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Moving from China to Canada: Occupational Transitions of Immigrant Mothers of Children with Special Needs

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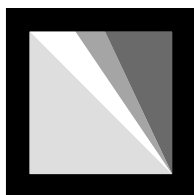
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Introduction: Chinese immigrants to Canada bring a set of values and beliefs that influence the way they experience the world. Some are mothers with children with special needs. These women face the difficult process of transitioning into a new culture and society along with caring for a child with special needs. **Objectives:** To gain an in-depth understanding of the experiences and occupations of Chinese mothers of children with special needs who have immigrated to Canada. **Methods:** This descriptive phenomenological study used semi-structured interviews as the principal means of collecting data from three immigrant mothers with children with special needs who were born in China or Hong Kong. **Results:** Three themes were identified: 1) Change in types of caregiving occupations and stressors with immigration, 2) Parenting responsibilities shape personal and family life and occupations, and 3) Occupational changes associated with caregiving and immigration influence personal and family well-being. **Conclusion:** Occupational choices and engagement were based on the sense of duty and responsibility to their children. Chinese immigrant mothers made significant life changes regardless of their own and their family's well-being in the interest of their children's development and quality of life.

Keywords: Occupational engagement, Chinese immigrant mothers, Phenomenology, Transition, Occupational change, Culture

Chinese immigrants bring to Canada a set of values, beliefs, practices and occupations that influence the manner in which they respond to, experience and perceive the world (Lai, 2007). Among the Chinese immigrant population, there are a number who are parents caring for children with disabilities. Although little research has been done with this population, one study conducted in the United States explored the experience of Taiwanese immigrant families who have a child with a disability. Upon arrival to the US, families felt that although their chil-

dren's educational rights were respected, the family continued to experience prejudice from extended family members and the local Asian community in which they lived (Su, 2007). Families' self-stigma and prejudicial beliefs regarding disabilities also had a profound effect on their caregiving experience. Using a phenomenological approach, Su found that families exhibited resilience, resourcefulness, skillfulness, and insight in the midst of their situations. Although her analysis was valuable, Su's study did not address how meaning was ascribed to the

occupations of caregiving. This exploratory study aims to examine the caregiving occupations of Chinese mothers of children with special needs who have immigrated to Canada.

Occupation and Caregiving

Human occupation involves abilities, skills, time and place and is dependent on personal, cultural, social, institutional, historical, and geographic contexts (Hocking, 2009). Research that has been conducted on the occupations of caregiving for children with special needs is limited. Downs (2008), Donovan, VanLeit, Crowe and Keefe (2005), Case-Smith (2004) as well as Segal (1999), are among the few researchers to investigate the experience of mothers and caregivers of children with disabilities in relation to occupational engagement. Two studies, conducted in the US with samples that did not include parents from an ethnic Chinese background, focused on the occupations of mothers and uncovered similar themes: the need to maintain a social life and self-identity; and managing caregiving responsibilities to ensure their children's well-being and quality of life (Case-Smith, 2004; Donovan et al., 2005). In contrast, Segal's study (1999) focused predominantly on family-based occupations in Canada and the US and uncovered that commitment and a sense of obligation to family members is what determined the participant's occupational engagement. It revealed that families with children with special needs engaged in occupations in order to spend time together, to share experiences and feelings and to provide "learning opportunities for their children" (p. 57). The most recent study found that engaging in leisure occupations facilitated happiness and a sense of control and normalcy (Downs, 2008).

Caregiving in the Context of Chinese Culture

There are a number of studies investigating parents' experiences of caregiving within the context of Chinese culture. Understanding caregiving in that context is essential as pre-

immigration values and practices will influence how meaning is assigned to caregiving occupations after immigration to Canada. An ethnographic study, for instance, revealed the dissonance between the manner in which Chinese parents fulfill their caregiving duties to their children with special needs and Confucianism, an ideology deeply ingrained within the fabric of Chinese culture (Holroyd, 2003). For example, because the child with a disability may be unable to 'reciprocate' the caring role as an adult, he or she is unable to fulfill the obligations needed to perpetuate the natural 'parent-child order'. Being unable to follow the prescription of 'filial piety' – to care for and respect one's elderly parents in return for their work in one's upbringing – the family social order is thus thrown into chaos and disharmony by the child with a disability.

Other studies that investigated caregiving within Chinese culture, focusing on care receivers other than the child with the disability, did not identify the same dissonance. Mackenzie and Holroyd (1996), for instance, sought to understand how Chinese families perceive caregiving responsibilities for a variety of care receivers (e.g., spouse, parent, adult child) and found that caregiving, especially for their elderly parents, is indeed, consistent with the Confucian tenet of filial piety. In addition, studies that have looked at the experience and burden among Chinese caregivers looking after adult family members with mental illness similarly found caregiving to be consistent with Confucian principles of obligation, duty, and reciprocity (Chien, Chan, & Morrissey, 2007; Lau & Pang, 2007). The caregiving experience for Chinese parents with children with disabilities thus appears to be an atypical experience that warrants further exploration.

Although there is little research investigating the meaning Chinese parents ascribe to caregiving occupations for their children with special needs after migration to Canada, such research is warranted because Chinese Canadians are among the largest groups of visible minorities¹ in the country. According to the 2006 Canadian census,

Canadians of Chinese descent account for 19.3% of all visible minorities (Statistics Canada, 2006).

Transition, Health and Occupations

Immigration can result in occupational disruption. Finding ways to maintain culturally meaningful occupations, such as sewing, has been found to be a meaningful for some immigrant women in South Australia (Boerema, Russell, & Aguilar, 2010). Studies have also shown that Chinese immigrants often experience changes in their occupations. Dietary choices, for example, often combine traditional Chinese cuisine with western-style foods, with some families using western meats such as sausages and canned foods such as beans and tomato sauce to create hybrid dishes when preferred food is unavailable (Lu, Sylvestre, Melnychuk, & Li, 2008). Additionally, Chinese Canadians have been found to maintain their traditional health practices while simultaneously integrating new ones, although they continue to value their traditional health practices for their holistic view on illness, emphasis on prevention, and generally lower costs. Many traditional Chinese fitness activities are characterized by gentle movements and aim to re-establish equilibrium in comparison to western fitness activities such as rock climbing, or competitive sport that are more physically strenuous. Many immigrant participants reported that these sports tended to emphasize external appearance and muscular development, and were viewed either unfavourably or as dangerous activities. However, as a result of increased access to resources and opportunities in their new country, many participants became much more physically active in general, taking part in more Western occupations, and justified their engagement in them as maintaining their health (Lu et al., 2008).

Canadian research has also shown that Chinese immigrants are less likely than other immigrants to seek medical attention and more likely to experience higher levels of psychological stress due to perceived prejudice, lack of culturally appropriate health care services, and stressful life events resulting from transition, such as job loss

and decrease in socioeconomic status (Fung & Wong, 2007; Tang, Oatley, & Toner, 2007). One study found that women from Mainland China and Korea, in particular, perceive more barriers accessing gender and culturally appropriate services when compared to women from Hong Kong, although the participants from mainland China had been in Canada for significantly less time than the Hong Kong group, which may have influenced their perceptions (Fung & Wong, 2007).

Transition and Caregiving

Low levels of acculturation, poor access to resources, and the presence of institutional and social barriers have been found to add to the burden of caregiving experienced by Chinese immigrants, compounding the stressors associated with immigration (Hsueh, Hu, & Clarke-Ekong, 2008; Jones, Jaceldo, Lee, Zhang, & Meleis, 2001; Jones, Zhang, Jaceldo-Siegle, & Meleis, 2003; Jones, Zhang, & Meleis, 2003; Lai, 2007; Lai, Luk, & Lee, 2007; Leavitt et al., 1999; Martinson et al., 1999; Neufeld, Harrison, Stewart, Hughes, & Spitzer, 2002). Conversely, higher levels of acculturation, enhanced financial status, and better access to community/social resources were found to have a more positive effect on their caregiving experiences (Hsueh et al., 2008; Jones, Zhang, Jaceldo-Siegle et al., 2003; Jones, Zhang, & Meleis, 2003; Lai, 2007; Lai et al., 2007; Neufeld et al., 2002). The population of interest in those studies, however, were caregivers of elderly parents (Hsueh et al., 2008; Jones, Zhang, Jaceldo-Siegle et al., 2003; Jones, Zhang, & Meleis, 2003; Lai, 2007; Lai et al., 2007) and children with cancer (Leavitt et al., 1999; Martinson et al., 1999), rather than parents of children with special needs.

Policy makers and service providers need to better understand the experiences of Chinese immigrants, in order to more effectively serve this population. Specifically, they need information about caregiving for children with special needs, the stressors related to immigration, and factors affecting their health and quality of life.

This study focused on one aspect of that experience, in seeking to gain an in-depth understanding of the occupations of Chinese mothers of children with special needs who have immigrated to Canada.

Methods

Study design

This study was informed by Giorgi's (1997) descriptive phenomenological approach, which seeks to preserve the meaning that research participants attribute to their experiences and to produce a description of the essential structure of those experiences through a systematic process of data reduction (Giorgi & Giorgi, 2003). Such an approach was selected to focus on *describing* the participants' lived experiences rather than *interpreting* the meaning of their experiences, as would otherwise be executed in a hermeneutic approach (Creswell, Hanson, Clark Plano, & Morales, 2007; Giorgi, 1997). Therefore, the researchers bracketed their own assumptions throughout the data collection and analysis process in order to confront the data in its purest form, to effectively define and authentically describe the essential meaning of the phenomena. Interview methods were used to collect the data.

Participants

To be included in the study, prospective participants needed to be the parent and primary caregiver of at least one child with a disability, and to have immigrated to Canada from mainland China, Hong Kong, Taiwan, or any other Asian country. The participant's child must have been born in an Asian country and to have had the special need for at least 1 year while living in his/her country of origin. The participants also had to live in the greater Metropolitan Vancouver area, be 19 years or older and able to speak English or Cantonese. The participant's child must have been between 1 and 18 years of age.

Recruitment method

Participants were recruited from three sources: a) SUCCESS, a social service organization that assists Chinese immigrants with resettlement, b)

Hamber House, a school for children with mental health issues, and c) a Child and Youth Multicultural Worker from Vancouver Coastal Health. Recruitment flyers (in both English and Cantonese) were posted on the bulletin boards at SUCCESS and were also available for staff at SUCCESS, Hamber House and the Child and Youth Multicultural Worker to distribute. Potential participants who wished to participate in the study contacted the researchers via telephone. During that initial contact, the researchers explained the study, answered questions, screened candidates for adherence to the inclusion criteria, scheduled a time and location for the interview, and obtained their address to mail out the Pre-interview Package. The contents of the Pre-interview Package included: 1) a cover letter confirming the date and place of the interview, 2) a consent form and 3) a demographic questionnaire to be completed prior to the interview. Documents in the Pre-interview Package were provided in either English or Cantonese as requested by participants. The University of British Columbia Behavioural Research Ethics Board approved the study and participants provided informed consent prior to data collection.

Data collection

Semi-structured interviews were conducted in a location of the participant's choice; two in the participants home and one at a local coffee shop. Open-ended questions provided an opportunity for participants to speak about their experiences. Examples of questions about the time before immigrating to Canada included: What was it like having a child with a disability in China/Hong Kong/Taiwan? And, in China/Hong Kong/Taiwan, what were some things you wanted to do but weren't able to do anymore? Examples of questions about the time since immigrating to Canada included: What was your experience like settling in Canada? And since being in Canada, what do you and <<child's name>> do together during the day? Is there anything you would like to do but are unable to do now? The second author conducted the interview while the first author observed and collected field notes. At the request of the participants, all interviews were

conducted in Cantonese to enable a more in-depth description of their experiences; each one lasted approximately one hour. Field notes and questionnaires were used to supplement the interview data, further contributing to the dependability and credibility of the collected data. A \$40 grocery store gift certificate was provided to participants upon completion of the interview. Using pseudonyms for the participants and their children, password-protected files, and locked storage of documents, participant anonymity and confidentiality were maintained throughout the study. Because none of the authors are proficient in written Cantonese, the interviews were translated into English directly from the audiotapes and transcribed.

Data analysis

Analysis of data was undertaken using the systematic approach outlined by Backman, Del Fabro Smith, Smith, Montie, and Suto (2007). This approach is as follows: a) transcripts were first reviewed to identify and highlight meaning chunks, b) reviewing the transcripts again, the meaning chunks were coded, using words and phrases from the transcripts, c) similar codes were grouped together to form concepts, d) relationships between the concepts were then drawn in conjunction with frequent comparison with transcript data to identify the themes. The first and second authors analyzed the transcripts independently. The third and fourth authors reviewed the transcripts independently and provided feedback on the credibility of the themes.

Reflexivity

In addition, reflexivity was used throughout the data collection and analysis process to make explicit any preconceived beliefs and opinions that could potentially affect the outcome of the research (Carpenter & Suto, 2008; Primeau, 2003). The first two authors are 4th and 2nd generation Chinese Canadians respectively. Having been born, socialized and educated in Canada, both are influenced by Western ideals and practices. Having a longer family history in Canada, the first author is unable to speak or comprehend Cantonese, but still retains some traditional

Chinese values and customs. As a daughter to immigrants from China, the second author's views and assumptions were influenced by the numerous stories surrounding her parents' experiences with immigrating and settling in Canada. Moreover, both hold assumptions arising from insights and knowledge gained from past experiences working and volunteering with families and children with special needs. Coming from a sociology background, the first author also brings a different perspective on the study of society, culture, and inequality. With this accumulated knowledge and experience, these researchers, carrying with them their own set of beliefs, values, and assumptions, were careful to examine these throughout the research process, from situating the study to collecting and analyzing the data. Regular meetings and discussions with the third and fourth authors, who are from a White/European background, helped to identify these assumptions, as well as highlight possible cultural values that the two Chinese Canadian researchers may have overlooked. In addition, predictions of which occupations may be meaningful to the participants were influenced by the first and second authors' own experiences, having been brought up in a Western, more individualistic culture. After reflecting upon these influences, all researchers were careful during the analysis of the data to ensure that the responses of the participants were represented as accurately as possible.

Results

A total of five people responded to the recruitment flyers or posters over a period of 5 months. Of the five individuals who called to inquire about the study, three participants (pseudonyms: June, Lee, and Sofia) met the inclusion criteria. The participants were female, unemployed, and the biological mothers of their children with special needs. See Table 1 for additional demographic information.

Three major themes were developed as essential structures: 1) Change in types of caregiving occupations and stressors with immigration, 2) Parenting responsibilities shape personal and

Table 1: Participant Demographic Information

	June	Lee	Sofia
Age (Years)	38	52	58
Place of Origin	China	Hong Kong	Hong Kong
Primary Spoken Language	Mandarin	Cantonese	Cantonese
Religion	Christian	Christian	Christian
Child's Diagnosis	Global Developmental Delay	Mild Autism, Dyslexia	Depression, Anxiety
Child's Age (Years)	13	14	18
Gender of Children	Female	Male	Female
Years Since Diagnosis	12	7	10
Years in Canada	4	5 (1997–2003); 1.5 (2008-present) ¹	4 (1996–2000); 3 (2007-present) ²
Marital Status	Married, husband works overseas	Married, living with husband	Married, living with husband
# of People Living in Household	4 (June, husband, 2 children)	3 (Lee, husband, one child)	3 (Sofia, husband, one child)
Work Status in Asia	Full-time accountant	Full-time teacher	Full-time teacher
Highest Level of Education	Community College	“High diploma”	College
Household Income prior to Immigration (CAN\$)	\$20,000–\$40,000	\$40,000–\$60,000	> \$80,000
Household Income after Immigration (CAN\$)	\$20,000–\$40,000	< \$20,000	< \$20,000
Location of Interview	Participant's home	Starbucks	Participant's home
Paid Support in Canada	School support person	None	Live-in nanny

Key: ¹Returned to Hong Kong 2002–2008, ²Returned to Hong Kong 2000–2007

family life and occupations, and 3) Occupational changes associated with caregiving and immigration influence personal and family well-being.

Theme 1: Change in types of caregiving occupations and stressors with immigration

When explaining their experience of caring for a child with special needs in Asia, the mothers indicated that there were many stressors. One described it as “very stressful”. Despite two of the three mothers having paid support for their children with special needs, they felt they had less time for caregiving due to their work schedules. Although one participant explained that her work was flexible, she ultimately decided to quit work and devote her time to volunteering at her child's school in an effort to help her daughter make friends. Social stigma was another significant source of stress in Asia. Like other participants, June, whose daughter has global developmental delay, described, “I was

always worried about what others would think of Sally. I didn't like others looking at us because of Sally.”

Their children's education was also stressful, as teachers in Asia place a tremendous amount of pressure on students in the classroom. Participants reported lack of understanding of the children's disabilities/special needs among staff and that their children were given a lot of homework and punished if they were unable to complete it. Lee, whose child was diagnosed with dyslexia and mild autism, had often asked the teachers to give her son less homework, however, not all teachers would make this accommodation. She explained that:

Some teachers say that ‘your son may be lazy’ but in fact it's [sic] not. Because he has dyslexia, he cannot organize language well, especially in English and Chinese. Because

language is hard for him. Writing, reading, is very difficult. The school didn't understand, so my child was not happy.

The participants indicated that there were limited social supports and resources in their countries of origin.

I felt hopeless sometimes...because the school didn't understand and wasn't supportive. I was hopeless. In Hong Kong, it's not very accepting. Not like here, where people are more open-minded and accepting. So it seemed, on the surface that children with special needs would be allowed to go to the school...like my son, but it was very superficial. There were no supports in place for these children. [Lee]

In contrast, the participants also experienced circumstances that helped buffer some of these stressors. Family and friends were able to provide emotional support and although the teachers placed pressure on their children, two participants also expressed that this often took the pressure off the parents. Sofia, whose daughter has anxiety and depression, stated:

But the good thing is, the lazy kids—they're forced to become more conscientious because of the teachers. So, in the end, all the kids do well in school. Here [in Canada], it's all up to us. The lazy kids can just stay lazy and it's up to the parents to get them to do their work. That's the negative part of living in Canada, I think. Children here don't take responsibility for their own education, for their own lives. So, it's hard for parents. In Hong Kong, the responsibility was on the teachers. The teachers deal with everything. All parents had to do was to feed and clothe their kids, make sure they sleep and make sure they finish their homework.

After immigrating to Canada, the participants described similar numbers but different types of stressors. June identified aspects of the physical environment, such as the uncut curbs as posing the most significant barrier to taking her daughter out, due to the weight of her wheelchair. This

perception was likely influenced by personally taking her daughter out more often in Canada than in Asia, where she had been institutionalized. For Lee and Sofia, finding work in Canada was a significant barrier and source of stress. Their husbands were also unable to find work. Sofia explained, "With work, I could make money. We'd be more comfortable and I wouldn't have to worry about her as much". The stress of having no extended family and fewer friends in Canada was also reported by two of the participants.

My social circle has definitely shrunk because I end up spending a lot of time with my son...It just makes me more and more tired, more and more depressed. And, it actually makes me kind of anxious too...I feel like there's more stress in my life. [Lee]

Like the school system in Asia, the Canadian education system also causes stress but in a different fashion. In Canada, the education system is more willing to accommodate special needs and less strict. However, two of the participants reported that this actually placed more pressure on them as parents.

In Canada, it's so much more relaxed, so she doesn't care as much...It's been harder for us in this respect, because she's changed. She's been more dependent on us to take care of her. [Sofia]

Locating and accessing resources to assist with the language barrier, and lack of funds and knowledge of where to access services and programs were also significant sources of stress. Although the mothers indicated that there were more resources, accessing them was not easy. Sofia explained:

In Canada, it's hard to find someone...professionals to help my daughter. A lot of things are very expensive here. For example a psychologist could charge up to \$150/hour. So yeah, he told us not to see him...In Hong Kong it's all free, you know? But we don't get to see them as often...Oh, and not speaking English well also makes it hard for us...that's definitely a challenge.

Overall, the participants expressed that the occupations related to the 'Canadian lifestyle', and the weather, education and health care system helped reduce some of their stress and that teachers who are more understanding and accommodating have made their children happier.

Theme 2: Parenting responsibilities shape personal and family life and occupations

Each participant's responsibilities and sense of duty as a parent influenced her lifestyle, choices and decisions, "because in China, as a parent, you put all your hopes and dreams into your children. Your children are the most important. The other stuff doesn't matter to me. I just want Sally to be happy, it's ok." [June]. Sofia described how her family's occupational choices and decision about where to live were based on her daughter's well-being. While living in Hong Kong, she left work early every day in order to take her daughter, who has depression and anxiety, to play groups, the park, and the library to help her make friends. Sofia and her husband also made the decision to move into a larger home with nearby amenities such as a "park, a pool, basketball court, badminton court and archery area" in order to host parties for her daughter's friends. She explained, "I'm her mother, it's my responsibility." Additional data in Table 2 provide a more nuanced listing of the participants' occupational transitions with respect to their employment, leisure occupations, and other occupations that were difficult to engage in.

The participants had made the decision to immigrate to Canada as a result of the needs and preferences of their children. June said that, "we did it for her". Sofia had a similar experience and said that it was her daughter who expressed wanting to return to Canada in order to attend school. The participants also sacrificed their employment and various other meaningful occupations in the interest of their children. Lee made the decision not to finish her Certificate of Early Childhood Education, while June gave up her accounting job in order to care for her daughter. Lee described, "I sacrificed my own job... it didn't matter that I was doing well and getting promoted, I was enjoying it and gaining more responsibili-

ties... none of that mattered. I had to take care of my son and help him."

The participants also made sacrifices as a result of their caregiving responsibilities. Lee's everyday activities changed significantly.

For example, I would meet up with my friends more, we'd go shopping, go for tea... take classes, like cooking, knitting. Now I feel like I have to take my son to class and spend time with him... well, it's basically changed my life completely. My whole lifestyle changed. I'm not as happy as I was before.

Their priorities were based on the caregiving needs and occupations they believed they needed to engage in for their children's happiness, which outweighed their own health and happiness. Sofia stated simply that "you can't take breaks from being a mother".

Theme 3: Occupational changes associated with caregiving and immigration influence personal and family well-being

For June, immigrating to Canada was more positive in comparison to the other two participants. Their personal stories illustrate this theme.

June

Prior to immigrating to Canada, June's work schedule and caregiving occupations meant she was unable to continue engaging in meaningful occupations such as traveling, dining out, and visiting with friends and family. After immigrating to Canada, however, she has been able to participate in ESL classes, visiting and spending time with her friends, attending church and going on vacations with her family. While she is not currently employed, her husband continues to work in Asia, providing her with adequate financial support and allowing her opportunities to engage in more leisure-based occupations. For instance, she recently traveled to Banff with her family for a vacation. She also recounted that she is very happy in Canada compared to the stressful life she had in China. In addition, June acknowledged that the government has helped her

Table 2: Occupational Engagement before and after Immigration

	June	Lee	Sofia
CHINA/HONG KONG			
Employment	Accountant	Teacher	Teacher, but eventually quit
Occupations engaged in	Visiting daughter at the hospital	Cooking, driving son to school, bathing, grooming	Taking daughter to play groups, to the amusement park, playground, library
	Helping with her exercises	Assisting son with homework	Going on family vacations
	Assisting her with her school work	Telling stories	Befriending parents of daughter's classmates
	Watching TV with her	Supervising son at home (for safety)	Hosting parties for daughter to make friends
	Assisting with toileting, bathing, grooming		Volunteering at daughter's school
	Taking daughter to the zoo and park		Going to psychologist/social work appointments
			Assisting daughter with school work
			Assisting with toileting, bathing, grooming, feeding, administering medications
Other/leisure occupations	Occasional dinners with friends	Going to church	Going to Church
Occupations that were difficult or not possible	Seeing her daughter on a regular basis	Helping her son with homework	None mentioned
	Traveling		
	Going out for dinner		
	Seeing friends & family		
CANADA			
Employment	Currently unemployed	Currently unemployed	Currently unemployed
Occupations engaged in	Assisting with exercises	Buying groceries Cooking, cleaning	Assisting with toileting, bathing, grooming, feeding, administering medications
	Feeding, dressing, grooming	Setting-up appointments with specialists, accompanying son to appointments	Accompanying daughter to specialist appointments
	Taking daughter to the park, to various recreational programs (reading, singing, camping) in the community	Watching the news	Supervising daughter at home for safety
Other/leisure occupations	Occasional dinners with friends	Going for walks with husband	Going to Church
	Family vacation (to Banff)	Going to Church	
	ESL classes		
	Going to Church		

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Table 2 (Continued)

	June	Lee	Sofia
Occupations that were difficult or not possible	Taking daughter out (because of her heavy wheelchair)	Driving (unable to drive due to illness)	Spending time with friends & family
		Spending time with friends & family	Taking daughter out

significantly by providing her daughter with a wheelchair. Upon immigrating, June’s occupational changes influenced her personal and family well-being in a positive way.

Lee and Sofia

In contrast, Lee and Sofia experienced a more difficult transition coupled with the occupational disruption of their families, and noted that immigrating to Canada negatively influenced their health and well-being. Their occupational engagement changed, and both Lee and Sofia’s children, despite being happier in Canada, struggled with their own occupational engagement. This was very difficult for both parents. For example, the occupations of being a student, socializing with peers and participating in leisure activities were especially challenging for their children to adapt to because of their special needs. Lee and Sofia, however, remain committed to living in Canada out of a sense of duty to their children despite the significant effect on their own physical and emotional health. Both participants and Sofia’s husband have since been diagnosed with depression. Lee explained:

I had depression in Hong Kong because I was worried about his education and his learning. And he also had behavioural problems at school sometimes so that made me worry as well...we were really struggling with this. And no one could really take our place, we are his parents, you know?

Both of these participants and their husbands experienced difficulty finding work and both families experienced financial hardship. When describing her experience settling in Canada, Lee explained:

Because of my son, we’ve had to take our time with settling down — finding work, like that. It’s also made my health worse. If we didn’t have to worry about him so much, I could work more, we’d have an income, and just be more comfortable overall. And my husband can’t work because he has to drive us everywhere...I think the three of us kind of feel trapped in a situation we’re not happy about. I have depression because of this.

June, Lee and Sofia’s different experiences appear to be related to working and achieving financial stability. Other factors that may be involved include the occupational challenges associated with the children’s conditions. June’s daughter’s condition is physically based, while Lee and Sofia’s children have mental health conditions and are predominantly behavioural.

Discussion

The findings have helped to illuminate the changes in occupational engagement of Chinese immigrant mothers of children with disabilities living in Canada. The findings suggest that the participants’ occupational engagement and life choices are based on their sense of duty as a parent, and align with the Confucian principles of obligation and duty (Holroyd, 2003). The participants prioritized the needs of their children and described them as “gifts from god” and the basis for all of their “hopes and dreams”.

Although the participants continued to engage in similar caregiving activities after immigration, there were clearly changes in their everyday

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occupations, which coincides with the findings of Lu et al. (2008). What was particularly salient in our findings was that the majority of the occupational choices made by these participants were based on their duty as caregivers. The participants, for example, sacrificed their own identity as workers and the privileges of financial security in the interest of their children. June described that when she was living in China, she and her husband “felt very stressed because [they] had to care for [their daughter] and both [had] to work full-time”. In contrast she described her situation as “much better here” as she was able to spend more time with her daughter. Although June’s choice not to work was a personal decision, in contrast to the other two participants who were unable to find work, the basis for their decision to sacrifice employment was similar. Regardless of the participants’ personal well-being, their decisions were products of this sense of responsibility as a parent. Overall, the process of immigration to Canada changed the participants’ personal occupational engagement as well as their occupational engagement related to caregiving. Although the ability to engage in occupations was dependent on various factors, such as access to employment opportunities and spousal employment status, the participants described the needs of their children as being most meaningful to them.

Participants revealed that their duty and sense of responsibility and caregiving occupations took precedence over all other occupational choices. They hesitated when asked about the occupations they wished to engage in and the meaning they would ascribe to such occupations. For these mothers, their occupational engagement was based on the well-being of their children. While one stated that “you cannot take a break from being a mother”, another expressed that “the other stuff [didn’t] matter”. The decision to immigrate, to sacrifice their employment and time with friends and family, was driven by their obligation to their children. This differed from the majority of the findings in the literature, where research was primarily conducted with white women, who were not immigrants and whose cultural heritage is European (Case-Smith, 2004; Donovan et al.,

2005). North American mothers of European heritage reported that their experience consisted of highly structured days, encompassing various caregiving tasks. Unlike the Chinese Canadian participants, those mothers expressed the desire to maintain their personal occupations, such as their social life and sense of self (Case-Smith, 2004). For Donovan et al.’s (2005) participants, occupational engagement was defined instead by their occupational role as a caregiver and mother.

Only one study with participants of predominantly European descent uncovered findings consistent with this study. Segal (1999) described family occupations as driven by the “principle of commitment” (p. 58). Although that study focused on family-based occupations rather than the occupations of the mothers, these findings revealed that there are indeed similarities between the Chinese Canadian participants and North American families with European backgrounds.

In contrast to previous studies, however, this study revealed some of the barriers to occupation that are encountered by Chinese immigrant mothers. The transition experience was substantially influenced by larger structural factors, which is consistent with the literature (Hsueh et al., 2008; Jones, Jaceldo, et al., 2001; Jones, Zhang, Jaceldo-Siegle, et al., 2003; Jones, Zhang, & Meleis, 2003; Lai, 2007; Lai et al., 2007; Leavitt et al., 1999; Martinson et al., 1999; Neufeld et al., 2002). Securing work was a challenge for two of the participants, who experienced a significant decrease in socioeconomic status. These circumstances were a significant source of “worry” and stress and influenced their ability to access appropriate services for their children. This often made them “feel like failure[s]” and contributed to a sense of hopelessness. According to Spitzer (2005), depression is disproportionately found among low-income populations, particularly among single mothers. Although both participants in our study were married, they reported physical and emotional health conditions.

The occupational barriers that the children faced, such as participating in school, also influenced the participants' health and well-being. Structural differences amongst the mainland Chinese, Hong Kong, and Canadian school systems were highlighted by the participants. Although they found the Canadian school system more accepting and flexible with their children, the two participants from Hong Kong felt it placed much more pressure on their occupational roles as mothers. This was a source of stress, which greatly influenced their experience and responsibilities as caregivers.

Although language barriers, acculturation, and poor access to resources have been highlighted by the literature (Jones, Zhang, Jaceldo-Siegle, et al., 2003; Jones, Zhang, & Meleis, 2003), and were mentioned by the participants, they were not the most salient points in the data. For the participants in this study, due to their unique experience as mothers of children with special needs, the occupational barriers they encountered included lack of employment opportunities and the values of the Canadian school system. These barriers were often associated with their duties as caregivers.

Limitations

We acknowledge that conducting the interviews in Cantonese and the resultant requirement for translation may pose a limitation for the study. With translation from Cantonese to English, the true meaning and intention of the participants' message can be altered. Often, there simply is no equivalent word or meaning in English. The translation process may compromise the phenomenological objective of the study, as the essence of each participant's experience is subjected to the translator's influence (Twinn, 1997). Conversely, conducting the interviews in the participant's native language should also strengthen the authenticity of this study, because participants are able to directly convey their experiences without having to negotiate a less familiar second language. Being able to conduct the interview in the informant's native language lends itself to the

retrieval of richer, more credible data, allowing participants to express themselves freely and openly, without having to worry about how to form their words and sentences. In addition, due to the limited time and resources available, the researchers were successful in recruiting only three participants and data saturation was not achieved. Despite this limitation however, similarities in the data did surface and important themes did emerge.

Conclusion

The occupational transition of Chinese immigrant mothers of children with special needs is particularly complex. This exploratory study illuminates the cultural values and beliefs of Chinese mothers of children with special needs and identifies some of the occupational barriers and facilitators associated with caregiving in China, Hong Kong and Canada. Future research should be conducted on the caregiving experience of mothers of children with special needs from a variety of cultures. Because the literature, particularly the occupational science literature, has focused predominantly on populations with European heritage, the influence of culture on the meaning of occupational engagement has been neglected. This study contributes to occupational science by revealing how the meaning of occupations is dependent on cultural values and each individuals' perception of their occupational roles. As illustrated by Bonder, Martin and Miracle (2004), "culture influences occupations as well as perceptions of health, illness, and disability" (p. 159). The relationship between Chinese culture and occupation has been illuminated, which is of particular importance to the study of occupation in a Western, multicultural society.

End Note

1. Wikipedia clarifies that:
A visible minority is a person who is visibly not one of the majority race in a given population. The term is used as a demographic category by

Statistics Canada in connection with that country's Employment Equity policies. The qualifier 'visible' is important in the Canadian context where political divisions were traditionally determined by language (English vs. French) and religion (Catholics vs. Protestants), 'invisible' traits. Since the reform of Canada's immigration laws in the 1960s, immigration has been heaviest

from areas other than Europe, thus creating visible minorities. Members of visible minorities are defined by the Canadian Employment Equity Act as 'persons, other than Aboriginal people, who are non-Caucasian in race or non-white in colour.' The term is used to address the labor market disadvantage of this group. Retrieved 13 October, 2011 from www.wikipedia.org

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