



LISTENING TO DIVERSE VOICES:
Multicultural Mental Health Promotion Research Project

Chinese Community in Western Australia

RESEARCH SUMMARY 2004





East Metropolitan Population Health Unit (EMPHU)

PO Box S1296

Perth WA 6845

Website: <http://www.healthyfuture.health.wa.gov.au>

Information prepared by:

Farida Tilbury, Lecturer, Sociology and Community Development (Murdoch University)

Sandy Clark, Mental Health Promotion Project Officer (EMPHU)

Robyn Slee, Mental Health Promotion Co-ordinator (EMPHU)

Ilse O'Ferrall, Program Manager (EMPHU)

Tim Kurz, Research Assistant, Psychology Department (Murdoch University)

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Perth Chinese Community Summary Sheet


Depression has been identified as a significant global health problem. However, to date, there has been little research into the most appropriate strategies to use in the prevention of depression. There is even less research about the understanding that people of culturally and linguistically diverse backgrounds have of the conditions encompassed by the term 'depression', (or more culturally and linguistically specific representations of unhappiness) and of the ways in which these conditions may be prevented.

The Listening to Diverse Voices: multicultural mental health promotion research project, a collaboration between Murdoch University and the East Metropolitan Population Health Unit, funded by Healthway, investigated these issues within a variety of minority communities and in consultation with service providers, in Perth, Western Australia, during the period 2001-2004. The objective of the research was to identify cultural differences in understandings and experiences of 'depression' and appropriate ways of dealing with such issues.

The research used focus groups and interviews to explore understandings of social and emotional well-being and of 'depression' among members of a number of Horn of Africa communities in Perth, including the Sudanese, Somali, Eritrean and Ethiopian communities; as well as other communities including those from Croatia, Bosnia, China and Indigenous Australians. Service providers too were canvassed for their concerns and experiences. Over 200 people participated in the research. Participants came from a variety of ethnic and class backgrounds, and while some entered Australia under the 'skilled migrant' category, many came under the 'humanitarian program' and had experienced life in refugee camps in other parts of the world before coming to Australia.

Because of cultural sensitivities, separate focus groups were conducted with men, women, older people and young people, for some communities. Most focus groups were conducted by bilingual facilitators, in community languages, and were then transcribed verbatim and translated. Some focus groups and all interviews were conducted in English. It is important to note that the use of such groupings does not imply internal homogeneity of individuals, experiences, perspectives or concerns.

All interviews and focus groups were undertaken using a semi-structured, standardised schedule. Interview and focus group questions were designed to elicit participants' understandings of mental health, social and emotional well-being, depression, causes of depression and recommendations for appropriate treatments and/or interventions. Interviews and focus groups were taped, transcribed and translated, where necessary, and the transcripts studied for common themes. These themes were then taken back to the communities for comment, and the summaries adapted according to this further feedback. While it is not claimed that the participants are 'representative' of the communities of which they are members, the research team feels confident that the issues identified are among the most common concerns of these communities.



Perhaps the most surprising finding is that issues seen by communities as likely to cause emotional (or mental) distress, are social and settlement issues, rather than being biomedical in nature, or being seen as the result of pre-arrival trauma (although this was one factor identified). The result of this is that while some of the issues may be dealt with from within a 'population health' perspective and organisation, most are outside population health parameters. Therefore this information is being provided to a wider audience in the hope that other government departments, non-government organisations and individuals will also take action to address some of these issues.

This summary sheet contains a brief summary of the various issues identified by the Chinese community (four focus groups with older people, young people, newer and more established migrants, and those from Buddhist and Christian backgrounds) as leading to what Westerners might call 'depression' and their suggestions for solutions. Our commitment to hearing the voices of these communities is reflected in our use of direct quotations taken from the interviews and focus groups. The opinions expressed are from research participants and do not necessarily represent the views of the authors. For information about the findings from all other communities, see the East Metropolitan Population Health Unit Website: <http://www.healthyfuture.health.wa.gov.au> or Murdoch University Website: <http://www.cscr.murdoch.edu.au/>

The following is a summary of the issues raised by Chinese community members who participated in the research

Fundamental differences in interpretations of mental health issues:

- The Chinese tradition is to be quiet, and keep to oneself.
- Worries are not to be expressed openly, but kept inside.

Cantonese Focus Group

In our culture, we tend to hide our problems and do not discuss with others. We are told since we are young that 'family disgraces shouldn't be made known in public'. If you have a problem, you can't spread it out and you have to face it and solve it by yourself. It is very different from the situation here. Here if you are in low spirits, you may ask for excuse for handing in your assignment late. However, in the Chinese tradition, if you have stress, it's your problem and you have to face it and try to solve it. Even though you have a big problem today, you must go to work tomorrow.

Chinese Buddhist Focus Group

In Chinese we always keep our worries inside. We seldom open, we seldom worry, angry, frustrated, always [kept] inside.

Reasons identified by community members as sources of emotional distress:

● Employment

- Being unable to find the same job, or level of job, as at home.
- Loss of job.
- Problems at work/study.
- Stress from work or studies or being unable to achieve study expectations.
- Discrimination (perception that employers prefer Australians).

● Financial problems

- Low pay, inability to support family may cause depression - the tradition is to support one's parents but there may not be enough money to do this.

The work pay is very low here. This will affect our emotion. If you can't support your family and children with low income, you may have depression.

Cantonese Focus Group

You used to earn a lot of money in Hong Kong, but here, you may not have enough money to spend. The Chinese have the concept that children [when they grow up] have to support the parents. But after you come here, what you may have is just enough to support yourself. It's difficult for you to give money to your parents. Then you may have stress because you do not have enough money for your family [parents]. When I got my first job, I wanted to give money to my family. But I couldn't because my income could only support myself.

- **Services**

- Slow service provision, service inefficiency and cost of some service provision (this leads to a tendency to use other Chinese rather than locals to do things).

Mandarin Focus Group

Most people here have good manners, but a bit slow, I mean, in efficiency. You have to wait for a long time before you can get something done, for example, medical insurance application, banking. very annoying, sometimes. Not easy to cope with this.

- Slow pace of life in Perth can be frustrating as it takes a long time to get things done.
- There is a lack of information about where or how to access services.

Cantonese Focus Group

Sometimes you are not sure where to report to the police, or where to find the fire station or hospital. You just don't know where to get these services within your suburb.

- Medical services are too expensive and there is confusion over what can be claimed.
- Public transport is not convenient.

- **Worry about the future**

- **Family issues**

- Family stress.
- Problems with children.
- Pressure from family and friends (concern for disappointing one's parents).
- Relationship issues such as divorce or lack of good friends.
- Loss of someone (death).

Chinese Buddhist Focus Group

For Chinese families most of our worries are on children, and children always give us worries

... we'd like to have somebody to tell us how to understand the teenagers especially those teenagers that have grown up in Australia and they have Australian thinking instead of Asian thinking, because we have Asian thinking.

Mandarin Focus Group

We come here to study. We feel that pressure is given by our parents cause they have placed their hope on us.

- **Language**

- Language barriers make merging into mainstream difficult (pronunciation, grammar, slang and colloquial English) and cause difficulties with accessing services and making good Australian friends.
- Language and cultural differences make it difficult to make close friends with Australians (loneliness).

I think it is not easy to make friends with the Australians, or the foreigners. For normal chatting, it's O.K. but for closer communication, it's difficult, because of language problem ...

Cantonese Focus Group

Yes, language is the most difficult to cope with ... in Hong Kong you can speak your own language and you can help yourself. But, here you have to use a completely different language. That's why I say language is the most difficult to cope with. Just as we've discussed before, the lack of sense of security. We have language problem, or communication problem here. We can't communicate well with our boss, our colleagues, or even service men who do repairs for our house. Your emotion may be steady if you can solve the problem of communication. If you can merge into the mainstream group, you would not have so many problems.

- Older community members were worried about being alone and the difficulty with language barriers if they need medical assistance.

If I get sick one day, I can not walk. What can I do? This shows you that for an old person it is difficult. Like last time she said I interpreted for her and she solved her problem. But next time I do not have some one to help me.

Chung Wah Focus Group

In case you have an emergency in hospital, once you arrive there by Ambulance, there is no interpreter available.

Suggestions made to improve the mental wellbeing of the community:

● Individual strategies

- Think positive, be optimistic and do not think about those unhappy things.
- Talk to your good friends, share with others who will listen or seek help.

Chung Wah Focus Group

You think about everything positive. If you have good friends then you can talk to your good friends and you do not have too much depression. You do not think about those unhappy things. This is a very good society for living, accommodation, environment. I am very happy here in Australia. Since I came here working very hard. Other times I go fishing, play Tai Chi and sing.

- Look for some entertainment (movies, videos, computer) and pass the time differently (change attention from self pity).
- Take a walk.
- Religious beliefs, visit place of worship, pray to God or get advice from community of co-religionists.
- Do not keep the emotion in your head or you will get ill.
- Visiting a psychologist is uncommon, as it is seen as a loss of face or indicating that there is something seriously wrong with you mentally.

● Social needs

- Join the Chung Wah Association.
- Need for friends and social activities.
- Take the initiative and make some Australian friends to spend time with, share each others' cultures and increase understanding.
- Join social activities/interest groups.
- Celebration of Chinese New Year and other festivals like the Dragon Boat Festival to allow enjoyment of own culture here as a group.
- Having a happy family.
- More community activities or information/promotion about community activities.

● Information - it would be useful to have:

- A consumers' committee that can provide guidelines and advice such as help to fill in forms or interpret.
- An information hotline service with someone explaining it in Chinese.
- Doctors who can speak the language.

Chung Wah Focus Group

If there is some volunteers or voluntary workers who can help us in case for example, we need to go to hospital, we need to fill in forms or interpret for us. He may charge money for this, what is going to help us.

- **Religion**

- Understanding that you reap what you sow and need to accept this (karma).

Chinese Buddhist Focus Group

So we have to forgive we have to understand that there must be something wrong, so we did something wrong so that cause this karma, so we learn how to accept this karma and then we let go. Yeah we have to let go and then go on because we know that from the people we keep doing good deeds and everything we'll get good karma. Yes so even let's say I've got bad karma now ... keep practising a good deed, I will get good karma back. But the karma it can't change so we have to accept then let go. But we understand keep practising the good deeds we get the good karma again.

- Talking with a religious minister can help one to understand the reason for things.

Chinese Buddhist Focus Group

I talk to him [reverend] and then I not so worried and then I so happy every day I come to temple.

- Meditation and prayer can also help understanding.
- Visit church/temple, pray or meditate, or get advice and support from co-religionists.

Cantonese Focus Group

Members from the church can let you understand what are the problem you are facing and they can give you advice. They'll show you how to express your emotion so that you won't go to extremes.

- If it is a serious problem go to the doctor, if it is less serious go to the temple to be given homework (meditation and scripture).

Cantonese Focus Group

You can have something to repose your trust in... I mean, if you have problem, you can pray to God. Talk to Him and you'll feel better and happier. Then you'll have the strength to face the problem. But, talking to a friend can only give you a short-term assistance and the problem will still be there.

Suggestions for disseminating mental health promotion material in the community:

- **Radio (in Chinese and English)**
- **TV (in Chinese and English)**
- **Chinese newspapers**

Cantonese Focus Group

There are many technical terms. If there is no Chinese, it will be difficult to understand. Many of us can read and understand a bit English, but it'd be better to have a Chinese translation next to the term. There is no need to have the whole article to be translated into Chinese.

- **Posters or pamphlets which could be distributed via:**
 - Clinics.
 - Shopping centres.
 - Libraries.
 - Schools.
 - Community newspaper.
 - Organisations in Chinatown.
 - Walls of restaurants.
 - Grocery shops.
- **Suggestions made in terms of the types of information that would be useful:**
 - Parenting information (help with conflict with teenagers who have 'Australian ideas').
 - Depression.
 - Menopause.
- **Seminars on mental health issues held in:**
 - Schools.
 - Universities.
 - Chinatown.
 - Community halls.
 - Libraries.
 - Community service organisations.
- **Orientation programs for new arrivals**



Listening to **Diverse Voices**



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