Supporting Chinese Immigrant Families with Children in the Greater Boston Area During and After the COVID-19 Pandemic (August 2020)

The COVID-19 pandemic has significantly impacted Chinese immigrant families in the Greater Boston area. Families are experiencing increasing challenges to their well-being, loss related to the pandemic, and significant rises in xenophobia.

The aims of this brief are to:

1. Understand some of the local cultural context of Chinese immigrant families in Massachusetts and share insights for servicing this population.
2. Identify caregivers’ needs and contexts before the pandemic and how these needs may be exacerbated by the pandemic.
3. Provide recommendations and resources to address families’ needs.

Please note that the characteristics and needs among Chinese immigrant families greatly varies and the intersection of other identities (e.g., class, sexuality, gender) within Chinese individuals further increases the range in variation. Some of the considerations and needs may similar to other cultural groups and should not only be attributed to Chinese culture. It is important to consider the contexts in which families reside when assessing needs. Many of the needs are result of systemic racism which can manifest as policies and laws limiting the opportunities and available resources (e.g., affordable housing, health care, employment) for immigrant families. Understanding how systemic racism operates against Chinese immigrant families and being aware of individual biases are essential when supporting Chinese immigrant families.

Local Cultural Context of Chinese Immigrant Families

This section discusses overall considerations when working with Chinese immigrant families.

Chinese Immigrant Family Considerations

- **Cities/Towns with the largest population of Chinese families:** Boston, Quincy, Malden, Cambridge, Newton, Brookline, Lexington, Somerville, Acton, and Waltham.

- **Region of origin:** Families may come from cities and regions all over China (e.g., Fujian and Guangdong provinces). Those from Hong Kong may see themselves as part of China or from a separate entity. Chinese families Taiwan may consider their culture separate from China or part of Chinese culture.

- **Household composition:** The household composition of Chinese families may contain multiple generations. For financial or childcare reasons, some families may send children to live with grandparents in Asia. Other families may be adjusting to the return of their children after a long separation. To provide

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1 Based on findings from the Children and Families Across Cultures Coping with Trauma (CFACCT) study “Cultural and Contextual Influences on Parenting among Low-Income Chinese Immigrant Caregivers Living in the Greater Boston Area”
2 Institute for Asian American Studies at the University of Massachusetts Boston, n.d.
3 Eschbacher, 2003
5 Ng, 2019
child support, grandparents may live permanently with or near caregivers, or split time between Massachusetts and China.6

- **Languages spoken:** Many dialects are spoken in China. Families in the Greater Boston area likely speak Cantonese, Mandarin, or both.7 They may also speak a regional dialect (e.g., Taishanese). English proficiency may vary from little to fluent. Also, proficiency may depend on the format in which English is being communicated (e.g., spoken, written) and context (e.g., work, public spaces).

- **Education:** Among caregivers, formal education achievement may range from less than middle school to a graduate school degree. Their level of education may impact employment, and service access.

### Cultural Values and Practices

Like any cultural group, there is considerable variation among Chinese immigrant families. The following values and practices may not be shared by all families or all family members within a family.

- **Family-centered:** Interdependence is highly valued between family members. However, conflict between individualistic and interdependence philosophies can occur within families, especially between adolescents and parents.8

- **deference to elders:** Elders are greatly respected in Chinese communities.9 Caregivers tend to defer to elders, but intergenerational conflict may exist around parenting.

- **Philosophy of teaching/modeling:** Caregivers’ parenting may focus on teaching children right from wrong, and modeling behaviors (e.g., discipline, self-regulation) for their children.10

### Establishing Communication and Providing Services to Families

- **Communication norms:** WeChat, an app with a combined functionality of WhatsApp, Facebook, and Twitter, is the preferred communication method for many Chinese immigrants. It is used in place of email and texting. WeChat groups and official accounts can be an effective way to share resources, hear immediate client needs, and host support groups. Some caregivers may not answer phone calls from unknown numbers and/or have voicemail set up.

### Service Challenges

- **Awareness/information dissemination:** Caregivers understand services are available but may have difficulty obtaining information about the services and accessing them. Resource information is often not available in Chinese, whether written or via interpreters, and technological barriers may prevent access to information online.

- **Reluctance to engage based on immigration status:** Due to immigration policies —like the updated Public Charge ruling and temporary ban on New Green Card applications (and unclear rules about benefit eligibility) — Chinese immigrant families, whether documented or not, may hesitate to use additional welfare benefits.

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6 Xie & Xia, 2011
7 Sacchetti, 2009
8 Juang et al., 2016
9 Bedford & Kuang-Hu, 2019
10 Chao, 1994
Needs and Recommendations

In our 2019 study, Chinese caregivers identified areas of need. As stated earlier, not all families will have these needs and the extent of the need will differ by family. In the table below, we discuss the needs caregivers identified before the pandemic, how those needs might have been exacerbated during the pandemic, and offer general and specific recommendations. A list of resources is available on the BU CFACCT website.

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<tr>
<th>Identified Need</th>
<th>Pre-Pandemic Needs and/or Context</th>
<th>Needs Exacerbated by Pandemic</th>
<th>Recommendations</th>
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<tr>
<td>Affordable Housing</td>
<td>• Limited affordable rental properties and housing properties for sale¹²</td>
<td>• Once eviction moratoriums expire, may owe several months’ rent or mortgage¹⁴</td>
<td>• Connect families at risk of being evicted or having their home foreclosed to legal assistance, via phone or videoconferencing</td>
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<td>Child Care</td>
<td>• Quality and safety concerns about affordable rental properties</td>
<td>• May be at risk for eviction or foreclosure</td>
<td>• Advocate for rent and mortgage forgiveness at the local and state levels</td>
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<td>• Existing affordable housing units threatened by gentrification¹³</td>
<td>• If evicted or house is foreclosed, at risk for homelessness</td>
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<td>• Chinese caregivers traveled from all over the state to Boston for child care</td>
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<td>Children and Adolescents Support</td>
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<td>Education (Adult)</td>
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<td>Education (Child)</td>
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<td>Intimate Partner Violence (IPV)</td>
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<td>Food Insecurity</td>
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<td>Parenting Support</td>
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<td>Xenophobia</td>
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¹¹ In the CFACCT study “Cultural and Contextual Influences on Parenting among Low-Income Chinese Immigrant Caregivers Living in the Greater Boston Area”, we conducted four focus groups in Quincy, MA and Boston Chinatown for twenty-four parents and grandparents

¹² The Changing Faces of Greater Boston, 2019, p.13

¹³ The Changing Faces of Greater Boston, 2019, p.9

¹⁴ The National Law Review, 2020

¹⁶ Massachusetts Emergency COVID-19 Child Care

¹⁷ McNerney & Jung, 2020
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| Children and Adolescents Support| • Needed more extra-curricular programming, physical activities, and safe public play spaces  
• Need for book/toys donations  | • Difficulty understanding the pandemic and concerns about their safety and loved ones  
• Dealing with loss of loved ones  
• Worry/fear about families’ financial struggles and/also for caregivers who are essential workers  
• Coping with “a new world”  
• Significant increase in family academic pressure on children  
• Limited access to public spaces and extracurricular activities  
• Peer support is predominantly virtual | • Provide virtual spaces for children and adolescents to discuss the pandemic and xenophobia. Provide opportunities for them to express themselves and/or advocate for those in need  
• Co-create rituals with children and adolescents that acknowledge their loss  
• Talk with children and caregivers about the impact of pandemic on children’s functioning and brainstorm academic expectations |
| Education (Adult)               | • Limited available English classes and career programs | • Need to be proficient in English to obtain another job  
• Higher education may no longer be affordable  
• Graduating college students at risk of being expelled from the U.S. | • Some English classes are being provided online (see resources)  
• Advocate for caregivers on student visas to stay in the U.S. for employment. Keep caregivers updated on changes in the policy and progress |
| Education (Child)               | • More slots needed in quality schools  
• Aware of educational inequities | • Significant increase in concerns about children’s academic progress  
• Limited English proficiency and | • Connect families to academic assistance (e.g., tutors, college students) |

15 Bahrampour & Schmidt, 2020  
18 Redden, 2020
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| Intimate Partner Violence (IPV)             | • Presence of IPV in the home  
• Difficult for IPV victims to leave their partner because of financial considerations, immigration status, and/or limited domestic shelter availability (or a combination of these) | • Rise in IPV across the U.S.\(^1\)  
• Significant increase in children exposed to IPV  
• Difficult to learn about IPV resources in the constant presence of partner  
• Increased difficulties and risks associated with leaving a partner | • As establishments begin to re-open, support services for victims of IPV need to prepare for increase in need  
• Find creative ways to safely re-connect with IPV victims |
| Financial Struggles                         | • High cost of living creates difficulty meeting basic needs  
• May have experienced financial instability because they are living on a single income or income is from part-time and gig jobs  
• May not qualify for assistance despite struggling financially  
• Language barriers may have limited job opportunities | • Loss of income and lack of job opportunities due to employment reduction  
• Limited job opportunities due to xenophobia  
• Need to apply for unemployment or additional food programs; many forms are not available in Chinese  
• Reluctance to use government program because of lack of eligibility guidance or concern about green card or visa status | • Inform families about government service eligibility and include information about how their green card or visa may or may not be affected by service utilization  
• Bilingual staff should assist families applying for unemployment benefits |
| Food Insecurity                             | • Some used WIC and food stamps; however, due to fear of the change to the Public Charge rule, there has been a recent decrease in families accessing these services\(^2\) | • Potential reluctance to pick up food from schools and other organizations due to fear of the virus or xenophobia  
• Increased need for food assistance  
• May not be aware of food pantries | • Arrange for food to be delivered to families’ homes  
• Assist eligible families to apply for food stamps  
• Solicit monetary and/or food |

\(^1\) Psychology Today, 2020  
\(^2\) Snow, 2020
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| **Mental Health**   | ● Caregivers may have felt overwhelmed by parenting, financial difficulties, caring for elders, and/or other stressors  
                    ● May have expressed need for mental health support for their children  
                    ● Stigma may have prevented caregivers from mentioning mental health needs and/or seeking support  
                    ● Access to bilingual and bicultural mental health therapists is limited | ● Prior stress and mental health issues exacerbated by pandemic  
                    ● Increase in exhaustion and stress  
                    ● Difficulties accessing telehealth  
                    ● The nature of this pandemic is traumatic for all and families may experience trauma-related symptoms  
                    ● Need to cope with loss and grief from pandemic without usual rituals and community because of social distancing | ● Asking caregivers about ‘stress’ or ‘pressure’ may resonate more with caregivers than ‘mental health’  
                    ● Share information on how stress and worry can manifest (e.g., fatigue, anger, physical symptoms) and stress reduction activities  
                    ● Provide virtual mental health workshops and resources through WeChat  
                    ● Create online forums for families to share and discuss stress and coping strategies                                                                 |
| **Parenting Support** | ● Wanted assistance in parenting biculturally, providing supportive parenting, and promoting good child mental health  
                        ● Grandparents, either by traveling to the U.S. or having children sent to them in China, provided parenting support; parents may travel to and from China to support them | ● Caregivers may be overwhelmed handling the pandemic, xenophobia, and/or increased presence of children in the home  
                    ● Increased child maltreatment risk in stressed families, including Chinese families  
                    ● Travel restrictions prevent grandparents from providing support | ● Normalize stressful parenting experiences and related reactions  
                    ● Provide virtual support spaces for caregivers  
                    ● Ask families about child care concerns  
                    ● Check in frequently on stressed families via phone or online                                                                 |

21 Nanos, 2020  
22 Donnelly & Haddadin, 2020
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<td>Physical Health</td>
<td>● Limited home visiting programs in certain communities&lt;sup&gt;23&lt;/sup&gt;</td>
<td>● Pregnancy-related concerns about virus exposure&lt;sup&gt;24&lt;/sup&gt;</td>
<td>● Provide COVID-19 fact sheets in Chinese (see resources)</td>
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<td>● Some caregivers (e.g., spouses, children) stressed by care of elders at home or in a nursing facility</td>
<td>● Inability to quarantine due to crowded or small residences</td>
<td>● Provide step-by-step guides to setting up telehealth appointments in Chinese</td>
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<td>● Some may have been very stressed or overwhelmed by parenting which, in a few cases, led to child maltreatment</td>
<td>● Increased risk of getting virus in multigenerational homes</td>
<td>● Encourage caregivers to communicate with their providers via phone or email. Provide bilingual staff to assist if needed</td>
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<td>● Some may become involved in child welfare system because of unfamiliarity with Western parenting norms</td>
<td>● Family members may be essential workers, increasing exposure risk</td>
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<td>● First-time parents need additional support due to social distancing</td>
<td>● Children not getting vaccinations&lt;sup&gt;25&lt;/sup&gt;</td>
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<td>● Lack of healthcare access for current health conditions</td>
<td>● Differing access to telehealth and COVID-19 testing&lt;sup&gt;14&lt;/sup&gt;</td>
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<td>● Fear of getting medical assistance&lt;sup&gt;26&lt;/sup&gt;</td>
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<td>● Help seniors in nursing homes to connect to families and friends using WeChat or phone</td>
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<td>Senior Support</td>
<td>● Loneliness and social isolation&lt;sup&gt;27&lt;/sup&gt;</td>
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<td>● Fear as country reopens</td>
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<td>Seniors</td>
<td>Seniors may have other health issues (e.g., dementia, limited mobility) Seniors may need assistance to access services because they may not speak English or only speak regional dialect</td>
<td>Seniors may have lost their daily activities (e.g., senior day care) and social interactions No visitors and food deliveries in nursing homes create lonely seniors Increased worry/stress about seniors, especially those in nursing homes Disruptions in medication maintenance (e.g., prescribed medications, Chinese herbal medication) due to staying home Difficulty navigating technology that would keep them connected Increase risk of elder abuse</td>
<td>Provide support to seniors around social isolation and fear Have medication delivered to seniors’ homes Provide seniors with technical assistance when needed</td>
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<td>Xenophobia</td>
<td>May have experienced or heard about discrimination (e.g., bullying in schools, racial slurs in public spaces) Adolescents and caregivers may have had differing perspectives and responses to discrimination</td>
<td>Increased anti-Asian crimes, harassment, and xenophobia Risk for discrimination in the classroom Exposure to xenophobic experiences in the community Increased challenge and stress for caregivers to discuss racism with children</td>
<td>Provide virtual spaces to support caregivers as they cope and help their children cope Connect families to resources on talking about race and racism Engage in advocacy and have community discussion on fighting racism and xenophobia Connect to bystander trainings Provide and refer for mental health support</td>
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28 Anti-Defamation League, 2020 29 Cohen, 2020 30 NPE, 2020