

Chinese older people

A need for social inclusion in two communities

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First published in Great Britain in September 2000 by

The Policy Press
34 Tyndall's Park Road
Bristol BS8 1PY
UK

Tel no +44 (0)117 954 6800
Fax no +44 (0)117 973 7308
E-mail tpp@bristol.ac.uk
www.policypress.org.uk

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Published for the Joseph Rowntree Foundation by The Policy Press

ISBN 1 86134 242 X

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The **Joseph Rowntree Foundation** has supported this project as part of its programme of research and innovative development projects, which it hopes will be of value to policy makers, practitioners and service users. The facts presented and views expressed in this report are, however, those of the authors and not necessarily those of the Foundation.

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Cover design by Qube Design Associates, Bristol

Front cover: Photograph kindly supplied by the Evergreen Agewell Group, Sheffield.

Printed in Great Britain by Hobbs the Printers Ltd, Southampton

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Acknowledgements

The author would like to thank all the organisations and individuals who have provided professional advice, practical help and emotional support throughout the process of the research and the production of this report.

First of all, special thanks must go to the Joseph Rowntree Foundation. Without their generous financial support, both the research and this report would not have been possible. The author is indebted to Mr Alex O'Neil and Dr Emma Stone of the Foundation, who have contributed insightful advice throughout the process.

Second, special thanks also go to other members of the research team at the Department of Sociological Studies, University of Sheffield: Professor Alan Walker, who was the supervisor of the research project, has provided a great deal of guidance and support in all aspects of the work, and Mrs Marg Walker, who provided administrative support, has impressed the author with her superb IT and communication skills.

Third, the author is also indebted to other members of the Advisory Committee, for their support and contribution to the discussion:

Revd Dr Michael Bayley, St Mary's Church
Mrs Jie Bing Chan, Lai Yin Association
Mrs Yuk Fong Chan, Lai Yin Association
Ms Ruby Chau, Lai Yin Association
Mr Jim Kennedy, Social Services Inspectorate
Ms Ruth Midgley, Community Care Development Unit
Mr David Phillips, University of Sheffield
Dr Lorna Warren, University of Sheffield

Furthermore, the author is grateful to a number of individuals and organisations who have provided advice and/or practical assistance. They include Dr Duncan Scott and Professor Paul Wilding of the Department of Social Policy and Social Work at the University of Manchester; the Soho Fellowship of the Chinese Christian Church in London (special thanks go to Revd Chi Shing Wong, Ah Kong, Leila, Chun Kuan, Raymond and others); the Wing Hong Elderly Association in Glasgow (special thanks go to Mr K.Y. Lee, Mr Paul Chow and their colleagues); the Glasgow Chinese Christian Church (Revd C.K. Pun and Mr Simon Shiu in particular); the Sheffield Chinese Christian Church (Mei Yu, Fong and Mr Chan in particular); the Doncaster Chinese Older People's Luncheon Club (Nancy, Mr and Mrs Ng, Mr and Mrs Chek in particular); and the Lai Yin Association in Sheffield.

Last but not least, the author feels most thankful to all the Chinese older people who have taken part in this research. Many of them have unreservedly shared their views and life stories. Their contribution to the research is unique. Their participation makes the author firmly believe that older people are not passive agents waiting to be researched and assisted. Instead, they play an active role in defining their own needs, interpreting their circumstances and pursuing their ideal life. This research belongs to them. It would not be meaningful if it could not help other members of the society to understand them more or bring any positive changes to the life of Chinese older people.

Executive summary

Based on the belief that Chinese older people in the UK should have the opportunity to voice their views and to be listened to, this study examines their caring needs from a user's perspective. In the study, 100 Chinese older people in South Yorkshire, London and Glasgow were interviewed, both individually or in focus groups. The main conclusions are described below.

Main conclusions

In common with senior citizens of other ethnic minority groups, Chinese older people are vulnerable to a number of disadvantages in adjusting to retirement. Many of them try to overcome disadvantages by attempting to attach to both the mainstream community and their own community.

However, to achieve this attachment is not an easy task. A number of them suffer detachment from one of the communities; some suffer detachment from both.

The common causes of their detachment from the mainstream community include language barriers, insufficient knowledge of social and public services, lack of sense of social rights, low expectations of their lives in the UK, negative experience of retirement, poor mental and physical health and low self-image.

Factors leading to detachment from their own community include inadequate supports from their family, low physical mobility and poor social networks.

To strengthen their opportunity of attaching to

both communities, it is necessary to improve their participation in community life and in the care-giving process, make their needs more visible: strengthen their access to social and public services, build higher expectations of their lives in the UK, and increase their chances of learning new skills and gaining knowledge.

Detachment from the mainstream community

Social and public services are important means for older people to meet their needs and to achieve a higher quality of life. However, the majority of respondents (97%) found it difficult to use the services. The common difficulties included being unable to speak English and to understand the terms and jargon of the public and social services system, lack of information about social and public services and their sense of rights, and finding the costs of using social and public services too high to meet. These difficulties are illustrated in the following quotes:

“I don't know even a single English word; how can I use the services. I will use what they give me.”

“Of course, the more services the better. But I hate filling in forms. I also hate asking people to fill in forms for me. If you ask people for help, you will become their burden and sooner or later annoy them.”

“I am afraid of being sent to an older people's home because I don't know English. I would be seen as an idiot and soon become a real idiot.”

“I don’t want to tolerate their (workers’) unfriendly attitude. It doesn’t matter whether I use more or less services. Dignity is the most important thing to me.”

Many respondents were not satisfied with their lives in the UK. Ten refused to discuss their view and 35 shared explicitly negative views, including the following:

- Life in the UK is boring and the daytime is too long.
- Living in the UK means speaking a second-class language and being given only second-class citizen status.
- Some respondents mentioned that they were now waiting for three things: ‘waiting to eat, waiting to sleep and waiting to die’.
- Some described themselves as ‘half deaf and half blind’ because of language barriers.

The self-image of respondents in general was low. Over half of them (65) thought that they were seen as ‘useless’ and ‘burdens’, because they no longer made any contribution to society and their family. Only a few (7) thought of themselves as citizens and enjoyed the same rights as members of the mainstream community. Moreover, over half of the respondents (55) described their mood as a little sad or very sad most of the time. Over one third thought that their future was full of uncertainty, which is certainly detrimental to their mental health.

Sixteen interviewees compared the services they were using with those provided for older people in Hong Kong. Ten complained that the services they received were less than those provided in London and Manchester. However, no interviewees compared themselves with older people of other ethnic groups. This undermined their determination to fight for services and rights they deserved as British citizens.

Detachment from the Chinese community

Many Chinese families run Chinese take-aways to earn their livings. The need to avoid competition makes them keep each other at a distance. This reduces their chances of interaction and contact. Undeniably, most Chinese people identify themselves as the same group culturally, and they occasionally come together to celebrate Chinese festivals. However, this kind of interaction and

contact is exceptional rather than being a part of their normal daily life. Few Chinese deal with their problems on a community basis or actively promote their interests as a community. Most of their concern is limited to their family. Little attention is paid to anything beyond this boundary.

A number of older people attach their emotions and memory to the China Towns and go there regularly to spend their leisure time. However, because of lack of sufficient facilities for older people in the China Towns, many have no choice but to stay for the whole day in McDonald’s restaurants or in casinos.

Additional studies of Chinese women and middle-aged men show that their ability to provide care for dependants is often exaggerated. In common with older people, they face a number of difficulties in using formal caring services such as language barriers, lack of sufficient knowledge of social services, and difficulties in expressing health concepts from their own culturally perspective. Moreover they have their own problems to deal with such as generation gaps, economic pressure and occupational illness and related problems. However, there are inadequate services to meet these needs – especially for middle-aged men – and few studies of their problems have been done.

With some shift in emphasis from assimilation to cultural pluralism, more attention is given to the cultural way of life of ethnic minorities. However, too much stress on the cultural factor may easily lead to the over-emphasis of the caring capacity of the Chinese community, and the neglect of the divisions between Chinese people, such as divisions between professionals and layman, and between places of origin, social class and gender. For example, Au and Siew (1997) criticise some professionals for using the ‘dumping approach’ in dealing with Chinese people with mental disability. On the grounds that ‘this is your problem, over to you’, they tend to refer the cases to the Chinese community, although the latter is not necessarily well equipped to understand and to take care of people with mental illness.

Suggestions for improving the attachment of Chinese older people

The suggestions for integrating Chinese older people into both the Chinese community and mainstream society stress participation, visibility of needs, access to services, higher expectations and lifelong learning opportunities.

Participation

- to organise a national forum to promote the rights of Chinese older people and to voice their demands for caring services;
- to set up fact-finding and inspection teams of Chinese people to assess formal caring services for Chinese older people;
- to discuss with professionals how to improve communication and develop an effective and equal relationship in the care-giving and care-receiving process;
- to develop a training menu from a user's perspective for training professionals to meet their needs;
- to provide more opportunities for Chinese older people to take an active role in the interpretation process; for example, to help them understand the role played by interpreters and their limitations in the interpretation process;
- to teach them to use the complaint systems for formal caring services;
- to encourage them to take part in voluntary work (for example, to ask them to teach cooking skills, Chinese culture and Chinese languages in community centres).

Visibility of needs

- to give them the right to choose their own diets in residential homes;
- to provide more 'walking wardens' to visit them regularly;
- to help them solve their family problems, such as generation gaps and the difficulties involved in communicating with their grandchildren, and to make their families aware of their needs and problems;
- to make the public aware of the importance of promoting mental health and the Chinese way of defining and expressing mental illness and mental health;
- to invite active users of caring services to act as exemplars, in order to encourage more Chinese older people to use caring services to meet their needs;

- to encourage interpreters to develop common terms for interpreting the health concepts of Chinese older people.

Access to services

- to provide more social and community services in China Towns, where many of them spend their leisure time almost every day;
- to subsidise them to purchase Chinese herbs and to consult Chinese medicine practitioners;
- to provide more residential homes;
- to run courses to teach them to fill in application forms for social services;
- to open social centres in unsocial hours;
- to sponsor their family members to receive interpretation training;
- to employ more bilingual workers in the formal caring services;
- to provide Chinese television programmes to promote caring services;
- to provide hot-line services for them to enquire about social services and to discuss their rights;
- to provide more opportunities for all Chinese older people to join luncheon clubs;
- to set up information counters for promoting formal caring services in the Chinese people's meeting points, such as McDonald's restaurants in London's China Town, casinos and churches;
- to establish 'sales' teams to take a pro-active approach to contacting Chinese older people individually to introduce formal caring services;
- to teach Chinese older people to use emergency services, such as alarm bells at home, before they face a crisis;
- to run more case conferences to share the experiences and skills for meeting the needs of Chinese older people with mental illness;
- to provide more outreach workers to identify and meet the needs of home-bound older people.

Higher expectations

- to subsidise Chinese older people to travel to different cities and visit different Chinese communities;
- to help them to have a more positive evaluation of their working life and higher expectation of their retirement life;
- to provide opportunities for them to contact older people of other ethnic groups, in order

to enable them to understand their common needs and rights.

Lifelong learning opportunities

- to provide them with opportunities for learning English and other languages;
- to provide more skill training programmes in order to help them find jobs;
- to provide training courses for both Chinese older people and middle-aged groups to prepare for their retirement lives, and to understand the welfare rights of retirees;
- to invite Chinese older people to teach professionals about Chinese culture and their ways of defining and meeting needs.

About the study

This study is based on interviews in 1998 and 1999 with 100 Chinese older people in London, Glasgow, Rotherham, Doncaster, Sheffield and Barnsley. To supplement these interviews, several other studies have also been done, including a survey of the health of Chinese women, a review of the Home Affairs Committee Report on Chinese people, a study of the needs and problems of middle-aged Chinese people, a study of Chinese ex-mentally ill patients, a study of the attractiveness of meeting points for Chinese people, and a study of the views of professionals on the improvement of the social and economic position of Chinese older people.

Background and approaches to the study

Background

The 1991 Census indicated that the total Chinese population was 156,938, constituting the sixth largest ethnic minority in the UK (Cheng, 1996), of whom 3% of males and 6% of females were of pensionable age (Owen, 1994). In common with senior citizens of other ethnic minority groups, Chinese older people are vulnerable to a number of disadvantages arising from racism, deterioration of their physical health, and difficulties in adjusting to retirement. As will be shown in Chapters 2 and 3, many of them try to overcome these disadvantages by attempting to attach to both the mainstream community and their own community. Their attempt to make attachments to two communities is not only a way to achieve a life with security and dignity, but is also related to how their identity is constructed and reconstructed. However, it is not an easy task to achieve these attachments; it is a life-long battle – in which not all are successful.

Although age differences are important when investigating the attachment of Chinese older people to their own community and the mainstream community, it is also important to note that many problems suffered by Chinese older people are related to problems faced by other age groups within the Chinese community in the UK. Chinese people are often seen as an invisible community in the social and political spheres (Yu, 1991). They seldom seek help from central or local government to meet their difficulties in maintaining their attachments to both the mainstream and the Chinese communities (Jones, 1998). Social services allocated to them are far fewer than their numbers and needs would appear to justify (Chau and Yu, forthcoming). Few try to take actions to make

their needs known. Their low profile in society raises four questions:

1. Is the Chinese community able to solve its own problems without relying on mainstream social services?
2. Does the Chinese community still maintain its tradition of looking after older people and other dependants?
3. Do Chinese people prefer to play a low profile in the UK?
4. Do Chinese people have their own networks that enable them to maintain their quality of life and are they able to maintain a high level of cohesion in their community?

This study is intended to investigate the care needs of Chinese older people from their own perspective. It is not mainly concerned with answering the above questions. However, the answers to these questions will definitely enhance our understanding of the needs and problems of Chinese older people. If the Chinese community is both able and willing to meet the needs of their dependants – including older people, to solve their own problems and to maintain a high cohesiveness among themselves through their own networks, it may not need help from public and social services. However, if the Chinese community fails to meet these needs, it is worth considering the necessity for providing more public and social services to meet the needs of Chinese older people and the Chinese community. Hence, to understand the needs and problems of Chinese older people, it is necessary to make a study of the needs and problems of the Chinese community. Based on this assumption, several research methods are used in collecting and analysing information.

Research methods

Semi-structured interviews

One hundred Chinese older people from London, Glasgow, Rotherham, Doncaster, Sheffield and Barnsley were invited to attend the interviews. These interviews, however, are more than exercises in collecting information. They aim to encourage interviewees to play an active role in defining their needs, assessing caring services and formulating proposals for meeting their difficulties. In order to achieve this, stress is put on maximising their participation in the research process. Interviewers started the research process by entering the social circles of Chinese older people and contacting potential interviewees. This not only enabled them to understand more about the Chinese community, but also provided sufficient time for interviewees to understand the aims and contents of the research project before they considered whether or not to agree to be interviewed. Moreover, the research method of semi-structured interviews was used to give interviewees more opportunities in sharing their views and in exploring the possibilities for improving their quality of life.

Observation

During the process of contacting interviewees, the interviewers had a chance to observe how Chinese older people organise their social circles, and look at why and how some public places, such as McDonald's restaurants in London's China Town, casinos and Chinese churches provide a favourable arena for them to organise their social network. This discovery provides insight into the characteristics of the Chinese community and the ways in which Chinese older people develop their social network, seek information and communicate their views to each other. Moreover, examination of the places where Chinese people organise their activities will give an insight into the development of methods for disseminating information about social services and improving the attractiveness of social and community centres for Chinese older people.

Focus groups

Eighteen older people in London were invited to join three focus groups to discuss the preliminary findings of the semi-structured interviews and make suggestions on the improvement of their political, social and economic positions.

Supplementary studies

Three supplementary studies were undertaken to explore the needs and problems of the Chinese community. Chinese women and middle-aged men are often seen as the main care providers in the Chinese family. Two studies were conducted of their social and health needs, and their caring ability. Moreover, a number of professionals, including community workers, workers in luncheon clubs, home-help workers, social work students, committee members of Chinese organisations and deacons in the Chinese churches, were invited to make suggestions on the improvement of the older people's political, social and economic positions. In addition, eight Chinese people with mental-health problems were interviewed in Glasgow and London. Six of them were older people. The focus of these interviews is on their needs for reintegration into both the mainstream community and their own community.

Organisation of the report

Chapter 2 discusses the characteristics and problems of the Chinese community based on literature and document reviews. Chapter 3 presents the findings of the interviews with Chinese older people. Chapter 4 discusses the findings of the study on Chinese women and middle-aged men. Chapter 5 examines the social institutions in which Chinese older people build their social networks. Chapter 6 offers suggestions for improvements for Chinese older people based on the discussion from the focus groups and the interviews with the professionals. Appendices A and B discuss the technical details of the research methods.

General profile of Chinese people

This chapter discusses the characteristics and problems of the Chinese community, the problems that the Chinese community encounters and possible ways to solve these problems. The discussion is based on information drawn from the literature and document reviews.

The characteristics of Chinese people in the UK

Population

Chinese people in the UK are a heterogeneous community made up of members from diverse origins and speaking different dialects, such as Cantonese, Hakka, Mandarin, Vietnamese, Wai-tou and Hokkin. The group which came from Hong Kong constitutes one third of the population, about a quarter were born in the UK, the rest coming from Singapore, Malaysia, Taiwan, Vietnam and mainland China (Chan and Chan, 1997). Most older people are former Hong Kong residents with Cantonese and Hakka as their main dialects. Only a few can speak English.

In response to the reintegration of Hong Kong within Mainland China, 50,000 families were given British citizenship. However, there are no available data showing how many of them have settled in the UK. The proportion of people from Hong Kong in the Chinese community has probably increased since 1997.

Immigration history

The majority of Chinese immigrants arrived in the UK in two waves. The first took place in the late 1950s. Most were young males coming from rural

areas of Hong Kong. Although they had married village girls in Hong Kong, most still left their wives behind and worked alone in the UK (Federation of Chinese Association in Britain, 1985). This was because their wages were not sufficient to support their whole family comfortably. In the late 1960s more and more tried to bring their relatives to the UK. This was mainly a response to the Amendment to the Commonwealth Immigration Act, which required both parents of a child to be resident in the UK as a precondition for giving the child the right of abode (Taylor, 1987). Thereafter, more Chinese people of different age groups came to the UK.

Many Chinese people left their places of origin in order to earn a living. This is evident in the close association between the immigration wave and the deteriorating economic conditions in rural Hong Kong, and in the rise in demand for ethnic cuisine in postwar UK. However, the economic factor is not the only reason for the arrival of Chinese people; the political factor also plays an important part.

Hong Kong was a UK colony from 1841 to 1997. It was acquired by the UK not as a settlement for the British, but mainly for setting up a diplomatic, commercial and military post in order to secure trade with China (Kuan, 1979). The Hong Kong government was much more concerned with establishing a profitable investment environment for the private sector, especially British firms, than with fulfilling any political and cultural ideals (Yu, 1996). To develop the manufacturing sector and secure prosperous trading, it concentrated on building the infrastructure and public facilities in urban areas; little attention was paid to the needs of residents in rural areas. Instead of arresting the decline of the agricultural sector and solving the

economic difficulties of farmers, it took an active role in buying agricultural products from mainland China, in order to lower the cost of production in Hong Kong (Schiffer, 1991). Facing keen competition from mainland China, and the apathetic attitude of the Hong Kong government to their livelihood, many people in rural areas felt that taking the risk of coming to the UK was the only way to solve their economic difficulties.

Chinese people's survival strategy in the UK

Chinese people are active participants in the economy: 70% of Chinese men and 50% of Chinese women are defined as economically active in the 1991 Census. Of these, 88% of men and 90% of women are in paid jobs (Cheng, 1996). Certainly this is partly due to the expansion of the catering industry in the 1960s and 1970s. However, the main reason lies in the Chinese people's attitude to work and their adaptability in the job market. The history of Chinese immigrants in the UK is a history of striking out for survival in the private market. The first Chinese settlers in the UK ran small shops for visiting Chinese seamen in the late 19th century. As fewer Chinese seamen came to the UK, people shifted to laundry services – in 1931 there were over 500 Chinese laundries in the UK (Federation of Chinese Association in Britain, 1985). In response to the decline in demand for laundry services, they started to work in the Chinese restaurant business and run Chinese take-aways, which had a fast growth in the 1960s. They use the traditional ways of securing standardised, efficient and low-cost products by working long and unsocial hours, recruiting labour from their family members, stressing family and emotional ties between employer and employees, and accepting a low monetary return for their efforts.

It is important to note that working in Chinese restaurants and family-based take-away shops is a way for Chinese people to maintain attachment to their own community. This is not to say that the working conditions of these jobs are better than elsewhere; conflicts between employers and employees are not uncommon in the Chinese community. However, as they share the same language and culture, it is easier for them to understand the rationale behind the rules and working habits. Moreover, the employees can take a more active role in making sense of their

workplace, even though they might not agree with the rules. The Chinese Action Group (1985) discovered that some managers of Chinese restaurants regard running the business as similar to running a traditional extended family system. They treat their subordinates as family members and meet their needs beyond those related to work. Compared to restaurants, the family-based take-away business has even greater strength in enhancing Chinese family values. Chinese take-aways provide a chance for family members to take care of each other and, through working together, to develop a sense of commitment to family (Song, 1995).

The above discussion shows that many Chinese people do not intend to confine their life within their own community; nor do they have a strong desire to attach to the mainstream community. Rather, they maintain a double-attachment to the host society and their own community: their attachment to the former is mainly achieved by participating in the private market and the relationship is basically commercial; their attachment to the Chinese community is mainly achieved through the family or working in the Chinese restaurants.

Their problems

Many Chinese found their life in the UK difficult. Their difficulties include the following:

Economic uncertainty

The high participation rate of Chinese people in the labour market and low unemployment do not necessarily reflect that all Chinese people enjoy a decent standard of living. It is quite well known that Chinese people in the catering industries work long and unsocial hours (Home Affairs Committee, 1985). This not only reflects their willingness to work hard, but also shows that they are under huge economic pressure. Running Chinese take-aways is to a certain extent a risky business. *Herald Europe* (1998) estimates that 20% of owners need to close down or sell their business to other people. The failure in running a catering business not only means loss of livelihood but may also imply personal failure. It is not uncommon for those who lose their businesses to move to other cities in search of a suitable investment environment to re-start their take-away businesses.

Occupational hazards

As a result of a heavy workload and high vulnerability to occupational hazards, many middle-aged and older workers suffer from health problems and find it difficult to continue to work. According to Owen (1994), the health of older Chinese people deteriorates much faster than white people of the same age. As will be shown in Chapter 4, many middle-aged Chinese people are worried that unexpected occupational hazards and illness will deprive them of their ability to work. In fact, these incidents *are* common in the Chinese community. Despite this and their worries, few have made concrete retirement plans. The interview findings also reveal that some older people do not realise the importance of joining pension schemes before their retirement because they do not understand their social rights and the social welfare opportunities available to them.

Hidden unemployment

Hidden unemployment is not uncommon among Chinese people. To avoid the status of being unemployed, some previous surveys show that it is not unusual for Chinese families to invite their members to work in their Chinese take-aways even though they are not economically necessary (Chan, 1986). This is an important reason why Chinese people have a low take-up rate for means-tested benefits.

Limited use of welfare services

As mentioned in Chapter 1, many Chinese people find it difficult to use social and public services to solve their problems due to a number of reasons: language barriers; lack of understanding of their rights; absence of experience of contacting professionals; and low expectations of social services (Shang, 1985; Chiu, 1991; Jones, 1998).

In view of the attempts of many Chinese people to organise their lives with attachments to both the mainstream society and their own community, there are two possible approaches to the above problems. The first is to seek help from their own community; the second is to rely on the public and social services provided by the mainstream society. However, whether these two approaches are effective, or not, are debatable. They depend on several conditions.

Attachment to the Chinese community

The effectiveness of this approach is based on two conditions. The first is that the cultural factor still plays an important role in shaping Chinese people's lives in the UK. As a result, they still follow the traditional practices of helping the members of their own community and family. The second is that the Chinese community is cohesive and capable of providing care for their dependants.

Cultural factors

Some analysts believe that the above two conditions exist in the Chinese community in the UK. Their views are represented by the following quotes:

The Chinese community is still fairly conservative in nature sticking well within its own created socio-economic sub-culture. It is mainly family oriented and hence many of the traditional Chinese values still hold. The insistence, for example, of hard work, self-reliance, low profile virtual non-competition in the current job market, lack of lobbying on behalf of the community at local government or national level, not asking anything from the host community has led to this introversion. (Wong, 1985, p 14)

The Chinese in Britain were never concerned to develop social relationships outside their own closed communities and it is much the same today. Until recently they have regarded themselves as sojourners rather than settlers, resolutely maintaining their Chinese culture and continuing to identify their kinsmen at home rather than with the host community. (Jones, 1979, p 398)

Moreover, some professionals and academics use a cultural perspective to explore the needs of Chinese people and suggest approaches to helping them. For example, Lau (1997) tries to prove the importance of education in the eyes of Chinese people by presenting historical evidence – such as the fact that the Han Emperor Wudi in 124 BC established an appointment system of officials based on education and individual ability; the practice of competitive recruitment, which as developed in the Tang Dynasty in the seventh and

eighth centuries; and public examinations, which were developed into three sophisticated levels in the Sung Dynasty (AD 960–1279).

Given the long recorded history of China and the fact that many Chinese people came to the UK through kinship, it is impossible to ignore the cultural factor in studying the needs of the Chinese community. Chinese people have developed sophisticated ways of defining health, using herbal medicine, conducting family relationships and sustaining moral order. It is difficult to meet their needs effectively if these cultural traditions are neglected.

However, it is important to avoid the over-emphasis of the importance of traditional values in the Chinese community, and subsequently the assumption that Chinese people are unwilling to integrate themselves into mainstream society. Chiu (1989, 1991) presents both historical and empirical evidence to argue that the influence of traditional values in Chinese society is often over-estimated. His study of Chinese families in London shows that many older people did not receive sufficient care from their families due to the unsocial working hours of family members, the generation gap and deteriorating family relationships. His review of history discovered that the 'traditional family values' were not generally held even in traditional Chinese society. The ideal family model with all married sons ideally living under the same roof with their parents was found mainly in rich people's families. For the ordinary family whose livelihood depended almost solely on land rented from the rich, large family size was of much less practical value (Chiu, 1991). Many had to control their family size because of food shortages. It is not unusual to see that the poor delayed their marriage while waiting for the older generation to die or for their economic fortunes to improve.

Moreover, too much stress on cultural factors may easily lead to the conclusion that 'the Chinese must know the needs of Chinese'. This view overlooks the divisions among Chinese people, such as divisions between professionals and laymen, between places of origin, social class and gender. Au and Siew (1997) criticise some professionals for using the 'dumping approach' to deal with Chinese people with mental-health problems. On the grounds that 'this is your problem, over to you', they tend to refer the cases to the Chinese community although it is not necessarily well-equipped to understand and take

care of people with mental illness (Au and Siew, 1997, p 15).

The Chinese community

It is important to note that the degree of cohesion of the Chinese community is much less than is commonly assumed. Many Chinese people still identify themselves as members of the same community in that they share the same heritage, culture and languages, but the ability of these elements to bind them together is undermined by potential conflict of interest. To understand this, it is necessary to note two points. First, the Chinese community is shaped, not only by cultural factors, but also by the ways in which the Chinese seek economic survival. Second, their ways of seeking economic survival, especially in the catering industries, undermine their chances of building a cohesive community. This is illustrated below.

The Chinese catering trade can roughly be divided into two types: Chinese restaurants and Chinese take-aways. As a result of free entry into the market and high price elasticity of demand for Chinese foods, the owners face keen competition. To secure survival they usually adopt two kinds of strategies. The first is to stick together in a small district, such as the Chinese restaurants in the 'China Towns' of London and Manchester. Since the restaurants often sell similar food, they cannot avoid intense competition. The restaurant owners are careful in deciding their prices, because any bad decisions will inevitably result in losing customers to their rivals. Moreover, they have to continuously change what they sell in order to attract customers' attention. In the 1950s most restaurants only sold 'chop suey' (Watson, 1977). Restaurant owners had to improve their food because of the competition, and as a result, more authentic Cantonese- and Beijing-style foods have been available since the 1970s. Moreover, people also run theme restaurants in China Towns. These kinds of restaurants derive their reputation from expertise in a particular type of Chinese food.

In return, a high concentration of restaurants in a small district brings attractive economic benefits. The district can build its reputation as a meeting point for the Chinese and a site of interest for tourists. This is exemplified by the China Town in London in which there are not only top-class Chinese restaurants for international tourists but also a number of travel agencies, barber's shops, grocery stores, book shops, and solicitors' offices

which provide services for the local Chinese (Watson, 1977). Since China Towns have become well-known places, their restaurants are guaranteed a steady number of international and local customers.

The second strategy is to resort to a geographic differentiation (Lipsey, 1993). This is commonly used by Chinese take-aways, which employ the majority of the Chinese engaged in catering. The main aim of the strategy is to avoid competition. To achieve this, the Chinese take-aways try to keep a reasonable distance away from each other. This is important to the survival of the Chinese take-aways. Since most are run only on a limited amount of capital and are not able to hire first-class chefs (Shang, 1984), they cannot afford to make large-scale innovations nor to differentiate their menus from their rivals to any great extent. As a result, the meals sold by Chinese take-aways are virtually the same, which is why Chinese take-aways have become dispersed widely across Britain.

It is also important to note that the Chinese take-away is usually family-based – almost every Chinese take-away is run exclusively by a single family and the family members provide the main supply of labour (Baxter, 1988; Song, 1995). The scattered distribution of take-aways also means the scattered distribution of the Chinese families. As observed by Owen (1994), there is relatively little regional variation in the Chinese resident population. This explains why the Chinese community is not a strong territorial group and Chinese people lack a common territorial affiliation (with the exception of the China Towns).

Physical distance implies social distance, but the Chinese are not only geographically divided, they are also socially divided (Taylor, 1987). While the owners of Chinese take-aways are in a sense members of the same community, they are at the same time potential competitors for the same group of customers. This attitude affects their approach to getting on with each other (*Herald Europe*, 1998). Researchers in Chinese studies have cited evidence that the Chinese attempt to hide personal and business information from each other (Taylor, 1987; Yu, 1991). Cheung (1975) also noted that Chinese proprietors avoided visiting their potential rivals' working places. In fact, attempts to prevent potential rivals from gathering clear market information are commonly used as a way to erect market barriers against newcomers.

Given that cultural factors are not as important as it is assumed in shaping Chinese people's lives, and the cohesiveness of the Chinese community is undermined by Chinese people's need to seek economic survival, it is doubtful whether the Chinese community can provide sufficient support to solve its own problems.

Attachment to mainstream society

Whether Chinese people can solve their problems through the use of public and social services depends on whether there are sufficient culturally sensitive services to meet their needs, and whether Chinese people understand their rights and are able to cope with some barriers (such as language barriers and the lack of understanding of the existing social and public services) in using the services. The results of previous studies throw doubts on the existence of these conditions (Shang, 1985; Chiu, 1991; Jones, 1998).

Moreover, it is doubtful whether Chinese people have sufficient basis to form a strong local interest group to protect their interests as users of public and social services. As mentioned above, the Chinese community is mainly made up of a sum of geographically dispersed families. This affects their chance of receiving social services (Eaton, 1999). Nationally, the Chinese form a substantial group, but their numbers are few in many single local authority areas (Home Affairs Committee, 1985). Since most social services are provided and administered according to the boundary of the local authority and the social composition within the boundary, it is not surprising to find that the needs of the Chinese are not taken seriously into account by service providers (Chan and Chan, 1997). There is no district where the Chinese are the largest ethnic minority group. Local authorities are concerned with the needs of ethnic minorities, but they are less likely to provide services tailor-made for the Chinese. Moreover, Berthoud (1998) shows that there was a wide gap between high and low incomes in the Chinese community: 28% of Chinese households are poor compared to 16% of the white households. This further undermines the possibility of their cooperating to fight for their interests.

Difficulties of making attachment to two communities

The problems suffered by Chinese people mentioned above and the difficulties they experience in relying on either their own community or the mainstream community have existed for quite a long time. As early as 1985, the Home Affairs Committee Report highlighted five barriers blocking Chinese people from participating fully in British life – lack of English; ignorance of rights; cultural differences; scattered settlement; and long unsocial hours. As mentioned in Chapter 1, this study is intended to examine the care needs of Chinese older people from their perspective. It is not concerned whether these five barriers have been removed over the past 15 years and whether the Home Affairs Committee Report had missed other barriers. However, the care needs of Chinese older people are not an isolated issue. Their experiences of using public and social services, and seeking help from their own community also reflect whether their tactics for meeting needs are effective or not. The details of their experiences based on the semi-structural interviews are shown in Chapter 3.

Summary of the interview findings

As mentioned in Chapter 1, 100 Chinese older people were interviewed in London, Glasgow, Doncaster, Rotherham, Sheffield and Barnsley. Details of the issues explored by the interviews are given in Appendices A and B. This chapter concentrates on discussing their problems of detachment from their own community and detachment from the mainstream society.

Characteristics of the respondents

Thirty-nine respondents were male and 61 were female. The average age of interviewees was 71, the oldest was 84 and the youngest was 65. The original home of the majority (72) was Hong Kong, 27 came from mainland China, of whom eight had stayed in Hong Kong for more than five years before arriving in the UK, and one was born in Singapore. Fourteen interviewees arrived in the 1950s, 35 in the 1960s, 39 in the 1970s and ten after 1980. Two interviewees had returned to Hong Kong but had come back recently.

Sixty-eight interviewees had worked in the UK, of whom 50 had worked full-time and 18 had been either part-time or temporary workers. Nine said that they never worked formally but had helped out in their family's take-aways from time to time, receiving no wage. The other 20 disclosed that their main purpose in coming to the UK was to take care of either their children or grandchildren or both.

Of the interviewees who had worked before, 60 had worked either in Chinese take-aways or restaurants, four worked in Chinese shops and four did not disclose the details of their career history. None of them had worked in the catering industries before coming to the UK. Many who

came from Hong Kong used to be farmers living in rural areas – the New Territories (35). The rest had been in other occupations, such as factory workers, bus drivers and construction workers.

Care needs

Almost 40 respondents said their health was good (21) or very good (18). The majority could take part in most of the activities of daily living, such as bathing, washing and dressing without the help of other people. However, many of them had difficulties in using transport services, such as public transport (52) and taxis (78). As a result, they seldom travelled to other cities alone. Making household repairs was another difficulty faced by the interviewees – 42 found it difficult to carry these out by themselves.

Only 14 interviewees complained that they had too little money to support a decent standard of living, and about two thirds (68) of the interviewees said that the money they received was sufficient.

Although the majority were able to look after themselves in their daily lives and did not have financial problems, many of them did not find their life a happy one. Fifty-five respondents described their mood as a little sad or very sad most of the time, over a third (38) thought that their future was full of uncertainty, and 35 respondents did not like their current life in the UK. Of those, 25 found it boring and felt the daytime was too long. It was hard for them to find something meaningful to do every day. Quite a number of them (30) thought that they were 'second class' citizens because they could not speak English, and as a result made them no different from 'half deaf and half blind'. There was

also a common saying among the respondents that Chinese older people were now waiting for three things: waiting to eat, waiting to sleep and waiting to die. It is important to note that ten respondents refused to comment whether their current life was good or not. A common reason was that they had no power to make any changes. Hence it was better to accept life as it was.

The self-image of interviewees in general was low. Over half of them (65) thought that they were seen as 'useless' and 'burdens' because they no longer made any contribution to society and to their family.

The above findings suggest that many interviewees needed more psychological support and concern. However, they disclosed that it is difficult for them to meet these needs by relying either on the mainstream community or their own community. In fact, it is not uncommon for interviewees to suffer a certain degree of detachment from these two communities.

Detachment from the Chinese community

As mentioned in Chapter 2, the cohesiveness of the Chinese community is over-estimated. As a result of long working hours and the necessity to avoid competition in the catering industries, many Chinese families keep each other at a distance. As a result, older Chinese people can attach their life to the Chinese community only by attachment to their family. The family is not only an important care provider, but also serves as the most important place for the older people to find their role and purpose in life. However, over half of the respondents (65) did not have high expectations of their family members in taking care of them for four reasons: poor relationship with the family members, depreciation of Chinese traditional values, pressure faced by their children and low self-image.

Many lived alone (39), of whom 15 had never married, 11 were either widows or widowers with no children and 13 were separated from their spouses and children due to a number of reasons – marriage problems, health problems and

financial problems. A further 22 lived with their spouses but not with their children. Nine have not seen their children over the past two years, of whom six did not know either the address or the phone number or both of their children. Seven saw their children occasionally, mainly on festivals, their birthdays and when they had problems. The rest (39) lived with or very near to their children. However, living together was not a guarantee of good relations. The common factors undermining their relationship with children included the following: the children worked long hours and had no time to talk to them (16); they did not know whether they were hosts or guests in the families (12); and this put them in an embarrassing situation in the family decision-making process and in the events which required sharing financial resources (16); they were worried that they would become burdens on their families (8); and they did not understand English and could not communicate with their grandchildren (7).

The interviewees (22) were not quite sure whether traditional Chinese values could still be applied in the Chinese community in the UK, as the younger generations were influenced more by the western culture. Some (12) often used incidents of abuse of older people in Hong Kong to justify that their situations were not the worst.

Twenty-nine interviewees thought that their children faced a lot of pressure in their daily lives, such as competition in the catering industry, the need to look after their own children and difficulty in using mainstream services. Thus, they did not think that their children had sufficient time and resources to meet their needs.

Many interviewees (25) suffered from low self-image when they were no longer able to help out in the take-away business or look after their grandchildren. Therefore, they did not think that they deserved care from their family.

Case studies

The following case studies will help illustrate the above points.

Case study 1

Mrs A, aged 70, had lived in London for 28 years. Her husband came to the UK two years before her. She had run a Chinese take-away business with her family. After her husband died 10 years ago, she sold the business to another Chinese family. She had three sons, all of whom worked in the catering business in other cities. She seldom visited them because she had very poor relationships with her daughters-in-law. She had never expected that she would need to live alone and received no support from her sons. She pointed out: "I am used to being rejected by the mainstream society; but the experience of receiving rejection from my family is not only new but much more painful". From time to time she wanted to visit her sons and see her grandchildren, but she thought it an insult for her as a senior family member to take the initiative to approach the junior members. She was also afraid that she would not be welcome there.

Case study 2

Mrs B, aged 66, had lived in the UK for 41 years. She was married with four children. In her first 10 years in the UK, she worked in a restaurant kitchen washing dishes. As she had no chance of meeting British customers or time to learn, she knew only simple English. She stopped working at the age of 35 to look after her children, and thereafter she had even less opportunity of seeing people and learning the social and economic systems in the UK. Her husband died 10 years ago, but her relationship with her children was not very good. At first she lived with her eldest son but, after her relationship with her daughter-in-law turned sour, she arranged to live alone in a council flat. Her other children (one son and two daughters), who live in other cities, seldom visited her. Only her eldest son visited her from time to time and gave her some pocket money. Her main income was from social benefits. However, she felt that she had sufficient money as she had nowhere to spend money except buying the basic necessities.

Mrs B did not feel happy about her life in the UK. She always wanted to go back to her homeland (Hong Kong). However, she was afraid that she would not receive financial support from the government once she left the UK. Moreover, she did not think that she had sufficient money to rent a flat in Hong Kong. Furthermore, she was worried that her relatives in Hong Kong might regard her as a burden if she stayed there permanently.

She felt life now was boring and empty. The daytime was simply too long and she passed most of her time by sleeping and watching Chinese videos. However, because she lacked money to buy new video programmes, she mainly watched the old ones (made in the early 1980s) repeatedly. She went to the luncheon club from time to time, but she did not like most members because they gossiped a lot. She went there primarily to gain information about social services and to let people know that she was still alive. She thought the workers in the luncheon club were basically nice people, but did not feel confident that they had time to help her to solve her problems. Sometimes she went to casinos to see other Chinese people and also because the casinos were warmer than her flat.

Case study 3

Mr C, aged 70, was living with his only son in Glasgow. He had run Chinese take-aways for 30 years and had passed the business to his son and daughter-in-law. While his son gave him money regularly, Mr C did not feel his son was concerned about him. He thought that his son looked down upon him because he could not make any contribution to the family. He was seldom invited to take part in the decision-making process in the family or asked for advice. His son criticised him for being a burden to the family. He suspected his son was planning to send him to an older people's home. He had a grandson, but recently they seldom talked to each other; although his grandson knew Cantonese he refused to speak Cantonese to him. As a result, he could not understand fully what his grandson said. He felt that he was seen as a foreigner, not only in society but also at home. He complained: "I was seen as a foreigner in the UK; I understood why the mainstream society did not accept me as a normal person. But I could never understand why my children also regard me as abnormal and do not care about me. Why do they do this to me?"

Detachment from mainstream society

Quite a number of respondents were using social and public services. For example, 41 were members of luncheon clubs; 27 of whom lived on income support and 15 who were regular members of Chinese community centres. Despite these, the majority (97) still found it difficult to meet their needs through the social and public services due to language barriers, lack of sufficient information and the costs of using social and public services.

The majority suffered from language barriers when using social and public services (78). These not only arose from their difficulties in speaking English, but also from their difficulties in understanding the terms and jargon of the public and social service system. Of the 22 who did not mention the language barriers, 11 did not use any social services at all and 5 relied heavily on interpreters to help them. However, 19 respondents said they did not understand what the interpreters were trying to interpret for them in the process of using the services.

Seventy-three respondents did not have clear ideas about the types of social services open to them. Many said that they did not know why they were given the services that they were using (61). An even large number of respondents (72) had difficulties in gaining information about social services. Twenty-two respondents said that they had not received any formal education and blamed this for their lack of ability to understand the welfare system or express their needs clearly to the social workers, even in Chinese.

Quite a number of respondents (54) had no idea about what kind of social rights they had and the reasons why the government should provide social welfare for them. This problem is illustrated by the following quotes:

“British are the hosts, we are the guests. It is doubtless that the services are mainly provided for them, not for us.”

“The government hasn’t looked after me in the past. I don’t believe that it now sincerely takes care of me. I am old and not valuable. There is no point in looking after me. They provide services just for symbolic purposes. We are only a dot. But I still use them because I paid tax and stamps.”

Twenty-two respondents said that they did not want to rely on other people (non-family members) such as social workers, friends and interpreters to help them. Twelve respondents complained that workers did not treat them well. A respondent said: “I don’t want to tolerate their (workers’) unfriendly attitude. It doesn’t matter whether I use more or less services. Dignity is the most important thing to me.” Another said: “Of course, the more services the better. But I hate filling in forms. I also hate asking people to fill in forms for me. If you ask people for help, you will become their burden and sooner or later annoy them.”

Case studies

The following case studies may help to illustrate the difficulties of using public and social services.

Case study 4

Mrs D, aged 68, was a member of a luncheon club in London for five years. She was afraid of seeing doctors and social workers because she had not mastered any English language. She hoped that the government could employ more Chinese workers to visit her regularly and tell her the updated information about social services.

Case study 5

Mrs E, aged 70, had no experience of using any public and social services. She was afraid that if she applied for the services, the government would check her personal information. When she ran the take-away business, she was always harassed by the local customers. She did not believe that the government would sincerely provide services to meet her needs. Moreover she did not speak or write English and found it difficult to fill in forms. She said:

"I am old now, using some more social services will not make me live longer; they only bring more trouble to me."

Case study 6

Mr F, aged 68, had joined both luncheon clubs and community centres before. He did not find workers friendly and did not find it worthwhile spending time in these places. He felt that having tea in McDonald's restaurant everyday was more meaningful. At least he could gain a sense of freedom and did not need to make any commitment to the centres.

Some contradictions between attachment to the Chinese community and to mainstream society

It is important to note that attachment to the Chinese community may be contradictory to the attachment to mainstream society. Examples are living in sheltered accommodation and hospitals. When using mainstream social services, Chinese older people cannot overcome language barriers or mix with other users. Even worse, they might lose touch with the Chinese community and their own control over their daily life and diet. As a result they become isolated individuals inside hospitals and residential housing.

Despite the fact that there is a growing demand for residential homes, 31 respondents feared that they might be required to leave home when using such services as older people's residential homes and hospitals. In the words of two respondents:

"I am afraid of being sent to an older people's home because I don't know how to speak and understand English. I would be seen as an idiot and soon become an idiot."

"If I live in the older people's home, I will not be given the chance to eat the food I need. My health will then deteriorate fast and I will die."

Summary

Given that many respondents had taken part in the labour market and run family businesses, it is safe to say that many respondents had tried to maintain certain attachments to the mainstream community and their own community. However, many now have difficulty in maintaining the attachment to these two communities. Three focus groups were set up in London to discuss these findings and the possible solutions; these will be shown in Chapter 6.

Chinese women and middle-aged men

As discussed in Chapter 1, many problems suffered by Chinese older people are related to the problems faced by other members of the Chinese community. Chapter 3 showed that some Chinese older people do not receive sufficient care from their families. It is not only a problem faced by older people, but may also reflect the limitations of the Chinese as far as caring for the members of their community. In the Chinese family, the main providers are women and the middle-aged men. Two studies have been done to examine their needs, problems and limitations in taking care of dependants and themselves.

Chinese women

Background

A study of the social and health needs of Chinese women in Sheffield was conducted in 1998. Questionnaires were sent to 140 members or affiliated members of the Lai Yin Association by post or by hand. Where assistance was needed in completing the questionnaires, respondents were interviewed by volunteers. The total number of returned questionnaires was 87, out of which 85 were valid. To counter-check the findings and further analyse the insights drawn from the study, ten respondents were invited to discuss the study results.

Characteristics of respondents

The majority of the respondents were married (74), four were single and six were divorced. Most were aged between 35 and 44 (49). Fifty-nine originated from Hong Kong and 23 from Mainland China. The vast majority had at least attained

primary education (40); 21 had received secondary education and 15 had reached University level.

Roles of maintaining the family's health

Most respondents carried out the roles of care and as health providers in the family: 61 did housework, 64 were responsible for taking care of children and 52 performed cooking tasks in their daily activities. Moreover, over one third of respondents went out to work, mainly working in Chinese take-aways or restaurants. As shown in Chapter 2, Chinese women participated actively in the labour market and this finding reflected the general picture of the Chinese community. The responsibilities of respondents for taking care of their family and the family business were heavy. More than half of the respondents thought that their daily life was either busy or very busy, and none reported their life was not busy. This was highlighted by one respondent in the in-depth interview:

“I work from early morning to midnight, the time seems to chase after me. But I need to work like that. There is no alternative unless I give up either business or family.”

Most respondents put family issues before their own. When being asked to list the things they were worried about, 54 mentioned the studies/career of their children, 51 health problems of their family members and 45 the economic conditions of their family. This shows that most respondents regarded keeping their families free from these problems as their responsibility. Twenty-seven were even worried about their family members who were living overseas. In the

in-depth interviews, over half of the respondents (7 out of 10 cases) said that they would feel uneasy and guilty if they were unable keep their family healthy and financially safe. It is therefore not surprising to see that they were prepared to make sacrifices to prevent these problems, and they believed that other Chinese women would do the same thing.

On the one hand, respondents were eager to secure the health of their family members and bore a heavy workload in their daily life. On the other hand, many were far from healthy. Only 33 thought that they were either healthy or very healthy, 11 thought that they were either unhealthy or very unhealthy. It is important to note that a number of them (41) answered 'don't know'. Moreover, many suffered from common complaints, including headache (35), dizziness (19), backache (28), pain in joints (27), tiredness (27), problems with nerves (26), period pain (26) and feeling under pressure (26).

Language barriers

Fifty-two thought that their English was either poor or very poor. Only two rated their English as good or excellent. When asked about what difficulties they had come across in using social services and health services, over 70% of respondents mentioned language barriers.

Cultural gap

Respondents in the in-depth interviews believed that some health problems were caused by adverse elements inside their bodies, for example, the 'hotness' inside the body caused muscle ache and the 'wind' inside the body resulted in dizziness. Despite the popularity of these explanations for illness in the Chinese community, according to the respondents, GPs had no knowledge of them. Even worse, Chinese people also find it difficult to explain these concepts comprehensively to doctors, even if they have a good standard of English. These concepts were beyond the understanding of the GPs.

Lack of understanding of the social services

The majority of respondents are immigrants, and it is not easy for them to understand the system of social services and their social rights. Thirty-five said that they did not know that the social and health services existed, 39 said that they had no

knowledge about how to use the services and 18 felt uneasy about applying for social services to meet their needs and the needs of their family.

Dual roles

More than one third of respondents needed to go out to work, and many of them ran a family business. As mentioned by Miles (1993), the meanings of health and illness attached by individuals are influenced by their social standing and material circumstances. This was also found among respondents. How they perceived and understood illness and health was related to the availability of resources in maintaining health, and the necessity of being able to run the family business. Many defined health in terms of the conditions of being able to work. It was common for them to claim that they did not know whether or not they were sick, because they could not afford to be sick or to take sick leave. In most cases they felt uncomfortable but were 'able' to continue to work. As a result, they found it difficult to judge whether they were healthy in a real sense or not.

"Poor people like me have no right to have illness. If I don't work, who does the work for me in the take-away?"

"If I won the national lottery, I would apply for a long sick leave. However, now is the daytime; too early to make such a dream."

Problem-solving patterns

Most respondents were reluctant to seek help outside their family. When facing minor problems, 41 solved problems with their family members in the household; when facing serious problems, 45 resorted to the wider family network such as relatives and friends. Few respondents expected the government or non-Chinese community organisations to help. It is also important to note that a certain number of respondents solved their problems alone – 21 and 10 respondents, respectively, when facing minor and serious problems. Forty-five would consult a doctor if they or their family members suffered from minor illness, more than one-third of respondents (31) would buy non-prescription drugs from chemists, 19 ignored the problems and left the recovery to chance, 13 took Chinese medicine and 6 consulted Chinese medical practitioners. If they or

their family members suffered from serious illness, most respondents chose to consult doctors (68) or sought help from Chinese medical practitioners (18). However, 11 respondents chose to ignore their problems.

Summary

Chinese women not only have limitations in providing care, but also have similar problems to Chinese older people such as language barriers, lack of understanding of social services and problems arising from the cultural gaps.

Middle-aged men

Background

Besides Chinese women, middle-aged men play an important role in providing care for family members. It is therefore important to understand their needs, problems and limitations in taking care of dependants and themselves.

Characteristics of respondents

Ten middle-aged Chinese males were interviewed concerning the problems facing them. Their ages ranged from 41 to 55; the average age was 51. Eight worked in the catering industries and two worked in the commercial field. Five of them were born in mainland China and five in Hong Kong. Seven of them had lived in Hong Kong more than seven years and had come to the UK in the 1960s.

Eight were married with children and three of them lived with their parents. All respondents identified themselves as breadwinners and felt that the financial responsibilities on their shoulders were heavy. While many did not do any household work, they shared the responsibility for looking after children. Moreover, they identified themselves as the key person for handling serious family crisis. A respondent said: "Men can't afford to lose jobs. Even if we don't need to eat, our family do". Another said:

"When problems come to our family, no matter how serious they are, I have to face them. If I don't sort them out, who does?"

Problems

Compared to younger and older generations, middle-aged Chinese people are far more heterogeneous. There are great variations in their command of the English language, their educational standards and the extent to which they mix with mainstream society. However, despite this heterogeneity, most respondents faced common problems.

The first problem they face is two types of generation gap. Middle-aged Chinese men need to handle the relationship not only with their parents but also with their children – these relationships are complicated by the different degree of exposure of different generations to Western and Chinese culture and values. These different values make it difficult to reach a consensus on how issues are settled in daily life.

"I always worry that my children don't tell me their problems. However, if they do, I am not sure if I could understand."

"I am always blamed by family members for using double-standards in handling the issues with my children and my parents. Only when they are in my situation will they know why."

For most of the respondents, it was not easy to practise the family values in which they believed. They wanted to maintain the Chinese tradition of looking after the senior members of the family but found it difficult to bear the responsibility. Moreover, they were pessimistic that their children would not look after them when they grew old.

The second problem was related to occupational illness. Six interviewees had experienced minor accidents in their working places. But few had clear knowledge about their rights as citizen and workers, and they found it difficult to use the medical services.

The third problem was uncertainty over their future. Four respondents were the owners of Chinese take-aways and had constant anxiety about the uncertainty of their business and they felt isolated in handling their financial problems. Few had thought about their life after retirement, much less formulated any concrete plan. They worried that they might face the same problems experienced by the older generations.

Services available to middle-aged men

There were few services specifically targeted at Chinese middle-aged men. They seem to be socially non-existent and this, to a certain extent, explains why the middle-aged group provides an important source of customers to casinos. It is not certain whether or not they are inveterate gamblers. However, they clearly do not have many places to go other than casinos in their leisure time. This is especially true for those who work unsocial hours. Six respondents are regulars in casinos, and besides gambling, they spent most of their leisure time watching television and staying with family members. None had joined any activities in social centres.

Summary

As with Chinese women, middle-aged Chinese men are not only limited in the care that they are able to provide for family members, but also face a number of personal difficulties in their daily life.

Social institutions for social networking

Introduction

As mentioned in Chapter 3, many Chinese older people found it difficult to attach to their families and use social and public services. However, this does not mean that they were unwilling to attach to both their own community and mainstream society. During the interview process, it was discovered that many Chinese older people tried to organise their social networks and gain information about social and public systems in public places such as McDonald's fast-food restaurants in London's China Town, casinos and churches. Examination of the attraction of these as places where Chinese people go to organise activities together will throw insights into the development of methods for disseminating information about social services and improving the attractiveness of social and community centres to Chinese older people. This will also help us to think about effective methods for enabling Chinese older people to take an active role in coping with the difficulties of attaching to their own community and the mainstream community.

McDonald's restaurants in London's China Town

A number of older Chinese people regularly spend the whole morning or afternoon in McDonald's restaurants. They stay there to meet friends, gain new information about social services, comment on services they have used, share life experience and, very often, simply hang around repeating the same stories.

Instead of all sitting together, they separate themselves into small groups, and move from one table to another occasionally. They seem to have

known each other for quite a long time. They call each other by nicknames instead of being formal. Many come to the restaurants before or after joining activities run by churches, casinos and social centres; some prefer to stay only in McDonald's and never join other activities. The reasons for the popularity of McDonald's fast food restaurants in London's China Town among Chinese older people are discussed below.

Entry and exit patterns

McDonald's restaurants are characterised by voluntary entry and exit patterns. Chinese older people can enter and leave the McDonald's anytime they want without fulfilling any eligibility tests. Moreover, the cost of entering the service is low. Most only buy a cup of tea and then stay there as long as they want. Some even bring their own tea to refill.

The setting

The setting of McDonald's is favourable to the way Chinese people build their networks. Many like to talk in a group seated at a round table. In Hong Kong (where most residents are Chinese), almost all gardens and parks provide tables. Moreover, the seats are often arranged in a circular shape in order to allow people to see each other when talking in a group. By contrast, the long benches found in many parks in London do not fit their habits so well. This, together with the unpredictable nature of the English weather, explains why very few Chinese people choose to meet in parks. Moreover since McDonald's fast-food restaurants are often occupied by a large number of customers, they are noisy enough for Chinese older people to talk with a greater sense

of security. Even if they talk loudly, they will not be singled out or attract unwanted attention.

The rules

The rules of McDonald's are not hard to follow. Chinese older people do not find it difficult to order tea in English. It is interesting to find that some English cashiers can use simple Chinese to talk to them. Although their Chinese is too limited to enable them to have serious conversations with the Chinese customers, this friendly gesture is sufficient to make most Chinese customers feel welcome.

Past experiences

As mentioned in Chapter 2, Chinese people involved in the catering industry have developed, maybe by trial and error, a pattern to provide services for members of the mainstream society. This pattern emphasises efficiency, predictability and quantity. As providers of catering services, they are required to meet these criteria in order to survive. This experience enables them to adjust quite well as consumers in fast-food restaurants.

China Town

It is important to note that not all McDonald's fast-food restaurants attract as many Chinese people as do the two near to London's China Town, illustrating the importance of China Town in attracting Chinese people to meet to organise activities together. China Town in London is established, not only for meeting the social needs of Chinese people, but also, by its nature, as an international tourist attraction designed to provide entertainment. The major role of Chinese people in China Town is to provide catering services. In other words, they are expected to come to China Town to sell their labour as a commodity rather than to exercise rights as citizens. Hence there are inadequate amenities and community facilities in which the older Chinese people can spend their leisure time. Many retired Chinese people who attach their emotions to China Town find nowhere to stay except in casinos and McDonald's.

Casinos

Gambling is prevalent in the Chinese community. Many Chinese including older people spend a lot of time in casinos, and consequently gamble away a large proportion of their wages every month. It is important to note that they regard going to casinos as a part of their life, not necessarily because they are inveterate gamblers; the attractiveness of the casinos is also that they provide an environment in which they can organise their social networks.

Almost free entry and free exit

Most casinos operate on a membership system and, in theory, only members can use the services. However, they are allowed to bring guests. Admission is free and the application process usually only takes one day. This simple and free-of-charge application procedure means that casinos are open to almost everybody. Moreover, casinos do not require members to make any long-term commitment; Chinese people can stop using their services any time they like.

The setting and activities

To attract Chinese people to use the services, many casinos open from the afternoon to early morning. Some provide a free Chinese buffet at midnight every week. Moreover, free drinks are always available. These services guarantee that casinos are not only places for Chinese people to gamble but also somewhere for socialising after work. Many older people regard going to casinos as a part of their everyday lives. This is particularly important to those who run the family take-away business and want to have a break from their family in their leisure time.

The rules

The rules of gambling are simple to follow. Chinese people do not need to take a long time to learn and it can be done through observation. Although many Chinese customers are not fluent in English, they can communicate with staff members without much difficulty through sign language and some basic English.

Special services

Casinos also provide special services to increase the sense of belonging for Chinese customers. It is not uncommon for casinos to provide mahjong games. Moreover, some send birthday cards to customers to make them feel that they are valued as members.

Nature of services

The services provided by casinos are by nature commercial ones. In theory customers spend their leisure time gambling. However, the amount of money they gamble is unpredictable. It is, of course, possible to win; but, as many regulars would confirm, losing money seems to be inevitable in the long run. Moreover, the amount they lose on each occasion is also quite unpredictable. This is not only because the result is largely determined by luck but also because some people may not always make rational decisions and eventually gamble away much more money than they intended. However, this unpredictable dimension to gambling activities is seen as part of the excitement; and few make concrete strategies for minimising this uncertainty.

Churches

As discussed by Modood et al (1998), many Chinese people are Christians and go to church regularly. Churches, which serve as important places for Chinese people to meet to organise activities have the following characteristics.

Entry and exit

The church is free to enter and open to all. After people have attended the church regularly for a certain period they will be invited to apply as members. The exit is both free and voluntary.

Activities and rules

The main activities in Chinese churches include bible study, singing hymns, praying, offerings and sermons. Although not all older people understand completely the meanings and the origin of these activities, it is not too difficult for them to follow the rules involved. This prevents them from feeling left out. Moreover, church

members are enthusiastic about helping older people to take part in the activities.

Special services

Many Chinese churches celebrate Chinese festivals and arrange home visits to older people. This serves to strengthen the sense of belonging of older Chinese people to the churches.

Summary

This chapter has shown that some types of settings are particularly attractive to Chinese older people, and enable them to organise and strengthen their social networks. Their common characteristics include the absence of entry and exit requirements, rules that are easy to follow, giving older people recognition and a sense of belonging, operating at unsocial times of the day and using the Chinese language as their medium.

Promoting double inclusion in two communities

This chapter discusses some suggestions for improvements in services for Chinese older people. These suggestions are based on the discussion of focus groups and interviews with professionals. It begins by summarising the problems faced by Chinese older people and other members of the Chinese community discussed in other chapters.

Five barriers pointed out by the Home Affairs Committee Report

As mentioned in Chapter 2, the Home Affairs Committee Report in 1985 has pointed out five barriers which block Chinese people from participating fully in British life – lack of English, ignorance of rights, cultural differences, scattered settlement and long unsocial working hours. The previous chapters show that most of these barriers still exist to undermine the quality of life of Chinese people, 15 years after the release of the report.

English

As shown in the interview findings, the majority of older people had difficulty using English. This not only creates considerable inconvenience in their daily lives, but also hinders them in using social services effectively and understanding their rights. One way to solve these problems is to encourage older people to learn English. During the research process, interviewers in Glasgow met some older people who were enthusiastic about joining an English class in a social centre. This suggested that they could not learn as fast as young people and their progress was affected by the deterioration of their memory power. However, they found studying English highly

rewarding. To them, even only picking up a few simple English words was already a breakthrough in their lives. Their sense of belonging and their self-image were improved. More importantly, the experience of taking English lessons broke the myth that they could not learn.

However, to cope with language barriers, simply relying on the efforts of Chinese older people to learn English is not sufficient. Professionals also have a responsibility for learning how to communicate with them by studying their methods of using English and by learning some Chinese.

Sense of rights

As shown in Chapter 3, just over half of the respondents (54 out of 100) had no idea about their rights and the reasons why government provides social welfare for them. This includes the regular users of public and social services. A number of them still thought that their entitlement to a service and how much they would receive depended on the goodwill of the professionals. Some were worried that they would no longer be given services if their relationship with workers turned sour. It is therefore necessary to promote in older people a sense of rights with particular focus on the current development of government policies, their rights and the use of the different complaints channels.

Culture

The report stressed that the Chinese community is characterised by self-help virtues, thus Chinese people tend to help themselves and rely on their families rather than on public and social services. As shown in Chapter 3, many older people had

mixed feelings about families. On the one hand they thought that family care was the best type of care and hoped that their children would look after them. On the other hand, more and more older people realised that their children were either unwilling or unable to take care of them. Clearly there is a widening gap between older people's expectations and the actual caring capacity of their families. More social services should be provided to meet the needs of Chinese older people while encouraging them to place more expectations on social welfare.

Scattered settlement

The scattered settlement remains a serious problem. Chapter 2 shows that those Chinese people living in smaller towns, including older people, and those with lower mobility had less chance of using community facilities and social services.

Unsocial hours

As shown in Chapter 3, a number of older people did not receive sufficient support from their families because their family members needed to work long and unsocial hours in the Chinese catering industry.

Problems overlooked in the Home Affairs Committee Report

The previous chapters discovered that there are several issues overlooked by the Home Affairs Committee Report, including the following.

The middle-aged group

As shown in Chapter 4, the middle-aged group play an important role in providing care to older people, but they themselves also face a number of problems – the two levels of generation gap (gaps with their parents and gaps with their children), working unsocial hours, occupational hazards, little knowledge about their social rights and social knowledge, language barriers and uncertainty about their future.

Mental health

The report mentioned the difficulties of helping Chinese people with mental problems. However,

it did not give the necessary details of the solutions to the difficulties. Studies show that many Chinese people with mental problems do not receive sufficient attention (Au and Siew, 1997). Approaches to helping them are marked by serious defects. As shown in Chapter 2, one example is the 'dumping approach'. This approach is founded on the principle that Chinese people know their own problems better and are therefore in a better position to solve any problems in their community. This approach encourages Chinese people with mental illness to seek help from Chinese organisations, regardless of their aims and functions. This approach suffers from a number of defects – the over-estimation of the caring capacity of the Chinese community, giving excuses why professionals are not improving the methods of helping Chinese people, and over-emphasis on the homogeneity of Chinese people with mental illness.

Eight Chinese people who had recovered from mental problems were interviewed in Glasgow and London, six of them were older people. It was found that they faced extra difficulties in leading a life with dignity and security. They needed to re-establish their life, not only in the host society, but also in their own community, which had little understanding about mental illness. Moreover, they found it difficult to get back to work even after recovery and, as a result, were forced to take early retirement. It is important to note that work is seen as an important part of normal life in the Chinese community. Chinese people of working age are vulnerable to stigma if they are either unwilling or unable to work. People who are recovering from mental problems and who cannot find a place in the labour market not only have too much time on their hands but also have their self-image dented. Support for them from the family should not be taken for granted. Two respondents in this study were unmarried and lived alone and another had difficulty in getting along with family members. On the one hand, they needed to rely on their family members to look after them while, on the other hand, they complained that their family members exercised too much control over their lives. This 'close but uneasy' relationship put pressure not only on them but also on their families. Furthermore, most found it difficult to communicate with medical professionals or to understand the treatment they had received. This is due not only to language barriers but also to a lack of knowledge about the medical system.

Interpretation services

Since many Chinese people do not know sufficient English, the report stressed the importance of expanding interpretation services to help them to use social services. However, the interpretation services are an essential but insufficient means for Chinese people to cope with language barriers. Many Chinese churches and community centres provide free interpretation services to help older people to see GPs and to use other social services. However, there is no guarantee that the interpreters are able to help older people to express their ideas to the professionals or allow them to understand the views of the professionals. Moreover, it is also important for Chinese people to know how to work with interpreters, and for the interpreters to be accountable to them. However, the report did not make any suggestions on this issue.

Medical and health services

The Home Affairs Committee raised concern about the under-use of health and medical services. It made a number of suggestions on the improvement of the accessibility of health services to Chinese people. However, it did not examine in detail whether the conventional health and medical services were effective in helping Chinese people, or whether the costs were paid by Chinese people. Nor did it explore the possibility of helping Chinese people to maintain their health through their own methods – such as subsidising them to use traditional herbal medicine and services from Chinese medicine practitioners.

Continuing education for older people

The section of the report on education mainly focused on the needs of younger people. The needs of older people for lifelong education were neglected. There was also an absence of discussion about how to develop the potential of older people to contribute to their family and the community.

Suggestions from Chinese older people

Eighteen Chinese older people in London were invited to join three focus groups to discuss the preliminary findings of the semi-structured interviews shown in Chapter 3 and Appendix B, and made suggestions on the improvement of

their political, social and economic positions. Two focus groups were held in McDonald's fast food shops in London's China Town and one at a Christian fellowship in London's China Town. Their suggestions fall into five categories: to improve Chinese older people's participation in the service-providing and service-receiving process; to arouse concern regarding their needs and problems from their own community and the mainstream community; to improve their access to services; to help them to build a higher expectations of their lives in the UK and the caring services; and to provide opportunities for life-long learning.

To promote participation in the service-providing and service-receiving process

- Organise a national forum to promote the rights of Chinese older people and to voice their demands for caring services.
- Set up fact-finding and inspection teams of Chinese people to assess formal caring services for Chinese older people.
- Discuss with professionals how to improve communication and develop an effective and equal relationship in the care-giving and care-receiving process.
- Develop a training package from a users' perspective for training professionals to meet their needs.
- Provide more opportunities for them to take an active role in the interpretation process; for example, to help them understand the role played by interpreters and their limitations in the interpretation process.
- Teach them to use the complaint systems for formal caring services.

To arouse concern over their needs and problems from both the mainstream community and their own community

- Give them the right to choose their own diets in residential homes.
- Provide more 'walking wardens' to visit them.
- Help them solve their family problems such as generation gaps and the difficulties in communicating with the grandchildren, and to make their families aware of their needs and problems.

To strengthen the access to services

- Provide more social and community services in China Towns (such as in London and Manchester) where many of them spend their leisure time almost every day.
- Subsidise their purchase of Chinese herbal medicine and consultation with Chinese medicine practitioners.
- Provide more residential homes.
- Run courses to teach them to fill in application forms for social services.
- Open social centres at unsocial times.
- Expand interpretation services and sponsor their family members to receive interpretation training.
- Employ more bilingual workers in the formal caring services.
- Provide Chinese television programmes to promote caring services.
- Provide hot-line services for them to enquire about social services and to discuss their rights.

To build higher expectations

- Subsidise their travel to different cities and visits to different Chinese communities.

To promote lifelong learning

- Provide them with opportunities for learning English and other languages.
- Provide more skill training programmes to help them to find jobs.

Suggestions from professionals

As mentioned above, professionals were invited to make suggestions on the improvement of the older people's political, social and economic positions. Further details of the professionals are given in Appendix A.

To promote participation in the service-providing and service-receiving process

- Encourage Chinese older people to take part in voluntary work (for example, to ask them to teach cooking skills, Chinese culture and Chinese languages in community centres).

To arouse concern over their needs and problems from both the mainstream community and their own community

- Make the public aware of the importance of promoting mental health and the Chinese way of defining and expressing mental illness and mental health.
- Invite active users of caring services to act as exemplars to encourage more Chinese older people to use caring services to meet their needs.
- Encourage interpreters to develop common terms for interpreting the health concepts of Chinese older people.

To strengthen the access to services

- Provide more opportunities for all Chinese older people to join luncheon clubs.
- Set up information counters for promoting formal caring services in the Chinese people's meeting points such as casinos, McDonald's restaurants in London's China Towns and in churches.
- Establish 'sales' teams to take a pro-active approach to contacting Chinese older people individually to introduce formal caring services.
- Teach Chinese older people to use emergency services, such as alarm bells at home, before they face a crisis.
- Run more case conferences to share the experiences and skills for meeting the needs of Chinese older people with mental illness.
- Provide more outreach workers to identify and meet the needs of housebound older people.

To build higher expectations

- Help Chinese older people to have a more positive evaluation of their working life and higher expectations of their retirement.
- Provide opportunities for them to contact older people of other ethnic groups to enable them to understand their common needs and rights.

To promote lifelong learning

- Provide training courses for both Chinese older people and middle-aged groups to prepare for their retirement, and to understand the welfare rights of those who are retired.
- Invite Chinese older people to teach professionals about Chinese culture and their ways of defining and meeting needs.

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Appendix A: The research method

One hundred interviewees were invited to take part in the research process, 45 from London, 25 from Glasgow and 30 from cities in Yorkshire including Rotherham, Doncaster, Sheffield and Barnsley.

The Chinese community in London is quite different from the Chinese communities in Yorkshire and Glasgow. The former is marked by a high concentration of Chinese people in China Town, which provides not only a place for Chinese people to earn a living but also a meeting point for them to organise their informal networks. By contrast, Chinese people in Yorkshire and Glasgow are more scattered. They do not have China Towns to serve as their meeting points. Moreover, the owners of Chinese take-aways tend to isolate themselves from each other in order to avoid competition. Hence it is necessary to study all these three Chinese communities to increase the reliability of the study.

The number of older Chinese people referred by agents (volunteers, deacons, community workers and committee members of voluntary organisations) were as follows:

| | |
|----------------------|---|
| London: | 5 |
| Glasgow: | 4 |
| Cities in Yorkshire: | 6 |

The number of older Chinese people contacted and interviewed in the public places were as follows:

| | |
|----------------------|----|
| London: | 40 |
| Glasgow: | 21 |
| Cities in Yorkshire: | 24 |

The interviewers visited a number of public places to contact interviewees, including the following:

| | |
|----------------------|---|
| London: | Christian fellowship (1), McDonald's restaurants (2), casino (1) and parks (2) |
| Glasgow: | Social centre (1), council housing area (1), fast food restaurant (1), casino (1) and shopping centre (1) |
| Cities in Yorkshire: | Luncheon club (1), Church (1), fast food restaurant (1) and casinos (2) |

Eighteen Chinese older people in London were invited to join three focus groups to discuss the preliminary findings of the semi-structured interviews, and made suggestions on the improvement of their political, social and economic positions. Two focus groups were held in McDonald's fast food shops in London's China Town and one in a fellowship in London's China Town.

Twenty professionals were invited to make suggestions for the improvement of the older people's political, social and economic positions. They include community workers (3), workers in luncheon clubs (4), home-help workers (4), social-work students (2), committee members of Chinese organisations (4) and deacons in the Chinese churches (3).

Appendix B: Interview findings

One hundred Chinese older people were interviewed. The aim of the interviews was to examine the care needs of Chinese older people from their own perspective. The interviews were conducted in the interviewees' own languages, which were mainly Cantonese, Hakka and Mandarin. To provide more opportunities for interviewees to share their views to the caring services and their life in the UK, a semi-structured approach was used. Four core questions were asked in all interviews, including:

1. Can you share your experiences of using care services in the UK?
2. What are the criteria for good care services?
3. What are your suggestions for improving your social and economic position?
4. Do you feel happy about living in the UK?

Besides these four questions, a number of issues were discussed with interviewees, including their migration history, perception of health, financial plans, family, cultural identity, views on their homeland, the government and older people of other ethnic groups. Some interviewees took the initiative to discuss other issues such as the status of Chinese medicine, the uncertainty of their future, and the generation gaps and problems with their grandchildren.

This appendix presents the characteristics of respondents and the findings.

Characteristics of respondents

Thirty-nine respondents were male and 61 were female. The average age of interviewees was 71, the oldest was 84 and the youngest was 65. The place of origin of the majority (72) was Hong Kong. Twenty-seven came from Mainland China,

of whom eight had stayed in Hong Kong for more than five years before arriving in the UK, and one was born in Singapore. Fourteen interviewees arrived in the 1950s, 35 in the 1960s, 39 in the 1970s, 10 after 1980. Two interviewees had returned to Hong Kong but had come back recently.

Sixty-eight interviewees had worked in the UK, of whom 50 had worked full-time and 18 had been either part-time or temporary workers. Nine said that they had never been employed formally but had helped out in their family's take-aways from time to time, receiving no wage. The other 20 disclosed that their main purpose in coming to the UK was to take care of either their children or grandchildren or both.

Of the interviewees who had worked before, 60 had worked either in Chinese take-aways or restaurants. Four worked in Chinese shops and four did not disclose the details of their career history. None of them had worked in the catering industries before coming to the UK. Many who came from Hong Kong used to be farmers living in rural areas – the New Territories (35). The rest used to work in other occupations such as factory workers, bus drivers and construction workers.

Improvement of their material standard of living was the main reason for interviewees to come to the UK. This is especially true for those who arrived in the early 1960s. The second most important reason was family reunion. Eight interviewees who came from mainland China mentioned that they moved to the UK because they did not want to live under communist rule.

Fifty-seven interviewees spoke Hakka as their mother-tongue, the rest of them spoke Mandarin, Hokkan, Tai-Shang or Cantonese. Eighty-one

interviewees could speak or understand Cantonese without difficulty. Over 30 interviewees started learning Cantonese after coming to the UK because of the need to look for jobs and make contact with other Chinese people. Six could understand English. Only three could speak fluent English. The rest of them had difficulties in using English in daily life. Eight interviewees had joined English classes but did not find it very useful in improving their language skills. At the time of the interviews, three respondents were studying English at a social centre.

Self-perception of health

When asked to comment on their state of health, almost 40 say that their health was good or very good; 22 said their health was poor. The rest of them thought that their health was fair. It is important to note that over half of the respondents (55) described their mood as a little sad or very sad most of the time. Over one third thought that their future was full of uncertainty.

Dependency on other people in daily life

The majority of interviewees could take part in most of the activities of daily living without the help of other people, such as bathing (94), washing hair (94), dressing (94), getting in and out of bed (96), preparing meals (88) and shopping (82). However, many had difficulties in using the public and social services, managing repair work on their houses (42) and travelling on public transport (52).

Sense of financial security

Thirty-eight respondents lived on benefits; 33 were receiving pensions, 13 relied on financial supports from their children and the rest refused to talk about their financial situations. The majority (68) said that the amount of money they received was sufficient to maintain a living. Thirteen respondents said that their financial situation was much better than those older people living in Hong Kong. However, 14 complained that they had too little money to support a decent standard of living. It is important to note that over 15 interviewees (including both relying on

benefits and pensions) worried that they might be prohibited from receiving money in the future. Twenty-five mentioned that they had not realised the importance of the pension scheme before they retired.

Family as a supportive and caring system

A majority of interviewees (71) thought that the family was the best institution for providing care because carers in the family know their dependants well and give them emotional support.

Moreover, they had a strong emotional attachment to their family and children. When asked what they wanted their children to do and to have, they gave the following answers: to have a happy life (52); to respect and support their parents (43); to achieve some success in their careers (21); to have a happy family (31); to be good parents (48); to get away from the catering business (8); to be healthy (39); to see them occasionally (41); to reach a good level of academic achievement (5) and to continue their take-away businesses (7).

Furthermore, some of those who lived with their children took an active part in family activities, such as doing the household chores and taking care of children: taking part in the family catering business (6); looking after grandchildren (7); carrying out household chores (10); preparing meals (4); and carrying out maintenance on the house (3).

The actual performance of families in providing care for the respondents

Sixty-five did not have high expectations of their family members taking care of them for four reasons: poor relationship with the family members, depreciation of Chinese traditional values, pressure faced by their children and low self-image.

First, many interviewees lived alone (39): 15 were never married; 11 were either widows or widowers with no children. Thirteen were separated from their spouses and children due to a number of reasons – marriage problems, health problems and financial problems. Twenty-two lived with their spouses but not with their

children. Nine have not seen their children over the past two years, of whom six did not know either the address or the phone number or both of their children. Seven saw their children occasionally, mainly at times of festivals, their birthdays and when they had problems. The rest (39) lived with or very close to their children.

However, living together was not a guarantee of good relations. The common factors undermining their relationship with children included the following: the children worked long hours and had no time to talk to them (16); they did not know whether they were hosts or guests in the families (12) and this put them in an embarrassing situation in the family decision-making process and in the events which required sharing financial resources; they were worried that they would become a burden to their families (8); and they did not understand English and could not communicate with their grandchildren (7).

Second, 22 were not quite sure whether Chinese traditional values could still be applied in the Chinese community in the UK, as the younger generations were influenced more by western culture. Some respondents often used the incidents of abuse of older people in Hong Kong to justify that their situations were not as bad as they might have been.

Third, 29 interviewees thought that their children faced a lot of pressure in their daily lives, such as competition in the catering industry, the need to look after their own children and difficulties using mainstream services. They therefore did not think that their children had sufficient time or resources to meet their needs.

Finally, 25 interviewees thought that they were no longer useful or valuable in the family now that they had lost the ability to contribute to the take-away businesses or to look after their grandchildren.

Experience of formal caring and social services in Britain

The social and public services used by interviewees included the following: income support (37); disabled allowances (12); home-help services (7); visiting wardens/support workers (4); sheltered housing (8); luncheon clubs (41);

Chinese community centres (22); council housing (20) and mental hospitals (6).

Many respondents used more than one kind of service. For example, 15 members who went to luncheon clubs regularly were also the members of local Chinese community centres. Twelve who lived in council housing were also on income support. Eight did not use any services.

Views on social and other public services

Social and public services are important means for older people to meet their needs and to achieve a higher quality of life. Only three interviewees thought that it is easy to use public and social services. Ninety-seven respondents found it difficult to use the services. The difficulties are explained below.

Language barriers

The majority suffered from language barriers when using social and public services (78). These not only arose from their difficulties in speaking English but also from their difficulties in understanding the terms and jargons of the public and social service system. Of the 22 who did not point out the language barriers, 11 did not use any social services and 5 thought that the interpreters had helped them a lot in understanding the requirements and benefits provided by the social and public services. However, at the same time, 19 did not understand what the interpreters were trying to interpret for them in the process of using the services.

Information about social and public services

Seventy-three respondents did not have clear ideas about the types of social services available to them. Many said that they did not know why they were given the services that they were using (61). Fifty-four said that they were not sure whether they had the right to use them. An equally large number of respondents had experienced difficulties in gaining information about social services (72).

Twenty-two respondents said that they had not received any formal education and blamed this for their lack of ability to understand the welfare system or express their needs clearly, even when speaking Chinese to Chinese workers.

The costs of using social and public services

Almost one third of respondents (31) feared that they might be required to leave home when using such services as older people's residential homes and hospitals. In the words of two respondents:

"I am afraid of being sent to older people's home because I didn't know how to speak and understand English. I would be seen as an idiot and soon become an idiot."

"If I live in an older people's home, I will not be given the choice to eat the food I need. My health will then deteriorate fast and I will die soon."

Twenty-two respondents said that they did not want to rely on other people (non-family) such as social workers, friends and interpreters to help them. Twelve respondents complained that workers did not treat them well. A respondent said: "I don't want to tolerate their (workers') unfriendly attitude. It doesn't matter whether I use more or less services. Dignity is the most important thing to me."

The criteria for good practices in caring services

Corresponding to their views on social and public services, they have listed a number of criteria for good practice: the services should be set up in a way that causes no embarrassment in using the services; the carers should really understand what is being said; the services should not create too much work for family members, friends and community; the services should be able to solve crises effectively; there should be no need to fill out forms; there should be a specific service to understand needs and problems; there should be absence of discrimination against those not on benefits; and there should be provision for members of the community to live within their own community.

Their views of their current life in the UK

The respondents' views of their current life in the UK are far from homogeneous. They can be categorised into four types.

Respondents who did not want to talk

Ten respondents said that they had no interest in evaluating their life in the UK for the reasons similar to the view shared by Mr G:

"I have spent half of my life in the UK. It is no use talking about it now. Even though I don't enjoy living here, I can't leave. If I could turn the clock back, I would think about living in other places. But since this is not possible, it is better not to think about making any changes. The more I think about it, the more I will feel unhappy about my life. Nobody likes, I think, to spend their whole working life in a kitchen if they have choices. I am old now, I have to accept life as it is. I don't want to be an annoying old man obsessed with making complaints."

Positive views

About one third (30) thought that their life in the UK was better than their place of birth (Hong Kong and China). The advantages of living in the UK include having better quality of air, living in lower density areas, enjoying a greater chance of earning a living and knowing more about the world.

Moreover, a lot of respondents thought that at the time when they left Hong Kong, they had no choice at all. A respondent said: "Because I needed to survive (economically), I needed to look for jobs outside Hong Kong." Since they thought they started from nothing in the UK, they saw anything they have gained as a bonus.

Negative views

However, 35 respondents had negative views on their life in the UK. These include:

- Life in the UK is boring and the daytime is too long (25).
- Living in the UK means speaking a second-class language and being given only second-class citizen status (30).
- Some respondents mentioned that they were now waiting for three things: "waiting to eat, waiting to sleep and waiting to die" (22).
- Some described themselves as "half deaf and half blind" because of language barriers (21).

Conditional views

The rest of the respondents said that whether their life in the UK was good or not depends on certain conditions. These views could be represented by the following quotes:

“As long as I could sleep well, eat well and are able to walk, I feel that life in the UK is good.”

“If my family is healthy and happy, I will be healthy and happy.”

“There is nothing good or bad. As long as people give me more consideration, I will feel better.”

“Life is good in the UK and even better if I could win money in casinos.”

Although some did not like their current life in the UK none had concrete plans for going back to their place of origin for five reasons: they could not afford to buy a flat in Hong Kong; many of their friends had either died or lost touch with them; the difficulty of finding new friends; travelling is too tiring and expensive; and the political status of Hong Kong has changed after 1997.

Interviewees' life goals

To further understand the respondents' attitude to an ideal life and their views on their current lives, respondents were asked about their goals. However, one third of respondents were unwilling to discuss their goals because they thought it was no use talking about them. Those who did gave the following views: to have a sense of peace (25); to have a stable family (21); to have children who fulfil their own expectations (25); and to have a life free from crises (23).

Comparison

No interviewees compared themselves with older people of other ethnic groups. Sixteen interviewees compared the services they were using with those provided for older people in Hong Kong. Ten in Yorkshire and Glasgow complained that they received less services than Chinese people in London and Manchester. As

mentioned before, quite a number of older people felt that living in the UK was good because it was much better than living in Hong Kong.

Their impression of how they are viewed by others

Respondents were asked to describe how they were seen by others. Their answers showed that the self-image of many of them was low. Over half of them (65) thought that they were seen as 'useless' and 'burdens' because they no longer made any contribution to society and their family. As mentioned above, 12 thought that they were regarded as second-class citizens as they could not speak English and understood very little about the social systems. Only a few (7) thought that they were treated as citizens and enjoyed the same rights as members of the mainstream society.