

# **CHRISTIAN ACTION**

## **Xining Children's Home**

### **Foster Care Programme 2010**

### **Closing Report**



Prepared by  
Corporate Development  
February 2011

4/F New Horizons Building  
2 Kwun Tong Road, Kln  
Hong Kong

Tel: (852) 2382 3339

Fax: (852) 2362 0046

E-mail: [ca@christian-action.org.hk](mailto:ca@christian-action.org.hk)

Website: <http://www.christian-action.org.hk>

## Foster Care Program

### *Index*

Introduction .....	2
The Rationale of Foster Care .....	2
Objectives of Our Foster Care .....	3
- <i>In General</i>	
- <i>For Our Children (Abandoned and Orphaned Children)</i>	
- <i>For Foster Families</i>	
- <i>For the Local Community</i>	
Our Services in Year 2010 .....	5
Activities held/completed in Year 2010 .....	6
Performance Check .....	6
1. <i>Foster Children and Parents</i>	
2. <i>Activities Organised</i>	
3. <i>Foster Parents Training and Staff Training</i>	
4. <i>Staffing</i>	
5. <i>Social Work Approach</i>	
Problems Encountered .....	9
Future Plans .....	10
1. <i>Nursery and Nursing Team</i>	
2. <i>Social Work Team</i>	
3. <i>Foster Care Team</i>	
Case Study .....	11
- <i>Ji-shan</i>	
- <i>Chun-lian</i>	
Explanation For The Difference Between Actual Expenditure and Proposed Budget .....	13
Foster Children's Profile .....	14
Financial Report .....	17

### Introduction

Christian Action implemented this programme in 1997. In 2002 Wereldkinderen began supporting this programme financially, which allowed us to expand and develop a systematic model to promote and manage fostering in Xining. As a result, this is now a major area of focus at XNCH. The success of the programme can be seen in the smiling faces of the 52 children currently in foster care. Foster Care is one of the ways we can prepare children to better integrate with society in future, as well as educating the community about the needs of abandoned children, particularly those with special needs. We believe there is no better place for a child than a family; so we are dedicated to ensure the continuation of this programme.



Although Wereldkinderen will stop supporting the Foster Care Programme at XNCH to comply with their nine year support policy, they will continue to support XNCH in another area in order that we can divert alternate funds into Foster Care.

### The Rationale of Foster Care

1. Family is a gift from God to everyone, where we learn to live with others, to love and to be loved. All children should have parents to love, care for, educate, and raise them. For this reason, we make the effort to find homes for our children. Even though it is temporary, it fulfills a child's innate need to be loved.
2. Children learn from the world around them and family is the first place that children begin to learn. Children learn about responsibility and what is right; moral and ethical. They learn about security; belongings and trust from their family. Foster care is a practice which provides orphans and abandoned children with a family environment. Foster care provides a more intensive level of care to infants and children than institutional care. We assess the suitability of prospective foster parents, including family background and experience with looking after children.
3. Personality is formed within a family unit. Psychologists believe that one learns most from

the FAMILY and that family members have a **life-long effects** on core values, personality, character and mindset. Family also equips a child overcome life's difficulties.

4. We pay periodic home visits to foster families to ensure that children grow up in a healthy environment. As at 31<sup>st</sup> December 2010, there were 52 children in foster care in the local community.



### Objectives of Our Foster Care Programme

#### *In General*

1. Provide a family environment so they can be loved and cared for.
2. Increase the intensity of care for children with special needs.
3. Enable the children to develop social relationships, helping them to integrate with the community.
4. Continue to train foster families and maintain high quality foster care services.
5. Promote foster care in the community and develop a network to recruit and monitor foster families.
6. Establish a professional team with relevant medical and rehabilitation expertise.

#### *For Our Children (abandoned and orphaned children)*

1. Provide children with a family environment and a homely atmosphere.
2. Provide counseling services for older children to adapt to the foster home.
3. Enable them to grow up both physically and mentally healthy, and prepare them to integrate with the community.
4. Provide individualised and intensive care to special needs children such as rehabilitation training or pre- and post-operative care.
5. Enable them to understand the concept of "family", which prepares them better for adoption by overseas families.
6. Provide them with the care only a family can give.



7. Facilitate building a cohesive family.
8. Develop social skills and to help them to integrate with the community.
9. In the long run, we hope that our children will grow up to be constructive members of society.
10. Coordinate with all parties: government officers and parents to tailor-make a healthy development plan to meet all our children's needs.

### *For Foster Families*

1. Make a difference in children's lives, give them roots and allow them to room for personal growth.
2. Plant the seeds of love, trust and security in children's hearts.
3. Help children feel good about themselves and develop a sense of self-worth.
4. Protect children from harm and provide the best setting to feel safe and healed from past trauma or feelings of abandonment.
5. Provide parenting when children are at their neediest.
6. Fostering provides children with a gift that lasts a lifetime, and it can be life changing for the foster parents too, bringing mutual blessings that abound for both parents and children.

### *For The Local Community*

1. Co-operation with the local government allows for information exchange and pushes the government to promote and develop foster services within the community.
2. Enable the public to understand and accept our children through education and training.



# Closing Report Year 2010: Foster Care Program Xining Children's Home



## Service Statistics in Year 2010

### January to December 2010

Highlights		Details/Descriptions			
Number of children as at 31 December 2009	51	Boys		22	
		Girls		29	
New foster children	19				
Accumulated number of foster children	89				
Children returning to XNCH	18	<i>Reasons for their return:</i>			
		Adoption (Overseas)		8	
		Adoption (Local)		1	
		Surgery outside Qinghai		2	
		Deceased		2	
Medical Conditions of Children	52	Cleft Palate	11	Microcephaly	4
		Cerebral Palsy	7	Eye Disease	7
		Spina Bifida	2	Down's Syndrome	1
		Epilepsy	2	Mental Retardation	4
		Underweight	2	Physical Disabilities	1
		Other	5	Normal	6
Number of children being educated	19	Normal school		5	
		Special education		3	
		Studying at the Rehab Centre		1	
		Kindergarten		10	
Number of children as at 31 December 2010	52	Boys		25	
		Girls		27	
Number of foster families	40				

### Activities held/completed for the period January to December 2010

Activities/Events	Frequency
Foster Home Visits	650
School Visits	48
Foster Child Counseling sessions	12
Separation Counseling (Adoption)	2
Rehabilitation Training at Foster Homes	106
Foster Parent's Training	4
Foster Parent's Sharing Session	1
Parent-Child Activity Days	2
Foster Family Parent's Days	2
Foster Care Program Staff training	5
Community Promotion of Foster Care Program	2

### **Performance Check**

#### **1. Foster Children and Parents**

At the end of December 2010, 52 children were placed in 40 foster families, many of whom have been fostering for more than a decade. In some cases families have had different children, which may have been adopted, for example.

In the past few years, we noticed that the children in foster care show significant improvement in their development physically and psychologically. Areas where improvements are most noticeable are height and weight, sensory and emotional development, cognitive development, confidence and improved social relations.

Programme staff conduct regular home and school visits to monitor children's development and their home environment. They seek to understand each child individually, monitor their personal development, advising parents about the best course of action and following up on any changes in personal development. In addition, we have increased the subsidy for each child in order to improve their quality of life.



Adoptive parents, both local and overseas, consistently express their deep appreciation for the quality of care provided in foster families, which is reflected in the level of love, high quality care and health of each individual child.

## **2. Activities Organised**

In order to engage foster families in community in 2010, we organized several programmes, which included opportunities for foster families to show off their art and crafts, a performance day, parents days, gathering of parents to create opportunities to share their experiences as foster families and competitions where parents and children could all participate. Foster families willingness to participate was overwhelmingly positive. As a result of these activities, families showing an increased level of enthusiasm for the task at hand and there is a greater level of advocacy for fostering in the community.



***Activities held in the 2<sup>nd</sup> half of 2010 are:***

### ***2.1 Parent-Child Day***

This took place in August, at “Ten Garden” in the Eastern District. A total of 35 foster families participated. Activities are designed to:

1. Provide a life enriching experience for the individual child.
2. Encourage/Improve communication between foster parents.
3. Improved relationship between the children and foster parents.
4. Provide opportunities to get some exercise and participate in outdoor activities.



We designed interactive games which would improve communication and interaction between parents and children. Parents and children participated in a talent show, which showcased their potential and for which they were all well prepared.

### 2.2 Community Promotion



Two roadshows promoting XNCH and fostering in the community successfully attracted many enquiries about the home and services provided. As a result there was an increase in the number of families willing to foster and 80% of new applications were approved. Community support for XNCH increased and people were more willing to assist in a volunteering capacity, establishing a positive attitude towards the home in the community.

### 3. Foster Parents Training and Staff Training

We conducted training and information workshops in order to equip families with up-to-standard care for their foster children. Workshops were particularly geared towards special needs children and included rehabilitation training, knowledge of infectious diseases, accident and emergency treatment, knowledge of infant rearing, and properly administering medicines. From 2008 to 2010, there were over 20 workshops for foster families. Foster parents responded that they found the training useful, and could care for their foster children better as a result.



#### 3.1 Foster Parents Training

We have conducted 4 Foster Parents Training sessions covering the following topics:

1. Human respiratory system
2. Treatment of fever and epilepsy in children
3. Categories of physical disabilities in children
4. Behavior intervention with teenagers

#### 3.2 Staff Training

Training at XNCH:

1. Communication Skills with Foster Parents;

2. Physical and Psychological Changes at Puberty; and
3. International Standards, Definitions, and Categorization of Foster Care.

Training in Xi'an and Chengdu (conducted in the 1<sup>st</sup> half of 2010):

A senior staff member traveled to Xi'an and Chengdu for 8 days. The experience was extremely valuable as she was able to see how other children's homes are administered. She also realized that having high standards is required in children's homes nationwide and that compliance to those high standards is of the highest importance.

#### 4. Staffing

Currently, we have 3 staff on the team: the Team Head, 1 Foster Care Officer, and 1 Social Worker. The Vice Director of XNCH monitors the Foster Care Program.

#### 5. Social Work Approach

As several children in foster care have recently become teenagers, they are exhibiting typical behavioral and emotional patterns associated with this developmental stage, which could be problematic if not dealt with in the correct manner. Establishing good relationships and timely intervention are called for in order to avoid unnecessary complications. The social worker handles each case individually, according to the unique situation of each child. We help these teenagers negotiate puberty by providing counseling, personal developmental plans such as private tutoring, and skills development. Group sessions organized by social workers build self-confidence, and provide additional guidance in negotiating the rigours of life as a teenager, and adjusting psychologically to the world around them. Simultaneous behaviour intervention workshops are arranged for foster families.

#### Problems Encountered

1. The application process to become foster parents is extremely rigorous and as a result it is difficult to recruit new foster families.
2. Foster families are scattered over several



different districts, requiring more time to complete home visits.

3. As the general population in Qinghai is relatively poorly educated, foster parents have trouble grasping a number of important but abstract concepts. An area which is particularly challenging is getting them to understand and fulfill their parenting responsibilities, such as what their responsibilities as foster parents involve.
4. Traditional and conservative mindsets lead to foster parents who generally only want to foster children who are healthy and attractive. To overcome this problem we will need to channel additional resources to promote community education. The alternative is to wait to for socio development cycles to reach the stage where they are more accepting of disabled or sick children naturally.
5. Locally employed staff lack professional knowledge and experience, and are often insensitive to family issues. As a result, they are frequently unable to offer sound guidance to foster parents. They need additional training to follow guidelines, which increases the workload in the programme.
6. We have also focused on placing additional moderate to severely disabled children in foster care, so more of our children can benefit from the love and environment that family life can offer. It is therefore necessary to educate families in Qinghai to accept disabled children, and to find suitable families to help us to care for this group. Additional time and effort will be needed to see this come to pass.
7. The social welfare system covers very few areas of service. At this stage there are no facilities or resources available to support special needs youth and their development.

### **Future Plans**

#### **1. Nursery and Nursing Team**

- I. First aid and basic daily child care for special needs children
- II. One-on-one training for special needs children, conducted in the foster home.
- III. Provide training in how to treat skin conditions and fevers for foster families.

#### **2. Social Work Team**

- I. Organize community promotion in order to recruit additional foster families which meet the criteria set by the foster services.
- II. Interview, assessment and home visits for application screening by our social workers.



- III. Provide training for foster families with teenagers in areas such as behavioural intervention, and dealing with psychological needs, making it easier for them to understand and deal with teenage behavior.
- IV. Counseling and adjustment counseling for foster children and families.
- V. Focus on the foster children and teenagers, to provide counseling and guidance services to improve self confidence and ability to adjust psychologically.
- VI. Social workers need to maintain consistent communication with schools.
- VII. Explore resources within the community to support the foster programme.
- VIII. Organize group activities for children and their foster families.

### 3. Foster Care Team

- I. Develop professional and management skills in local and government staff through training and co-operation.
- II. Establish a mutual support group for foster families by providing the support and training in different aspects of fostering and child care.
- III. Develop community networks to connect social circles and explore social resources.
- IV. Organize rehabilitation and special education training for foster families.
- V. Match children with suitable foster families.
- VI. Arrange a schedule for special needs children to receive rehabilitation training and special education at Xining Rehabilitation centre. This arrangement can also relieve stress on foster parents.
- VII. Home visits by our foster care team staff members.
- VIII. Maintain and develop the current system of foster care service, with particular attention to foster children's profile.

### Case Sharing

**Child: Ji-shan (M)**      **Age: 6.5 years**  
**Diagnosis: Heart Disease, Bilateral Tibia, Patella Bone Dysplasia and Patella Dislocation**

He was first placed with his foster family in June, 2005. Ji-shan has parents and an elder sister in the foster family and they all love him very much. The first 2 years were extremely difficult because of his heart disease. He was in the recuperation





stage, experienced difficulty sleeping, and had a poor constitution. His parents were very devoted to him. His condition improved significantly under their care. After consultation with doctors, his heart was declared healthy, and his quality of sleep improved.

His foster mother told us that he sometimes behaves like a spoiled boy, constantly demanding attention, but very shy in front of strangers.

His foster mother also praised him for his being tough and independent. He rarely relies on others for help and finishes all his tasks on his own. She said, "Ji-shan came to our home for more than 5 years ago. When he was admitted to hospital for a few days because of fever, we were very worried. We went to the hospital to visit him every morning and evening because we were worried that he would miss us and cry for us. During those few days, we felt so deeply that he, an important member of the family, was missing!"



We are so grateful to this foster family has committed to give him a safe and caring home, and mostly importantly their unconditional love for him.

**Child: Chun-lian (F)**

**Age: 11 years**

**Diagnosis: Recessive Spina**



Chun-lian is 10 years old and has been living with her foster family for over 3 years. She is active and lovely. She had a few behavioral problems when she first arrived there, and refused to go to school. Her foster parents found it difficult to deal with and were uncertain how to deal with the problem. The designated team member immediately engaged Chun-lian over this matter. At the same time, she also coached the foster parent on how to deal with Chun-lian's problem using the consensus method. It turns out that Chun-lian was unhappy at school as she thought the teacher disliked her. After intervention, Chun-lian was willing to go to school. The foster parents also knew that they needed to understand Chun-lian first, and that

they needed to communicate with Christian Action staff for support in dealing with such problems in the future. There is a social worker who regularly monitors Chun-lian, visiting her at home and school from time to time.

Chun-lian's foster parents are very patient and supportive, they always encourage her to work hard at school and at extracurricular activities like sports and reading. Her foster mother makes up meaningful sayings to keep her in good spirits and a positive frame of mind.

Mathematics is not one of Chun-lian's strong points, but they have found someone to tutor her one on one and they keep encouraging her to work hard at improving. They take Chun-lian to the hospital for regular check-ups and x-rays as they are concerned for her health.

The whole family has shown great love for Chun-lian, which helps to build her self-confidence and realize her strengths. Their outgoing personalities have also influenced Chun-lian to be more open to communicating with non-family members.



### **Explanation For The Difference Between Actual Expenditure And Proposed Budget**

#### **1. Core Support and Overseas Expertise**

"Core Support" and "Overseas Expertise" have been wrongly classified in the budget. This will be amended in the annual report to reflect the actual situation.

#### **2. Local Staff**

Since most of local staff are now being employed by the Children's Home, CA has fewer financial obligations in this area.

#### **3. Direct Programme Expenses**

The main reason for not purchasing or under spending on many of the budgeted items is because fundraising targets have not been met. We have relied on pro bono or volunteering services provided for the project, or donations-in-kind. Programmes that have relied on alternate sources are "Tools and Aids for Children", "Community Education & Family Recruitment" and "Education" as well as "Training for Activities". The Beijing CAB and Care for Children have offered pro-bono training.

#### Foster Care Children's Profile

As at 31 December 2010

No.	Name (Gender)	Diagnosis	Age	Progress
1	Min-min (F)	Cerebral Palsy	13 yrs	Min-min continues to receive special education and rehabilitation at the Home's Rehab Centre.
2	Zhi-ruo (F)	Anal stenosis/Acquired megacolon/Neuropathic bladder	11 yrs	Zhi-ruo is now in Primary
3	Yu ting (F)	Microcephaly	12 yrs	Ting-ting has learnt to eat by herself last year.
4	Yu-Jia (F)	Cleft lip	11 mths	Yu-jia's health is improving after being placed in foster care after surgery to repair her cleft lip.
5	Ming-zhu (F)	Undeveloped Eyes Heart Disease	3.5 yrs	Ming-zhu now speaks well, but her walking is still not steady.
6	Chun-lian (F)	Recessive Spina Bifida	9 yrs	Chun-lian is in Primary 2. She is still very active and loves to use the computer.
7	Nai-xin (F)	Microcephaly / Strabismus	9 yrs	Nai-xin stills loves looking in the mirror. She is enjoying school.
8	Jian-qiang (M)	Normal	8 yrs	Jian-qiang has recently been placed in foster care and is adjusting to a new environment.
9	Jia Yin (F)	Subarachnoid Hemorrhage	9 mths	Jia-yin has recently been placed in foster care and is adjusting to a new environment.
10	Mu-yang (M)	Spina Bifida	7 yrs	Mu-yang had successful surgery on his left leg in September.
11	Yi-fan (F)	To be advised	1 yr & 3 mths	Yi-fan is a very lively boy. He is still under observation.
12	Cheng-hua (M)	Mental Retardation	7	Cheng-hua has bonded well with his foster family.
13	Yu-meng (F)	Left eyeball underdeveloped	7 mths	Yu-meng has recently been placed in foster care and is adjusting to a new environment.
14	Ke-xin (F)	To be advised	6 mths	Ke-meng has recently been placed in foster care and is adjusting to a new environment.
15	Mei-er (F)	Congenital Finger Deformity	7 yrs	Mei-er is enjoying living with her foster family, but she needs more toys.
16	Xue-hui (F)	To be advised	7 mths	Xue-hui has recently been placed in foster care and is adjusting to a new environment.

## Closing Report Year 2010: Foster Care Program Xining Children's Home



No.	Name (Gender)	Diagnosis	Age	Progress
17	Yue-qi (F)	Cerebral Palsy	1 yr & 8 mths	Yue-qi has recently been placed in foster care and is adjusting to a new environment.
18	Zhi-ping (F)	Cerebral Palsy	4 yrs	Zhi-ping walks very well now.
19	Zi-ru M	Cerebral Palsy	3 yrs	Zi-ru has learnt to stand by himself by holding on to things.
20	Wang-ming (M)	Undeveloped Eyes	4 yrs	Wang-ming still needs a little assistance to help him walk. He loves listening to the music.
21	Ji-shan (M)	Congenital Heart Failure/Hyperdactylia	7 yrs	Ji-shan had surgery on his right leg in August and will have another round in Jan, 2011.
22	Pei-xin (M)	Hepatitis A and Syphilis	1 yr & 5 mths	Pei-xin has fully recovered from Hepatitis A and syphilis. He has very active and chubby now.
23	Xiao-nan (F)	Down's Syndrome	5 yrs	Xiao-nan is repeating K1 this year
24	Xiao-hao (M)	Normal	13 yrs	We are still helping Xiao-hao to handle his emotions at school.
25	Guo-qing (M)	To be advised	2 yrs	Guo-qing has recently been placed in foster care and is adjusting to a new environment. He is active and happy.
26	Cai-yi (F)	Undeveloped Brain	2.5 yrs	Cai-yi is developing well both physically and mentally. She is still very shy of strangers.
27	Jia-cheng (M)	Undeveloped Right Eye	3.5 yrs	Jia-cheng still gets ill easily. He can walk with minimal assistance now.
28	Si-ao (F)	Cerebral Palsy	2.6 yrs	Si-ao is still very attached to her foster mother.
29	Zi-hao (M)	Severe Mental Retardation	8.5 yrs	Although Zi-hao is blind, he is very intelligent, and he has learnt to feed himself with a spoon.
30	Ying-xuan (F)	Cerebral Palsy	2.5 yrs	Ying-xuan is doing well in foster care.
31	Xi-tao (M)	Mental Retardation	12 yrs	Xi-tao is studying in Primary 4.
32	Guo-dong (M)	Normal	14 yrs	Guo-dong will start secondary school this year. He goes to the XNCH to help take care of other children whenever he has time.
33	Ai-yuan (F)	Congenital Heart	9 mths	Ai-yuan has recently been placed in foster care and is adjusting to a new environment.
34	Xi-mei (F)	Undeveloped Brain, Deformed Upper Limbs	2.5 yrs	Xi-mei's muscle strength is improving very well.
35	Tian-you (M)	To be advised	4 mths	Tian-you has recently been placed in foster care and is adjusting to a new environment.



## Progress Report Year 2010: Foster Care Program *Xining Children's Home (XNCH)*

No.	Name (Gender)	Diagnosis	Age	Progress
36	Ze-qun (M)	To be advised	2.5 yrs	Ze-qun has recently been placed in foster care and is adjusting to a new environment.
37	Xue-ye (M)	Normal	1 yr	Xue-yue has recently been placed in foster care and is adjusting to a new environment. He is a happy boy.
38	Xiong-ying (M)	Brain Underdevelopment	3 yrs	Xiong-ying is doing very well, his foster family loves him very much.
39	Ni-ma (M)	Normal	9 yrs	Ni-ma is studying Primary 1 and is doing well at school.
40	Cheng-rui (M)	Congenital Cataract	1 yr	Cheng-rui is doing well and has started wearing glasses.
41	Wan-ru (F)	Normal	1 yr	Wan-ru is doing well.
42	Jian-wen (M)	Cerebral Palsy	3 yrs	Jian-wen is doing very well, his foster family loves him very much.
43	Jia-hui (M)	To be advised	4 mths	Jia-hui has recently been placed in foster care and is adjusting to a new environment.
44	Zhan-sheng	Normal	1 yr	Zhan-sheng has recently been placed in foster care and is adjusting to a new environment.
45	Mei-zi F	Normal	1 yr	Mei-zi has recently been placed in foster care and is adjusting to a new environment.
46	Xue-yan (F)	Underweight	1 yr	Xue-yan has recently been placed in foster care and is adjusting to a new environment.
47	Xin-yu (F)	To be advised	1 yr	Xin-yu has recently been placed in foster care and is adjusting to a new environment.
48	En-zhu M	Lumbosacral Tumor	1 yr	En-zhu is enjoying his new life with his foster family.
49	Yu-qing (F)	To be advised	1 yr	Yu-qing can now stand up by holding on to something.
50	Man-qi (F)	Down's Syndrome	7 mths	Man-qi is newly placed in foster and is still under observation.
51	Xiao-jie (M)	Cleft lip and palate	8 mths	Xiao-jie has recently been placed in foster care and is still under observation.
52	Xue-hui (F)	Congenital Heart	1 yr	Xue-hui is doing very well, her foster family loves her very much.

# Closing Report Year 2010: Foster Care Program Xining Children's Home



## Financial Report

For the period of January 2010 to December 2010

	Actual EUR\$ Amount	Proposed Budget EUR\$ Amount
<b>INCOME</b>		
Fund fm Wereldkinderen	15,000.00	74,995.00
<b>EXPENDITURE</b>		
Core Support	15,906.20	11,392.00
Overseas Expertise	12,628.97	14,852.00
Local Staff	3,149.27	11,339.00
	31,684.43	37,583.00
<b>Direct Programme Expenses</b>		
Tools and Aids for Children		242.00
Child subsidies	30,815.48	27,000.00
Community Education & Family Recruitment		242.00
Education		242.00
Training for Activities	1,401.05	12.00
Volunteer Subsidies		182.00
Staff Training		2,420.00
Miscellaneous	201.94	145.00
Administration & Management Support	6,410.29	6,927.00
	70,513.19	74,995.00
<b>INCOME LESS EXPENDITURE</b>	<b>(55,513.19)</b>	-



# Christian Action

4/F., New Horizons Building

2 Kwun Tong Road, Kln

Tel: (852) 2716 8857

Fax: (852) 2362 0046

Email: [ca@christian-action.org.hk](mailto:ca@christian-action.org.hk)

Website: <http://www.christian-action.org.hk>