes his daily routine.

Wong who started working in his teens has been a hair stylist for more than ten years. He has poor family relationship and lived with his grandmother until she passed away. Months ago the family decided to sell the flat and he has to apply for CSSA from Social Welfare Department and moved to find his own dwelling.

“Since the on-start of dialysis I became an eccentric with cleanliness preoccupation. Everything coming into my contact must be very clean. I drop social activities altogether for fear of going to germ infected crowded places, besides, I have no money to spare.” The place now leased by Wong is stacked with the dialysis pouches, medical supplies and sterilizers.

“The dialysis pouch need warm up by electric blanket in bringing it to body temperature before use.” Wong, now living in a village hut in Tun Mun, explained that each warm up cycle takes several hours. “As the pouch temperature rises and so increases my worries! Hygiene in the village hut is hardly desirable and insects creep around its neighbourhood and I have to shut all windows and switch on my air-conditioner all time. For my illness I am forced to do things that are considered luxurious and well beyond my means, such as all day air-con and use of sterilizing agents without choice!”

After deducting monthly rental only some HK\$ 2000 is left Wong said, “A major portion of which goes to food and so only less than HK\$1,000 left for follow-up hospital visits, transportation, water, gas, phone and inter-net expenses and a HK\$ 800 power bill. I have much difficulty in finding extra money for this latter bill. Bur, in order to stay alive, I have to stay in hunger to scrape for power.” The “Power subsidy – Ailing & Handicap” on learning Wong’s dilemma is working hard for a way to subsidize 80% of his power cost for six months. We are now appealing to your chipping into this urgent “Power subsidy – Ailing & Handicap” program.

每包腎水都要加溫數小時，才可使用。

Each pouch takes several hours warming up before use.



勉力兼職賺取藥費的魏伯

「人老體弱，而且視力已失去一半，還要做粗重的工作，生活確實吃力。」71高齡還要於船廠做兼職的魏老伯說：「我要工作，因為我要賺錢買藥給自己及太太來治病。」

事實上，魏伯早年已從造船廠退休下來，本想與太太用有限積蓄安享晚年，但好景不常兩老接連患上疾患，數年間竟耗去魏伯畢生只有數拾萬圓的積蓄。因積蓄所餘無多，年前魏伯發現患有黃斑病變及前列腺病，而其太太亦同時被診斷骨質疏鬆症惡化，必須購買自費藥物來控制病情；經多番考慮後，因每月藥費支出有「枯盡」積蓄的危險，魏伯毅然再從「退休路上」折回，再投故業以賺取藥費以能有財力治病。

甘於被經濟生活困頓折騰的魏伯，兩口子「骨頭」頗硬，仍拒絕申請綜援以解困。魏伯雖然擁有三名子女，但子女各有家庭、各有負擔，他亦不欲因為自費藥物的問題而成為子女的負擔，年過70的魏伯也要自力更生，仍不願領取綜援。

「黃斑點病變藥費實在太貴，每支針劑需約\$7,000，要注射6支，共\$42,000便可令病情穩定；若遲早都會盲，藥費都會是白花，而且更重要的是其他自費藥物每月的費用也超過\$1,000，我們怎能捱呢？」故魏伯斷然拒絕購買斑點病變針劑藥，在沒有其他藥物可代替，於《醫院管理局藥物名冊》制度下，也無能為力，結果魏伯一隻眼睛的視力年前已變得模糊，現在只賴另一隻眼睛助行動。

「好感激聖雅各福群會『惠澤社區藥房』有我要食的前列腺藥優惠售賣，我竟可只需用一半的價錢，即約\$150就能購買此藥物，實在能大大紓緩我的經濟壓力。」剛被社工轉介而來，得悉藥價後魏伯欣喜地說。「我做兼職的壓力也消減了很多，我很希望售賣太太的骨質疏鬆症藥的藥廠可以與聖雅各福群會合作，優惠我們，減輕我做兼職的辛苦。」

入跟進的工作，以可全面性地為個案作出改善生活的服務，以起著「以人為本」的工作目標。當然，在轉介社工介入的過程中，我們從善長恩賜而來的珍貴資源，除有著社會熱心人士加入參與作為義工，以確保資源不被濫用外，亦可有著一「外間」團體參與監察資源的任用及可起著「到位」的「施善目的」。



Mr. Ngai works part-time to buy medicine

"Being old and weak, I have only 50% eyesight. Life is difficult as I still have to do strenuous work," remarked 71-year-old Mr. Ngai, working part-time job in a dockyard. "I work part-time because I need money to buy medications for myself and my wife."

In fact, Mr. Ngai retired years ago from the dockyard. He had planned to enjoy his old age with his wife on his savings which amounted to several hundred thousand dollars. Unfortunately, they became ill one after the other and they practically used all Mr. Ngai's savings. After diagnosis, Mr. Ngai had macular degeneration and prostate while Mrs. Ngai's osteoporosis worsened. They had to buy their own medications so as to control the diseases. Since they had spent much of their savings which the monthly medication expenses might possibly exhaust, Mr. Ngai went back to work in order to be financially capable for continuous cure.

Though struggling in a financial plight, Mr. and Mrs. Ngai refused to apply for the CCSA because of their strong character. Though Mr. Ngai has three children, he doesn't want to become their burden since they are married and have their own family to support. Mr. Ngai wants to be independent despite his old age and is unwilling to receive the CCSA.

"Medications for macular degeneration are very expensive. Each injection dose costs around \$7,000. It takes 6 doses, i.e. \$42,000 to stabilize the disease. I am going to become blind sooner or later, that money is not worth spending. Besides, the cost of other user-pay medications comes to more than \$1,000 monthly. We can't afford it." Mr. Ngai decidedly refused to buy any medications for his macular degeneration. There is no substitute and the authority can't do anything under the system of the Hospital Authority's Medications List. As a result, one of Mr. Ngai's eyes started to blur some time earlier. He sees with only one eye.

"I am so grateful to St. James' Settlement's Philanthropic Community Pharmacy. They sell prostate medications at a discounted price. It only costs \$150, half of the market price. It greatly reduces my financial burden," said happy Mr. Ngai, who was recently referred to St. James' Settlement by a social worker. "My stress in doing part-time job is also greatly reduced. I really hope the drug company that sells medications for my wife's osteoporosis can co-operate with St. James'. If that happens, I can buy medications for my wife at a discounted price. That will be a further relief from my stress of working part-time."

魏伯望著每月兼職賺取金錢，以可購得的藥物。

Mr. Ngai looks at the medications he bought with the money from his part-time job.



參與行善之方法

How to donate in these Programs?



- 本人/本公司樂意 單次捐助 / 每月捐助 \$ _____ 以贊助及支持
- | | | | |
|------------------------------------|----------------------------------|--|--------------------------------------|
| <input type="checkbox"/> 贈藥治病計劃 | <input type="checkbox"/> 電器贈長者計劃 | <input type="checkbox"/> 家居醫療用品支援計劃 | <input type="checkbox"/> 病患者藥療輔導服務計劃 |
| <input type="checkbox"/> 診病交通費支援計劃 | <input type="checkbox"/> 惠澤社區藥房 | <input type="checkbox"/> 專科專藥補助計劃 (燃點希望計劃 及 補血寶愛心) | |
| <input type="checkbox"/> 家居維修服務 | <input type="checkbox"/> 到戶理髮服務 | <input type="checkbox"/> 電費助貧弱計劃 | <input type="checkbox"/> 外展體檢計劃 |
| <input type="checkbox"/> 後顧無憂規劃服務 | <input type="checkbox"/> 閃燈門鐘 | <input type="checkbox"/> 《松柏之聲》 | <input type="checkbox"/> 代購電器服務 |
| <input type="checkbox"/> 健康推廣活動 | <input type="checkbox"/> 法律諮詢服務 | <input type="checkbox"/> 以上任何一項 | |

捐款人姓名/公司：_____ 寄件編號(如有)：_____

地址：_____ 聯絡電話：_____

捐款方法：

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- 以信用卡捐助 (VISA MASTER)
信用卡號碼：_____ 信用卡有效日期：_____ (月/年)
持卡人姓名：_____ 簽署：_____
- 銀行入數紙 (善款可存入聖雅各福群會於下列銀行戶口)：
匯豐銀行：002-5-224247 或 恒生銀行：388-558645-001 或 東亞銀行：514-10-30561-7

(請在適當位置加上✓號)

敬請在支票背後或銀行入數紙寫上所捐賜之「慈惠服務」，連同捐款者之姓名及地址擲寄本會地址，或將銀行入數紙傳真至本會，FAX：3104-3635，俾本會可奉上謝函以及收據，以供閣下用作扣除稅額之用。謹此致謝。

- I / My company would like to contribute (one-off / monthly) \$ _____ to support
- | | | |
|---|--|---|
| <input type="checkbox"/> Medication Subsidy Program | <input type="checkbox"/> Electrical Appliances for the Elderly Program | <input type="checkbox"/> Home Use Medical Equipment Support Program |
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| <input type="checkbox"/> Funeral Navigation Services | <input type="checkbox"/> Flash Light Door Bell for Deaf | <input type="checkbox"/> "The Voice" Monthly Elderly Magazine |
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Those who give never want; those who choose to ignore get blame.