## 研究背景

人口老化是香港面對的一個嚴峻狀況。我們認為一套嚴謹、多元、及具持續性的人口政策是不可缺少的,但可惜的是,特區政府的現有政策忽略了周詳的研究,未有訂立清晰的目標,及制定有效的配套措施,因此各項現有人口政策都收不到預期的效果。

## 政策建議

## 鼓勵港人生育

我們建議政府需以降低生育成本出發,參考其他 國家的措施,透過不同形式的經濟支援,鼓勵港 人生育:

#### (1) 成立「兒童成長配對儲蓄基金」

建議政府成立「兒童成長配對儲蓄基金」,政府 提供資助,與家庭共同為新生子女未來的教育及 醫療開支作好準備。

#### (2) 提供日常開支津贴

建議政府可向每名未滿6歲的幼童發放每月1,000港元開支津貼,以減輕各種養育成本。

## (3) 設立生育退稅額

建議政府為每名新生子女提供一次性退稅,以鼓勵生育。

#### (4) 逐步優化親職假期待遇

建議政府參考外國經驗,在安排親職假期待遇上作更大的承擔,以支援父母更好照顧嬰兒。

## 2 促進非本地研究院 畢業生留港發展

非本地畢業生是香港人才庫的寶貴資源,但其最 終能否留港作出貢獻,實有賴各方面的支援。我 們建議:

#### (1) 推行研究院畢業生實習計劃

建議擴展「創新及科技基金」轄下的「一般支援 計劃-實習研究員計劃」至香港各支柱產業(或 全港各行業),資助企業吸納非本地研究院畢業 生。計劃將同時涵蓋修讀全日制研究院課程而未 曾在港全職工作的本地畢業生,以避免對本地學 生造成不公。

(2) 提供專為非本地畢業生而設的就業輔導服務 建議政府向院校提供特別經費,設立專門向非本 地學生提供支援的就業輔導服務。

## 全 檢討私院「零雙非」政策

面對本地出生率下降以及輸入人才的政策發展 停滯不前,「雙非」嬰兒可以作為另外一條 「藥方」,為香港人口結構注入新動力。另一 方面,「雙非」會對就學、就業、房屋、醫療 等造成一定程度的影響。為了平衡利弊,我們 認為政府應盡快啟動針對性的措施,來解決箇 中的關鍵。

## 第一階段:

(1) 設計有效長期追蹤的調查系統,掌握「雙非」子女來港的實際發展情況

為了解決「雙非」子女來港存在的不確定性和 其為社會帶來的影響,建議政府設立一個能仔 細及可靠地評估「來港人數」、「來港時期」 及「來港所需」的長期調查追蹤系統,以便讓 政府更有效地調配各項社會經濟設施的供應。

#### (2) 加強深圳學校開辦港人子弟班

建議政府加強《深圳學校試辦港人子弟班合作協議》,支持香港辦學團體也可在深圳辦學, 方便其與香港中學課程接軌。

#### 第二階段:

#### (3) 適時增加醫護人員供應

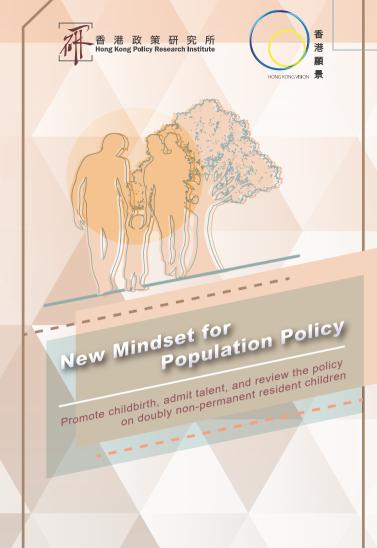
建議有關當局立即研究放寬海外醫生在港註冊 制度,增加本地醫護人員供應,應付市場需求,並促進香港醫療產業的發展。

## 第三階段:

(4) 設立雙非初生嬰兒使用深切治療保險基金

由於「雙非」嬰兒可能需要深切治療服務,但 私營醫院並未能提供相關設施,建議私營醫院 透過保險公司成立初生嬰兒使用深切治療保險基 金,以保險的形式將成本攤分到所有使用婦產 科服務的「雙非」孕婦身上,並以此基金來向 公營醫療系統構買相關服務,促進香港公私營 兒科醫療服務的發展。

(5) 考慮訂定每年15,000 至 25,000的「雙非」產子限額,只限在私營醫院執行,並最少每三年檢討此限額一次。



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## Background

Ageing population is a grave situation confronting Hong Kong. It is essential to have a rigorous, diversified and sustainable population policy. Regrettably, when the HKSAR Government formulates the policy, it overlooks the significance of detailed research and consideration, and fails to set clear targets and provide appropriate complementary measures. As a result, its policies have not achieved their desired effects.

## Policy Recommendations

## Encourage local childbirth

With the aim to reduce cost of childbirth, we recommend that the Government should make reference to other countries' initiatives and encourage locals to have children by using different forms of financial support:

## (1) Establish "Child Growth Matching Saving Fund"

The Government should set up a "Child Growth Matching Saving Fund", with the perspective of collaborating with parents, to subsidize and encourage families to be well-prepared for the future education and medical expenditure of new-born children.

## (2) Provide allowance for daily expenses

The Government should provide a monthly

allowance of HK\$1,000 to each child under the age of 6 to help families lessen the burden from daily expenses.

#### (3) Tax rebates to encourage childbirth

The Government should provide a one-off tax rebate to taxpayers per child to encourage more childbirth.

## (4) Optimize paid parenting leave

With reference to the experiences of foreign countries, the Government should bear some responsibility to optimize paid parenting leave to enable children have better care from their parents.

# Encourage "non-local post-graduate students" to\_stay\_and\_work\_in\_Hong\_Kong\_

Non-local graduates are assets to Hong Kong's talent pool, but whether they can stay and contribute to the community is really dependent on the support from different parties.

## (1) Provide internship program for postgraduate students

We recommend that the Government should replicate the GSP - Internship Program under the Innovation & Technology Fund in all pillar industries (or all industries in Hong Kong), with the aim to subsidize companies to employ non-local post-graduate students. To avoid creating an unfair situation for local graduates, the scheme should also include the local post-graduates who have just completed their full-time post-graduate program but have yet to find a full-time job in Hong Kong.

## (2) Establish employment counseling services for non-local graduates

We also recommend that the Government should provide special funding to tertiary institutions to provide employment counselling services and employment support for non-local students in particular.

## Review the "Zero Doubly Non-Permanent Resident" policy for private hospitals

In the long run, the "doubly non-permanent resident (DNR) children" do complement Hong Kong population, but in the short to medium term, the potential pressure from these children on education, employment, housing and medical sectors cannot be neglected. To strike a balance between the costs and benefits and achieve a multi-win situation, we recommend that the Government should proactively study and implement by phases the following complementary measures based on the actual needs of the community.

#### Phase one:

## (1) Design an effective long-term tracking system to monitor the impact of DNR children coming to live in Hong Kong

To monitor the impact of DNR children coming to live in Hong Kong, the Government should establish this mechanism to project 'the number of DNR children living in Hong Kong', 'their time of coming to Hong Kong", 'their needs when living in Hong Kong', etc. in a detailed and accurate manner.

## (2) Enhance the provision of special classes for Hong Kong children in Shenzhen schools

The Government should enhance "the pilot scheme of classes for Hong Kong children in Shenzhen schools", and support sponsoring bodies in Hong Kong to establish schools in Shenzhen, with the aim to promote a better alignment to the courses offered in Hong Kong secondary schools.

#### Phase two:

## (3) Increase the supply of healthcare staff in due course

The Government should immediately conduct a study to relax the registration regime for overseas doctors, so as increase the local supply of health-care staff to meet market demands, and to facilitate the growth of local medical service industry.

#### Phase three:

## (4) Set up an insurance fund for DNR infants to use neonatal intensive care services

We recommend that private hospitals should set up an insurance fund for DNR infants to use neonatal intensive care services, and to allocate the cost of NICU to all DNR pregnant women who use obstetric services in the form of insurance, and purchase the NICU service from public hospitals using the fund.

(5) Consider introducing a delivery quota in private hospitals for DNR pregnant women which is to be from 15,000 to 25,000 annually, and review the number at least once every 3 years.

