

CHINESE ETHNICITY AND BACKGROUND

Languages spoken and primary place of origin

Mandarin	Cantonese	Hokkein	Hakka	Teo-chieu
PRC, Taiwan, Malaysia, Singapore	Hong Kong, PRC (Guandong), Vietnam, Malaysia, Singapore and Christmas Island	Malaysia, Singapore	Malaysia, Indonesia and Brunei	Thailand

Communication

- Social roles may influence interactions, because of the potential for 'loss of face'. Loss of face brings shame to the whole family.
- Chinese people may not talk about their problems, especially psychosocial ones, because they may assume that westerners will not understand their culture or experiences.

Avoiding eye contact, shyness and passivity are cultural norms for many Chinese people.

- Many people will avoid saying no because they consider it impolite.
- Open discussion about sexuality is often considered a taboo.

- A doctor of the same sex is preferred by most Chinese, especially women.

Health related beliefs and practices

- Health beliefs and profiles of the descendants of Chinese migrants who arrived a number of generations ago are often similar to those of Anglo-Celtic Australians.
- Food, illness and medications are usually classified as 'hot' or 'cold' according to the perceived effects on the body. Health is believed to be a balance of positive (yang) and negative (yin) energy in the body. Chi refers to the life force or energy in the body.
- Some Chinese may attribute illness to:
 - disharmony of body elements (eg. an excess of hot or cold foods)
 - moral retribution by ancestors or deities for misdeeds or negligence
 - cosmic disharmony, as may occur if a person's combination of year of birth, month of birth, day of birth and time of birth (the Eight characters) clash with those of someone in their family
 - interference from evil forces such as malevolent ghosts and spirits, or impersonal evil forces
 - poor Feng Shui, (ie. the impact of the natural and built environment on the fortune and wellbeing of inhabitants).
- Many people will use traditional Chinese medical treatments including acupuncture, acupressure and Chinese herbs. Dietary therapy and supernatural healing (eg. through a fortune teller, Feng Shui practitioner or temple medium) may also be used. Modern versions of traditional medicines are available through Chinese grocery stores in all major Australian cities.

Population in Australia: 206,588 people

Population in Queensland: 15,060 people

Population in Brisbane: 11,420 people

Gender ratio: 82.3 males per 100 females

Median age: 46.4 years

Age	%
0-14	3.5
15-24	22.9
25-44	37.2
45-64	24.5
≥ 65	12.3

The term Chinese includes diverse communities and individuals, sometimes having no more in common than ancestral heritage.

The main ethnicities of people born in China are Chinese and Russian.

Up to 65% of people speaking a language other than English at home are proficient in English.

Common religious affiliations include Buddhism, Christianity and Islam. Although, many people have no religious affiliation.

Places of transition:
Brunei, Christmas
Island (Australia), Hong
Kong, Indonesia,
Malaysia, New
Zealand, Singapore,
Taiwan, Thailand, and
Vietnam.

Chinese settlement has
taken place in Australia
from the mid-19th
century, with most
people coming from
southeast China
(Guandong). Many
Chinese in Australia
are descendants of
people who migrated
here more than one
hundred years ago.
Over the past 20 years,
Chinese people have
arrived from Malaysia,
Singapore, Hong Kong,
Vietnam and elsewhere
in Indochina. More
recently, immigrants
have arrived from
Taiwan and the
People's Republic of
China.

Pregnancy

- Many Chinese people, when they are ill or pregnant, assume a 'sick role' in which they depend heavily on others for assistance. This means that some health care providers may be seen as uncaring because they encourage independence rather than catering directly to the wishes of the patient.
- Pregnancy and especially childbirth are believed to disturb the balance of hot and cold required for good health. Because of this, various dietary and behavioural practices are customary to keep the mother and baby physically healthy including:
 - eating special soups and chicken/chicken broth
 - not eating lamb because of the belief that it may cause the baby to have epilepsy (pronunciation of word lamb is similar to the word for epilepsy in some Chinese languages)
 - not eating pineapple because it is believed to cause miscarriage.

Birth

- Many Chinese people believe that a woman should not cry out or scream during labour.
- Women may experience distress if not given a choice between cultural traditions and western practices.
- Women may prefer sitting or squatting to give birth.
- Ideally, the labouring woman's mother or mother-in-law attends childbirth, rather than the father of the child. This practice varies among communities.

After birth

- Some women may observe a period of confinement after birth, during which they rest, dress warmly, limit showers, and eat only foods classed as hot. These ideas conflict with Australian medical ideas which recommend early ambulation and showering after birth. Staff may need to discuss the option of exercises to avoid deep vein thrombosis while in bed (eg. bending knees, moving legs).
- According to some customs in Guandong and Hong Kong, postpartum women may not eat with other family members for up to one month due to the notion of pollution linked to lochial discharge. For the same reason, postpartum women may abstain from sexual relations.

Infant care

- Women are often expected to follow certain traditional practices advocated by older female relatives. However, practical constraints mean that many Chinese women opt for an approach to child-rearing which combines practices from both Australian and Chinese culture.
- Infants may be over-wrapped and slept in prone position.
- Many Chinese people believe that infants should not be dressed in used clothing as the baby may take on the characteristics of those that wore the clothes previously. Therefore, the family may bring new clothing for the baby instead of dressing the baby in hospital clothing. Disposable shirts may be acceptable.

- Infants may be separated from their mother for at least the first 24 hours. This tradition is practiced to allow the postpartum woman to rest. The Australian practice of leaving infants with their mother should be discussed with women of Chinese background. The woman should be informed that the required infant care could be provided by health professionals if she wishes to rest.
- Some women believe that if a newborn child is praised, bad spirits will take the infant away or the child will fall ill.
- Grandmothers, particularly the father's mother, are often very involved with the new infant and the new mother's recovery. Their authoritative positions should be acknowledged when caring for the mother and during teaching sessions.
- The 'Mongolian blue spot' – a bluish pigmentation in the lumbo-sacral region – is common at birth among Indo-Chinese and other Asian babies, and persists until the age of 18 months or two years.

Infant feeding

- Colostrum may be considered stale or dirty and discarded. Staff may need to explain the benefits of colostrum feeding and encourage women to feed their infant.
- Babies may be fed with boiled rice water or formula instead of colostrum during the first two days.
- In 2006, of the 282 Chinese-born women who gave birth in Queensland Health facilities, at the time of discharge, 68% (193) exclusively breastfed, 24% (67) breastfed and formula fed, and 8% (22) exclusively formula fed.

References

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