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# Transnational parent–child separation and reunion during early childhood in Chinese migrant families: An Australian snapshot

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## Abstract

Limited international research exists on reasons for transnational child care, or developmental consequences of separations and reunions on young Chinese children. This descriptive study portrays a sample of children from Chinese migrant families residing in western Sydney, New South Wales, Australia, whose parents temporarily relinquished their care to grandparents in China. Data were collected via retrospective health record audits. The majority of parents were first-time parents and the majority of children were first-borns sent back to China during infancy. The average duration of transnational parent–child separation was 20 months. Results showed that male child subjects who experienced multiple transnational separations and reunions were more vulnerable to problems associated with disrupted attachment. This study links parental decision for transnational child care and feelings of disempowerment in their parenting role with patriarchal family values and expectations, and their own adverse early experiences. This study may assist child and family

health (CFH) professionals identify, understand and help Chinese parents who may be considering transnational child care to avoid or ameliorate adverse consequences, or alternatively, to support parents following reunion to establish or re-establish attachment relationships with their child, and parent well to optimise their child's development. Study findings increase the evidence base on reasons for transnational child care, and the complex range of developmental and psychological problems children and parents in this study faced following reunion.

## Introduction

The primary relationship during infancy and the early years is foundational to attaining emotional regulation and forming relationships during childhood and across the life trajectory (Bretherton 1992). Children's relationships and experiences are significantly influenced by changes in family systems which alter the emotional and physical proximity of a parent to a child (Bronfenbrenner 1994). Some aspects of family migration disturb parent–child relationships and family systems, particularly if children experience transnational separation from their parents.

An apparent trend amongst some migrant Chinese families to relinquish care of their infants to relatives in China has been anecdotally reported by community child and family health (CFH) staff in western Sydney. Staff observe that parents express and display emotional distress when separation from their infant is pending, and that child development and adult psychosocial problems seem to be common during separation, and after reunion.

Migrant families who maintain a bicultural family life while adapting to a new country (Bohr 2010) have been described as transnational families (Bornstein & Bohr 2011). Transnational families from many countries sometimes choose to temporarily return their infants and young children to kinship care in their country of origin (Parreñas 2001; Da 2003; Landolt & Wei Da 2005). Chinese children who experience transnational separation have been termed "Chinese satellite babies" (Bohr & Tse 2009). This phenomenon is becoming an emerging area of interest; however, influencing factors and consequences of this child care choice for Australian-Chinese migrant families is limited, and poorly understood.

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Evidence on the impact of disrupted parent–child attachment relationships in migrant families is sparse (Mazzucato & Schans 2011; Tate 2011). In addition to language and cultural hurdles, migrant families are preoccupied with establishing homes, seeking employment for economic security, and developing social connections (Mazzucato 2011; Mazzucato & Schans 2011; Tate 2011). Studies of Chinese satellite babies conducted in America and Canada have focused more on parents' needs, and their discourse on decision-making and migration experiences (Bohr 2010). Surveys of Chinese migrant women receiving perinatal care in a New York Chinatown health centre in 1999, exposed that approximately 20% of respondents had sent babies back to relatives in China (Bohr & Tse 2009; Bohr 2010). In 2009, another study reported that 57% had considered sending their babies back (Kwong *et al.* 2009). Parents regarded the practice as a method for maintaining kinship ties, and instilling Chinese cultural values in their child (Landolt & Wei Da 2005). One Australian study (Da 2003) investigating Chinese migrants' beliefs about transnational grandparenting concurred with these views (Bohr 2010; Bohr 2011). The attachment and developmental needs of minors are often overlooked, their voices silenced as insignificant in the context of family migration (Da 2003; Shik 2015).

This study aimed to investigate why parents temporarily relinquished their infants and young children to kinship care in China, and to distinguish the range and extent of problems experienced by children following reunion.

## Method

### Setting

A cultural and linguistic diverse suburb in western Sydney, New South Wales (NSW), Australia. The suburb's Chinese population of 18% exceeds the national proportion of 3.9% and NSW proportion of 5.2% (Australian Bureau of Statistics [ABS] 2018).

### Participants

Registered child clients whose parents voluntarily accessed child and family counselling at a community health centre between May 2012 and May 2015. This time frame was established so that a large enough sample could be identified. Subjects were aged 0–18 years, of Chinese ethnic background, with history of early transnational separation from their parents and kinship care in China for at least three months during their first five years.

### Data collection

Data were collected via retrospective audit of health records. An initial data report yielded 283 health records. Data were then assessed against inclusion criteria. A data collection form was created to record details of qualitative and quantitative variables for each subject: referral source/s, child's position in family, number of siblings, gender, reasons for separation, age at separation and reunion, length of separation, number of transitions, overseas carer, carer following reunion, reported child and parent problems following reunion, parenting methods/style, grandparent and parent's city or province of origin in China.

Data were recorded in the data collection form and manually reviewed by two investigators. Data were then checked for

accuracy by both investigators, de-identified, and transferred to an Excel spreadsheet. Data were electronically stored in a secure folder on a password-protected computer. A sample of 24 subjects was originally identified; however, five were subsequently excluded — four were not yet reunited with their parents. The final sample consisted of 19 children from 16 families.

### Data analysis

Data were analysed using the Statistical Package for the Social Sciences (SPSS) for Windows version 21 (SPSS Inc., Chicago, USA) and Microsoft Excel 2013. Data were summarised using descriptive statistics. Frequencies and proportions were calculated.

Content analysis of qualitative variables was conducted, based on: parents reported reasons for choosing transnational child care, child problems following reunion, and parenting styles.

### Ethics

Ethics approval was granted by the Human Research Ethics Committees of Western Sydney Local Health District (HREC: LNR/15/WMEAD/433; LNR SSA/16/WMEAD/42), 16 March 2016. Data were de-identified and pseudonyms have been used when reporting and discussing results.

## Results

### Family — child/parent characteristics

The sample included 19 children from 16 families. The majority of children (78.95%,  $n=15$ ) were first-borns. Most families originated from Fujian Province and all had legal Australian residency. Half the fathers were self-employed (50%,  $n=8$ ). One-third of mothers (37.5%,  $n=6$ ) self-identified as unemployed or housewives (Tables 1 and 2).

### Separation — features/reasons

Parent–child separations occurred between child subjects' first weeks of life and five years, 68.42% ( $n=13$ ) were returned to China for the first time during infancy. The average duration of transnational separation was 20 months. One child spent six years in China. Four children (21%,  $n=4$ ) transitioned between their parents in Australia and carers in China multiple times.

Paternal grandmothers were the primary carers for 47% ( $n=9$ ) of children whilst in China. Maternal grandmothers cared for 32% ( $n=6$ ), and paternal and maternal grandparents shared care of 16% ( $n=3$ ) of children. One child was cared for by both paternal grandparents.

Parents offered various reasons for sending children back to China. Their most to least commonly reported reasons were categorised into the following four groups for analysis according to similar features: parental disempowerment, parental employment, adjustment to migration, and parent studying.

Half the parents (primarily mothers) expressed feeling disempowered in their parenting role. They struggled to recognise, understand, and respond to children's needs. Mothers said that patriarchal family dynamics evoked pressure to step aside from their mothering role and allow grandparents to assume care during

their child's formative years. Some parents felt that sending their child to China was inevitable and they were powerless to influence the decision. Mother A described "Children are not just mine, they belong to 'the family' I cannot make decisions by myself". Mother B stated that grandparents and extended family strongly urged her to send her children back to China. Mother C said her mother-in-law pressured her to relinquish her baby, the first grandson, to her care. Mother D alleged that her child's paternal grandmother held

onto care of her child without consent when the family visited China and initially refused to restore her child back to her.

The second most common reason given by parents for returning their child to China was parental employment (31%, n=6), driven by need for financial security. Thirdly, adjustment to migration, accounted for 11% (n=2) children being sent back. These families had migrated to Australia the same year their child was born

Table 1: Demographic characteristics of children who experienced early transnational separation

<b>Demographic data</b>	<b>n</b>	<b>%</b>
Male	11	57.89
Female	8	42.11
<b>Birth order</b>		
First-born child	15	78.95
Second-born child	3	15.79
Third-born child	1	5.26
<b>Age at first separation</b>		
Birth – 12 months old	13	68.42
13–24 months old	5	26.32
25–36 months old	1	5.26
<i>Average age at first separation 10.3 months</i>		
<b>Age: final reunion with parents in Australia</b>		
< 12 months	1	5.26
13–24 months old	6	31.59
25–36 months old	5	26.32
37–48 months old	5	26.32
> 48 months old	2	10.53
<i>Average age at final reunion 34.1 months</i>		
<b>Total duration of separation</b>		
0–12 months	8	42.11
13–24 months	8	42.11
25–36 months	0	
37–48 month	2	10.53
48–60 months	1	5.26
<i>Average duration of separation 19.7 months</i>		
<b>Numbers of transitions/separations</b>		
One separation	15	78.95
Two separations	2	10.53
Three separations	2	10.53
<i>Average number of transitions 1.32</i>		

n = frequency % = percentage

and sent their babies back to China to facilitate their settlement process. Finally, one parent was studying and said her study load competed with the demands of parenting.

### Reunion — child problems

Following reunion, children exhibited a range of health problems and challenging behaviours. These concerns prompted referral to community health child and family counselling by a range of workers who were concurrently providing services for the child or family. The majority (68.42%, n=13) of referrers were CFH nursing and allied health workers (mainly occupational therapists and speech pathologists). Self-referrals (mainly by mothers) accounted for 26.31% (n= 5). One child was referred by a school counsellor.

Presenting problems on referral to counselling included selective mutism, food refusal, shyness, sleep problems, immature social skills, sibling rivalry, aggressive behaviours, school issues, and regressive development. However, presenting problems at referral were often the 'tip of the iceberg' and additional problems were revealed in most children during counselling.

Male children experienced more problems than females (37 versus 20 problems respectively). Certain problems were gender-specific (Figure 1). Aggressive verbal and physical behaviours were dominant in male children. Males also displayed more speech disorders, maternal rejection, social immaturity, problematic internalised and externalised behaviours, and emotional dysregulation than their female counterparts. Sibling rivalry was three times more common for males versus females, whereas eating problems, school refusal and separation anxiety was seen only in females.

Three children (two boys aged four and eight years, and a four-year-old girl), had multiple carers following reunion — their parents

and different sets of grandparents. Each exhibited a total of seven problems. In comparison, the majority of their counterparts in the study (84%, n=16) were returned to the sole care of their biological parents, and exhibited fewer problems.

During content analysis of data, children's problems were categorised into the following four groups for analysis according to similar features: internalised, externalised, developmental, child and family relationship.

### Internalised

Nine children internalised their feelings. According to parent report children in this group were excessively sensitive, self-critical, or anxious and withdrawn in home, social, and school settings. Some mothers complained that their returned child were extremely clingy, "like a shadow", and more sensitive to change than siblings who had not experienced early separation. Five-year-old Ian was extremely shy, had no peer relationships at school, was self-critical, and precociously independent. For example, when asked what would happen if he fell and needed help or comfort he responded "I get up by myself when I fall". The child's father said that Ian labelled himself as "stupid". He observed that Ian was withdrawn, that he disengaged through overuse of electronic devices, and confirmed that Ian rarely asked for or accepted help. It was disclosed during family counselling that not allowing Ian to cry had been used as a form of discipline since he was reunited with his parents at two years of age.

### Externalised

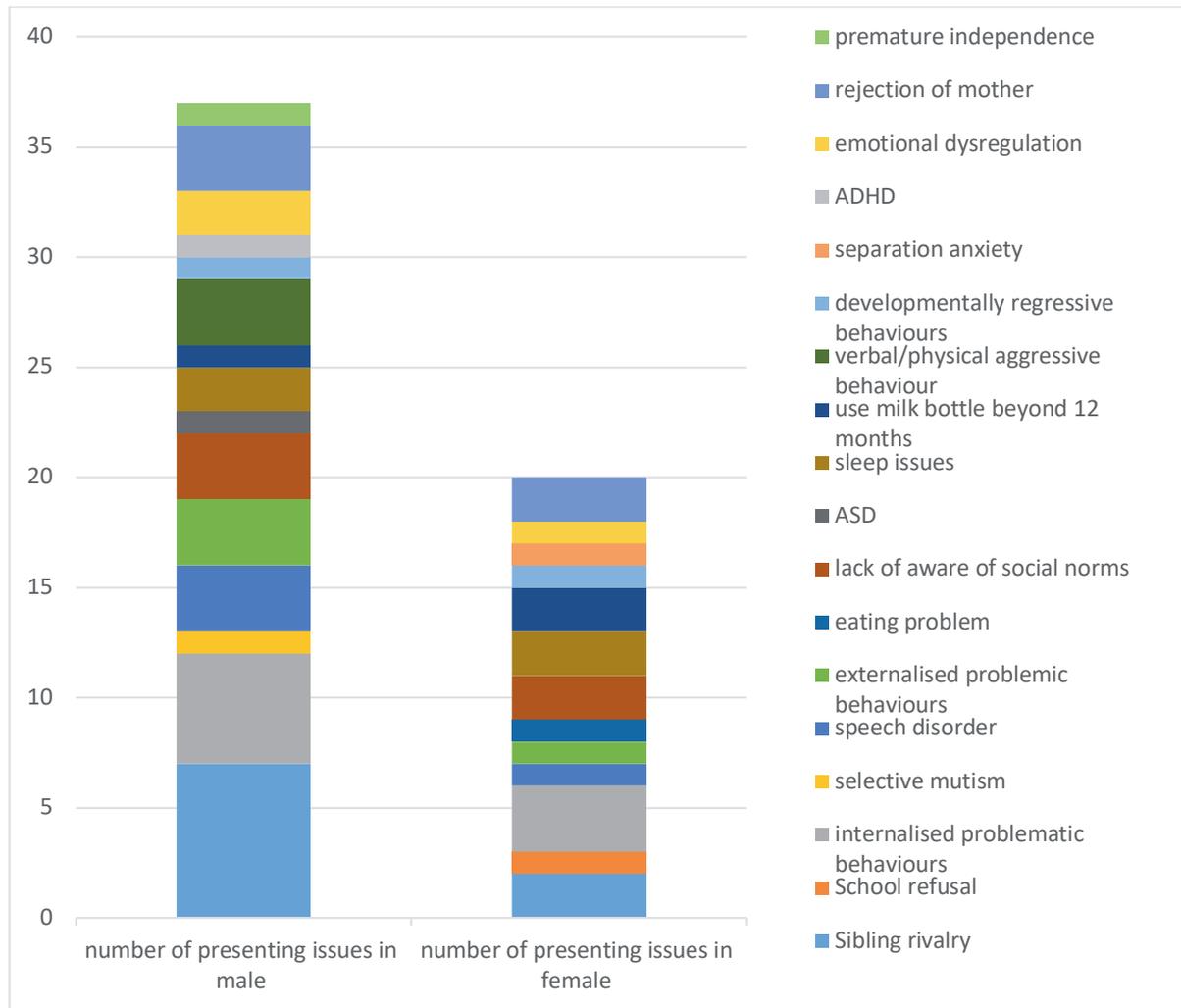
Five children exhibited externalised behaviours — hitting, kicking, throwing, destructive behaviours, tantrums, attentive difficulties and restlessness. Four-year-old Andrew was sent to child care one

Table 2: Parent and overseas carer demographics

City/Province of origin	Mother		Father		Overseas Carer	
	n	%	n	%	n	%
Fujian Province	6	37.5	7	43.75	6	37.5
Guang Dong Province	3	18.75	3	18.75	3	18.75
Shanghai	2	12.5	2	12.5	2	12.5
Liao Ning Province	2	12.5	1	6.25	1	6.25
Beijing	2	12.5	1	6.25	2	12.5
Guang Xi Province	1	6.25	1	6.25	1	6.25
Jiang So Province			1	6.25	1	6.25
Parent occupations	Mother		Father			
	n	%	n	%		
Employed	7	43.75	6	37.5		
Self-employed	3	18.75	8	50		
Unemployed	6	37.5	2	12.5		
Total families = 16						

n = frequency % = percentage

Figure 1: Presenting issues — male versus female



week after reunion with his parents in Australia, with no English language skills or experience of pre-school. His parents related an incident when Andrew was disciplined by his pre-school teacher for grabbing toys from another child. Andrew responded by hitting the teacher, upturning tables, chairs and toy containers, then lying on the floor, crying uncontrollably. Prior to attending counselling, concerns regarding a possible autism diagnosis had been investigated but ruled out. In hindsight, Andrew's behaviours are best understood through an attachment lens. Emotional frustration and distress due to loss of his attachment figure — his grandparent in China — and reunion with his biological parents who were virtual strangers, together with adjustment to new people, environments, routines and language had elicited disproportionately negative emotional reactions to small triggers.

### Developmental

Two children exhibited developmental regression in language, self-care/social skills, fine motor skills, and emotional regulation. For example, four-year-old Elsa suddenly stopped speaking two months after being sent back to China; Shirley was sent back to China at three months and was well established on eating solids/family foods. When Shirley was reunited with her parents at 10 months, she began to refuse solid foods. By 15 months, she had regressed to drinking only milk from a bottle, and became malnourished and anaemic.

### Child-family relationship

Families were also challenged by child-family relationship problems. According to parent report, 37% (n=7) subjects demonstrated significant sibling rivalry and were consistently violent and aggressive towards siblings. Mothers (31%, n=6) reported feeling hurt and rejected by their child following reunion, when they expected closeness. Long lasting and multidimensional relationship problems were also revealed. For example, Greg was in China for six years. At 13 years he developed a precocious relationship with a girl which worried his mother due to the intensity of his feelings. This was explored during counselling and interpreted as Greg trying to compensate for his unmet early attachment needs. His mother came to recognise that her disrupted relationship with Greg had affected her emotional availability to Greg and her younger child, compromised family relationships, and impacted both children's social and emotional development. This insight motivated her to change her parenting approach and repair her family relationships.

A combination of issues from each problem group were experienced by 47% (n=9) of children following reunion. This increased complexity made parenting more challenging. Three-year-old Tim exhibited anxiety, withdrawn behaviour, sleep issues, sibling rivalry, and regressive behaviours, for example, 'babying' himself by reverting back to drinking milk from a bottle when

settling to sleep. His perception of the family dynamic was “I am Grandma’s treasure, and younger sister is mother’s”. Tim’s mother confirmed his strong attachment to his paternal grandmother, and felt rejected and disempowered when he sought comfort by phoning his grandmother (in China) when he was upset, rather than turning to her.

### **Reunion — parent problems**

During family counselling parents discussed and processed problems related to their marital relationships, childhood experiences, and parenting. The majority (15 out of 16 families) described characteristics of disharmony, conflict, and tension in their marriage relationship. Some reported domestic violence.

Significantly, most relinquishing parents (11 parents from 16 families) disclosed also being separated from their parents during childhood — sent to live with other relatives. They reported moving between a number of households, and traumatic, abusive experiences during their early years. Many had not acquired a positive parenting blueprint from their parents or carers and therefore were unprepared or underprepared to adequately meet their child’s needs following reunion.

All parents in the study revealed ineffective parenting approaches, which exacerbated children’s problems. During content analysis of data, parenting styles were categorised into the following five groups for analysis according to similar features: disorganised and punitive, disorganised and neglectful, authoritarian and punitive, authoritarian and neglectful, abusive and neglectful:

#### **Disorganised and punitive**

Disorganised and punitive parenting approaches were disclosed by 16% (n=3) of parents. They had shortfalls in setting boundaries, applied limits inconsistently, and were inclined to be verbally aggressive and use physical punishments. In Family B, everyone had different dinner times and no sleep routines. Children played computer games without limit and settled to sleep after midnight. Sometimes parents ‘gave in’ to children’s outbursts and defiance, at other times they responded aggressively and inflicted physical punishments.

#### **Disorganised and neglectful**

Disorganised and neglectful parenting approaches were disclosed by 10% (n=2) of parents. These parents could not set clear boundaries or limits. They divulged no set family meal times, bed times or routines, ignored children’s emotional needs, and didn’t provide adequate supervision or connected family interactions.

#### **Authoritarian and punitive**

Authoritarian, punitive parenting approaches were disclosed by 53% (n=10) of parents. These parents usually met children’s physical needs, but enforced absolute dominance to discipline them. They tended to have difficulties regulating their own emotions, and were generally intolerant of tantrums, perceiving a child’s crying as a nuisance. They used physical punishments, verbal abuse or threats to manage children’s behaviours/emotions that they found unacceptable. Mr C overemphasised academic achievement, discouraged spending time on physical activities,

and admitted to using “tough words” and physical punishment (hitting) to ‘teach’ his five-year-old. His child exhibited severe social anxiety.

Anne’s grandparents resided with family F. Three-year-old Anne was one of the three children who had multiple carers and multiple problems following reunion. Her grandparents frequently overruled Mrs F’s parenting decisions. Instead of recognising Anne’s emotional distress and responding supportingly, these signals were misinterpreted as bad behaviour and physical punishments were used by Mrs F and Anne’s grandparents. Anne’s grandparents labelled her behaviours as being a “bad influence” on siblings.

#### **Authoritarian and neglectful**

Authoritarian, neglectful parenting approaches were disclosed by 10% (n=2) of parents. These parents lacked insight into children’s developmental ability or needs. Mrs H unrealistically expected her three-month-old daughter to feed herself her bottle and self-settle. At 18 months old, she expected that her daughter to self-regulate her emotions (for example, stop a tantrum). Although Mrs H wanted to become closer to her child, she failed to make a positive connection because she was unable to understand her daughter’s attachment signals.

#### **Abusive and neglectful**

Abusive and neglectful parenting approaches were disclosed by 10% (n=2) of parents. These parents failed to meet children’s basic needs and used corporal punishment and verbal abuse. Mrs I expected her five-year-old to be responsible for tasks beyond her ability — cooking, washing dishes, and looking after younger siblings. Mrs I disclosed that in frustration she verbally and physically abused her daughter when she didn’t meet her expectations.

### **Discussion**

Transnational separation and reunion of parents and their children is multifactorial and complex. First-born children in this study were most vulnerable to being sent to China by their parents, typically during infancy. This finding is consistent with other studies (Bohr & Tse 2009; Kwong *et al.* 2009; Lee & Brann 2015).

Most families in this study originated from Fujian Province. This trend is also reported in America (Kwong & Yu 2017). One explanation for this may be that Fujian Province is one of the principal emigrant-sending Chinese provinces (Morooka 2009). However, it may simply be attributed to a tendency for migrants to settle in suburbs that are populated by families from similar cultural backgrounds.

Maternal disempowerment due to patriarchal influences was the dominant reason given by parents in this cohort for relinquishing children to relatives in China. This differs from international studies of transnational parent-child separations in Chinese migrant families, which point to pursuit of career and financial gain as a key reason for sending children back to China (Landolt & Wei Da 2005; Bohr & Tse 2009; Kwong *et al.* 2009; Bohr 2010; Lee & Brann 2015). Whilst other international studies include subjects without legal residential status in the new country, this study investigated a sample who were all legal Australian residents. One-third of