ORIGINAL ARTICLE

Perceived child behaviour problems, parenting stress, and marital satisfaction: comparison of new arrival and local parents of preschool children in Hong Kong

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Objective To compare parental perception of child behaviour problems, parenting stress, and marital satisfaction in new arrival and local parents.

Design Cross-sectional survey; semi-structured interview.

Setting Maternal and Child Health Centres, social service centres, preschools.

Participants Parents of preschool children, including new arrival parents and local parents.

Main outcome measures Child behaviour problems, parenting stress, and marital satisfaction.

Results After controlling for socio-economic factors, new arrival parents were more troubled by their children's behaviour problems and their parent-child interactions were more dysfunctional than those of local parents. There were no differences in parent-reported severity of child behaviour problems, parental distress, and marital satisfaction. New arrival parents reported difficulties in adapting to the new living environment and lack of social support.

Conclusions New arrival parents were more troubled by their children's behaviour, and their parent-child interactions were more dysfunctional than those of local parents. These might in part be related to their settlement difficulties. Parenting programmes should address their specific settlement needs.

Introduction

The Family Health Service of the Department of Health provides a population-based child health programme for children 0 to 5 years and their parents, comprising parenting, immunisation, and health and developmental surveillance. To better understand the needs of parents of different backgrounds, a series of studies on special-needs groups was conducted, one of which addressed families newly arrived from mainland China. An investigation into factors affecting the adaptation of these parents revealed that social support and self-efficacy were associated with positive adaptation outcomes.[1] The present study examined the specific parenting needs of new arrival parents in comparison to local parents.

According to the 2001 census, there were 31 797 children (16 568 boys and 15 229 girls) aged 5 years or below, with one or both parents being new arrivals, accounting for about 9% of the total number of children aged 5 years or under in Hong Kong.[2] From a public health perspective, an understanding of the needs of new arrival parents with young children is important for service planning.

In Hong Kong, new arrivals from China are referred to as "Persons from the Mainland of China having Resided in Hong Kong for less than 7 years" (PMRs). Specifically, PMRs are persons who "(i) were born in the mainland of China; (ii) were of Chinese nationality with place of domicile in Hong Kong; and (iii) have stayed in Hong Kong for less than seven years."[2] The median domestic household income of PMR families (HK$12 050) was lower than that of the whole population (HK$18 705). There were more PMRs (70%) with lower secondary education level or below than in the whole population (48%). Most PMRs were

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in elementary occupations (35%) and the service and shop/sales categories (31%),[2] indicating that they are socio-economically relatively disadvantaged.

Although there were local studies on PMR families, different criteria were used to define new arrivals in different studies. Only a few focused on pre-primary schoolchildren and few compared them with local families. Most used questionnaires with unknown psychometric properties.

On the subject of physical health, a survey revealed the immunisation cover for mainland-born preschool children was comparable to that of their local-born counterparts.[3] A study on new arrival children under 18 years found that 18.1% and 2.6% had blood lead levels of above 0.48 and 0.71 μmol/L respectively, when measured within 14 days of arrival in Hong Kong, but information on local children was unavailable for comparison.[4] The oral health of mainland-born preschool children was found to be poorer than that of the local-born.[5,6]

Regarding education, 27.2% of newly arrived preschool students were over-aged for their classes. About 50% were considered weak in English by their teachers, and around 10% were weak in either Chinese or Mathematics.[7]

As for social and emotional aspects explored using a locally developed questionnaire, PMR parents rated their preschool children more positively in personal and social competence than local parents, with no difference in common behaviour problems.[8] In another study using validated questionnaires, among participants in a programme for parents of preschool children, PMR parents reported higher pre-intervention child behaviour problem scores, but more child behaviour changes post-intervention than local parents.[9] However, the programme completion rate of PMR parents was lower than that of local parents.

The aim of the present study was to understand the specific parenting needs of PMR parents of preschool children in comparison to those of local parents, in terms of parenting stress, child behaviour problems, and marital satisfaction, using questionnaires with known psychometric properties. These variables were chosen because it was well-documented that parent-child interactions and the quality of parenting are affected by parents' life events. Moving to a new society is recognised as a stressful life event.[10] High levels of family stress can interfere with effective caregiving and exacerbate ineffective parenting,[11,12] which may in turn lead to child behaviour problems.[13] It is argued that stress encountered by couples in a new environment can adversely affect their marital relationship,[14] and that parental marital relationships also affect child behaviour.[15] We hypothesised that PMR status was associated with parenting stress, child behaviour problem, and marital relationships.

家長對學前兒童行為問題和親職壓力的觀感及婚姻滿意程度：新移民與本地家長之比較

目的 比較新移民家長和本地家長對兒童行為問題的觀感，他們的親職壓力以及對婚姻的滿意程度。

設計 橫斷面研究和半結構式面談。

安排 母嬰健康院、社會服務中心和學前教育機構。

參與者 學前兒童家長，包括新移民家長和香港本地家長。

主要結果測量 兒童行為問題、親職壓力及對婚姻滿意程度。

結果 控制社會經濟因素後，可見新移民家長比起本地家長，更受子女行為的困擾，與子女相處更困難。兩類家長匯報兒童行為的嚴重程度、家長的壓力以至對婚姻的滿意程度，則並無不同。新移民家長在適應新環境上有困難，而且缺乏社會支持。

結論 新移民家長更受子女行為問題的困擾，與子女相處更困難，適應新環境有困難可能是其中一個成因，所以親職教育計劃應當照顧到家長在這方面的具體需要。

Methods

Participants and procedures

The target population was families with at least one PMR parent with at least one child aged 3 to 6 years, living in Hong Kong. Participants were recruited through social service centres, preschools, and Maternal and Child Health Centres (MCHCs) between January and June 2004. Random sampling was not conducted, as there was no sampling frame; none of these agencies had a complete list of children from PMR families. Upon consent, parents were asked to complete a self-administered questionnaire in small groups, supervised by research assistants. A small sample of parents was also invited to participate in individual interviews, which were tape-recorded and transcribed verbatim. The Ethics Committee of the Department of Health approved this study.

Data on non-PMR parents from a previous community survey on parents of 4-year-old children attending MCHCs conducted in 2002[16] were used for comparison.

Measurement tools

Participants in both studies had to complete a questionnaire with the following sections:

1. Eyberg Child Behaviour Inventory (ECBI[17])—this was a 36-item multidimensional measure of parental perception of disruptive behaviour in children and incorporated two scores, the intensity score (problem severity) and the

problem score (the extent to which the parents find the behaviour troublesome). A validated Chinese version was available.[18] The reliability (Cronbach alpha) of the former was 0.95 and of the latter was 0.94.

2. Parenting Stress Index (PSI[13])—this was a 36-item questionnaire with three subscales, namely, parental distress (PD), parent-child dysfunctional interaction (PCDI), and difficult child (DC). The Chinese version was validated.[19] The reliability estimates for the total score and the three subscales were 0.92, 0.86, 0.82, and 0.86, respectively. In this study, only the first two subscales were used, as there was considerable overlap between the DC subscale and the ECBI.
3. Relationship Quality Index (RQI[20])—this was a six-item index of marital or relationship quality and satisfaction. The questionnaire has been used with Chinese parents in Hong Kong with satisfactory reliability estimates.[21]
4. Demographic information and access to parenting education.

A semi-structured interview guide with questions on adaptation, child well-being, and service needs was used in the individual interviews (Appendix).

Data analysis

For quantitative data, preliminary comparison between PMR and non-PMR participants was made using the independent *t* test. Multiple regression was used to examine differences between PMR and non-PMR participants for child behaviour problems, parenting stress, and marital satisfaction, while controlling for socio-economic variables.

The qualitative data were analysed by the second author using the constant comparative method. The third author independently analysed 12 randomly selected transcripts. The inter-rater agreement was around 90%.

Results

The sample

There were 261 PMR participants with complete data. To gauge the representativeness of the PMR sample, we compared the sample with the 2001 census. The present sample was similar to the census in terms of maternal age, age difference between spouses, family type, and mother's education. However, in the present sample, there was a higher proportion of boys (61%); in the 2001 census, 52% were boys. A higher proportion of households had monthly incomes of $19 999 or below (93% compared to 73% in the 2001 census). Furthermore, a lower proportion of spouses of PMR mothers were not in the work force (10%, compared to 15% in the 2001 census), and there was a lower proportion of working PMR mothers (13%, compared to 26% in the 2001 census). The latter was probably related to data collection procedures in the present study, whereby the researchers administered the questionnaires to the participants in person during office hours. The present PMR sample was thus more economically disadvantaged than those in the general population.

For the non-PMR sample, of the 942 participants with complete data, 753 had resided in Hong Kong for 7 years or more and were used as the comparison group.

The socio-economic characteristics of the PMR and non-PMR participants are shown in Table 1. Consistently the PMR sample was more socially disadvantaged than the non-PMR sample.

Differences in child behaviour problem, parenting stress, and marital satisfaction between PMR and non-PMR participants

Independent *t* tests indicated that the two samples differed significantly in terms of child behaviour problems (ECBI-problem) and parenting stress (PSI-PD and PSI-PCDI). The mean and 95% confidence interval scores, as well as the reliability estimates of the ECBI, PSI, and RQI scores of the two samples are shown in Table 2. However, the two samples differed significantly in a number of socio-economic characteristics known to be related to parenting stress, child behaviour, and marital relationship.[12,16] Five multiple regression analyses were performed to examine whether PMR status was associated with ECBI-intensity, ECBI-problem, PSI-PD, PSI-PCDI, and RQI, after controlling for a number of socio-economic variables. These were relationships of the participant and the target child (mother as participant vs other), parent's and child's age, father's and child's length of residence in Hong Kong, child's gender, availability of other carers (available vs non-available), parent's educational attainment (≤lower secondary vs ≥upper secondary), household income (≤HK$19 999 vs ≥HK$20 000), parent's work status, access to parenting education (frequently/sometimes vs never), and Comprehensive Social Security Assistance recipient status. Mother's length of residence in Hong Kong was excluded because of its high correlation with PMR status (r=0.82, P<0.001, n=1009). Including variables with bivariate correlations of 0.70 or above in the same analysis would have created the problem of multicollinearity.[22] After controlling for the aforementioned socio-economic variables as well as access to parenting education, only ECBI-problem and PSI-PCDI were associated with PMR status (Table 3).

TABLE 1. Comparison of socio-demographic variables in PMR* and non-PMR subjects

Variable	Mean (95% CI) or No. (%)		χ^2, *t*, P value
	PMR sample (n=261)	Non-PMR sample (n=753)	
Child's age (years)	4.3 (4.0-4.5)	4.2 (4.2-4.2)	*t*(1012)= –6.16, P<0.001
Child's length of residence in Hong Kong (years)	2.8 (2.7-3.0)	4.2 (4.1-4.2)	*t*(1011)=24.02, P<0.001
Mother's age (years)	33 (33-34)	35 (35-36)	*t*(1011)=5.56, P<0.001
Father's age (years)	42 (41-43)	39 (38-39)	*t*(996)= –7.06, P<0.001
Difference in age between the two parents (years)	8.7 (7.9-9.5)	3.4 (3.1-3.7)	*t*(996)= –14.80, P<0.001
Mother's length of residence in Hong Kong (years)	2.6 (2.4-2.9)	30.7 (30.0-31.4)	*t*(1007)=44.75, P<0.001
Father's length of residence in Hong Kong (years)	32.4 (30.5-34.3)	34.9 (34.3-35.5)	*t*(991)=3.11, P=0.002
Gender of target child			χ^2(1)=4.16, P=0.041
Boy	158 (61%)	401 (53%)	
Girl	103 (39%)	352 (47%)	
Relationship between participant and child†			χ^2(1)=23.37, P<0.001
Mother	259 (99.6%)	678 (91%)	
Father	1 (0.4%)	69 (9%)	
Family type‡			χ^2(2)=1.86, P=0.394
Nuclear family	182 (70%)	556 (74%)	
Extended family	72 (28%)	176 (24%)	
Lone parent family	5 (2%)	15 (2%)	
Marital status			χ^2(1)=0.18, P=0.672
Married/co-habitation	255 (98%)	732 (97%)	
Separated/divorced/widowed/never married	6 (2%)	21 (3%)	
Living arrangement§			χ^2(1)=2.045, P=0.153
Living with child	257 (98%)	720 (97%)	
Living with child only during weekends	4 (2%)	24 (3%)	
Other carers for child‖			χ^2(3)=115.93, P<0.001
Grandparents	79 (30%)	236 (31%)	
Relatives	24 (9%)	56 (7%)	
Domestic helper/paid childcare/others	9 (3%)	253 (34%)	
No other carer except parents	148 (57%)	208 (28%)	
Father's education‖			χ^2(1)=64.05, P<0.001
Lower secondary or below	161 (63%)	256 (34%)	
Upper secondary or above	95 (37%)	490 (66%)	
Mother's education‖			χ^2(1)=165.43, P<0.001
Lower secondary or below	187 (72%)	201 (27%)	
Upper secondary or above	74 (28%)	551 (73%)	
Father's employment status‖			χ^2(1)=14.04, P<0.001
In work force	228 (90%)	716 (96%)	
Not in work force	25 (10%)	28 (4%)	
Mother's employment status‖			χ^2(1)=128.07, P<0.001
In work force	34 (13%)	401 (53%)	
Not in work force	226 (87%)	350 (47%)	
Family income‖			χ^2(1)=162.14, P<0.001
≤HK$19 999	233 (92%)	350 (47%)	
≥HK$20 000	19 (8%)	399 (53%)	
CSSA** recipient status			χ^2(1)=21.42, P<0.001
On CSSA	28 (11%)	25 (3%)	
Not on CSSA	233 (89%)	727 (97%)	

TABLE 1. (Continued)

Variable	Mean (95% CI) or No. (%)		χ^2, *t*, P value
	PMR sample (n=261)	Non-PMR sample (n=753)	
Access to parenting education			$\chi^2(2)=19.74$, P<0.001
Never	109 (42%)	245 (33%)	
Sometimes	149 (57%)	447 (59%)	
Frequently	3 (1%)	61 (8%)	

* PMR refers to "Persons from the Mainland of China having Resided in Hong Kong for less than 7 years"

† The category "stepmother/others" was excluded because of the small number of expected counts. There was a participant from the PMR sample and six participants from the non-PMR sample belonging to this category

‡ The category "reconstituted families/others" was excluded because of the small number of expected counts. There were two participants from the PMR sample and six participants from the non-PMR sample belonging to this category

§ The category "not living together" was excluded because of small number of expected counts. There were nine participants from the non-PMR sample belonging to this category

‖ Some participants did not supply the information

** CSSA denotes Comprehensive Social Security Assistance

TABLE 2. Mean scores and reliability estimates of scales

Scale*	PMR† sample (n=261)			Non-PMR sample (n=753)			*t*, P value
	Mean	95% CI	Reliability (Cronbach alpha)	Mean	95% CI	Reliability (Cronbach alpha)	
ECBI-intensity	118.38	115.30-121.46	0.93	117.82	116.19-119.42	0.91	*t*(1012)= –0.33, P=0.738
ECBI-problem	11.90	10.70-13.10	0.95	7.00	6.46-7.47	0.92	*t*(1012)= –8.63, P<0.001
PSI-PD	37.51	36.56-38.45	0.84	33.78	33.20-34.32	0.86	*t*(1012) = –6.65, P<0.001
PSI-PCDI	30.50	29.69-31.31	0.78	26.78	26.39-27.21	0.81	*t*(1012) = –8.65, P<0.001
RQI	32.68	31.53-33.83	0.94	33.46	32.80-34.12	0.96	*t*(1007)=1.17, P=0.241

* ECBI denotes Eyberg Child Behaviour Inventory, PSI-PD Parenting Stress Index–parental distress, PSI-PCDI Parenting Stress Index–parent-child dysfunctional interaction, and RQI Relationship Quality Index

† PMR refers to "Persons from the Mainland of China having Resided in Hong Kong for less than 7 years"

Qualitative results

In terms of their adaptation to life in Hong Kong, some PMR participants reported that they encountered few problems (Table 4, 4.1); others reported great difficulties (4.2), claiming they felt very depressed and lonely, without the support of friends and relatives (4.3). Some of the stresses were related to living with in-laws (4.4) and the crowded living environment (4.5); this in turn led to difficulties in child management and parent-child relationship, causing even more stress.

Most of the PMR participants came to Hong Kong to be re-united with their husbands. Their descriptions of marital relationship were quite varied. Some were happy with their marriages (4.6), others managed to live harmoniously with their husbands (4.7), while some reported serious difficulties (4.8).

In terms of service provisions, most PMR participants indicated the need for more training courses to enhance their language and vocational skills (4.9, 4.10), as well as assistance in seeking employment (4.11).

Discussion

Our hypothesis on the association of PMR status with parenting stress and child behaviour problem was only partially supported. The PMR parents were more troubled by their children's behaviour problems and their parent-child interactions were more dysfunctional, compared to non-PMR parents, even after controlling for socio-economic differences. However, there were no differences in the perceived severity of child behaviour problems and degree of parental distress. This suggests that PMR parents' perception of child behaviour problems and difficulties in parent-child interaction cannot be explained solely by socio-economic disadvantage. One possible explanation is that some PMR parents were experiencing stress due to settlement issues and thus found the experience of child rearing more overwhelming.[23] A related explanation is the lack of social support among the PMR parents. Social support is known to be associated with immigrant adaptation,[10] including parenting and child behaviour problems.[1,24] Another possible explanation, as revealed by the qualitative data, is that the PMR parents were worried that their children's behaviour might cause nuisance to other household members or neighbours, due to the crowded living environment in Hong Kong. Consequently, they tended to be very vigilant about their children's behaviour, which might also cause some tension in the parent-child relationship.

TABLE 3. Regression results*

	ECBI-intensity	ECBI-problem	PSI-PD	PSI-PCDI	Marital satisfaction
F value	F(16, 960)=2.88, P<0.001, adjusted R^2=0.03	F(16, 960)=5.03, P<0.001, adjusted R^2=0.06	F(16, 960)=5.35, P<0.001, adjusted R^2=0.07	F(16, 960)=9.28, P<0.001, adjusted R^2=0.12	F(16, 959)=3.55, P<0.001, adjusted R^2=0.04
PMR† status	P=0.707	β=0.21, t=4.73, P<0.001	P=0.133	β=0.10, t=2.29, P=0.022	P=0.508
Relationship between participant and child	P=0.061	P=0.094	P=0.139	P=0.806	P=0.299
Father's age	β= –0.13, t= –2.53, P=0.012	P=0.112	P=0.903	P=0.704	P=0.216
Mother's age	P=0.546	P=0.556	P=0.213	P=0.731	P=0.407
Child's age	P=0.094	P=0.701	P=0.291	P=0.168	P=0.057
Father's length of residence in Hong Kong	β=0.09, t=2.41, P=0.016	P=0.561	P=0.701	P=0.700	P=0.957
Child's length of residence in Hong Kong	P=0.494	P=0.673	P=0.726	P=0.221	P=0.834
Sex of target child	β= –0.12, t= –3.61, P<0.001	P=0.148	P=0.679	P=0.154	P=0.938
Other carers for child	P=0.771	P=0.410	P=0.143	P=0.847	P=0.295
Father's education	P=0.110	P=0.286	P=0.173	β= –0.08, t= –2.16, P=0.031	β=0.14, t=3.69, P<0.001
Mother's education	P=0.571	P=0.132	β= –0.10, t= –2.43, P=0.015	β= –0.12, t= –3.08, P=0.002	P=0.541
Family income	P=0.917	P=0.739	P=0.091	β= –0.12, t= –2.89, P=0.004	P=0.122
Father's employment status	P=0.557	P=0.289	P=0.611	P=0.675	P=0.100
Mother's employment status	P=0.603	P=0.788	P=0.540	P=0.415	β= –0.09, t= –2.28, P=0.023
Access to parenting education	P=0.121	P=0.418	P=0.532	P=0.316	P=0.516
CSSA‡ recipient status	P=0.697	P=0.965	P=0.595	P=0.303	P=0.062

* **ECBI denotes Eyberg Child Behaviour Inventory, PSI-PD Parenting Stress Index–parental distress, and PSI-PCDI Parenting Stress Index–parent-child dysfunctional interaction**

† **PMR refers to "Persons from the Mainland of China having Resided in Hong Kong for less than 7 years"**

‡ **CSSA denotes Comprehensive Social Security Assistance**

TABLE 4. Quotes from participant interviews

	Themes and quotes	Index
4.1	It's OK…I thought the feeling was quite good…every aspect…The family members are OK. ... (I) could adapt.	(AQ79-002: 7-10)
4.2	(I) found it very hard to adapt, yes…That is, when I went out, my mood was very bad.	(L41-014: 5-6)
4.3	When (I) first came here, (I) could not adapt, because I had no relatives, no friends. (I) felt very lonely. There's no one to talk to.	(AE008-001: 10)
4.4	Unhappy, I am unhappy in Hong Kong. That is, children are noisy and mother (in-law) likes quietness. And I am not happy. Mother (in-law) tells you off, like (you) cannot manage your child.	(X85-006: 35)
4.5	Because we live in rooms with partition boards, when children…are loud sometimes, this will disturb others. People will say things, and so (I) beat them and tell them off frequently. Therefore I am always unhappy.	(AD85-005: 14)
4.6	If there's someone who says that my husband is not good, I won't marry him. However, up to now, I have not heard anyone say (he is) not good...That is, he is kind-hearted and is very nice to me. (He) really loves me very very much from his heart.	(Q91-002: 34)
4.7	It's all right. Not too many arguments (with my husband).	(E89-003: 32)
4.8	(I) have been very angry. I tried to tolerate him (husband) all the time. I don't want others to say that as soon as I arrive, I divorce. This is too much. (I) want to maintain (the marriage) but the way he (husband) is, I have no freedom, no personal freedom. This is very hard.	(I15-006: 61)
4.9	Training...I'd really want to attend…There is none here, that is, New Territories…Travelling is expensive…(You) read the newspaper and all (jobs require you to) know typing, and computer (operation).	(J68-006: 43)
4.10	Could provide more courses,…for example, English.	(Q91-002: 40)
4.11	It's difficult to find jobs…Could provide more (jobs) like cleaning…home help…jobs that we are capable of doing.	(S89-001: 41)

The hypothesis on the association between PMR status and marital relationship was not supported. There was no significant difference in marital satisfaction between PMR and non-PMR participants. This is contradictory to the stereotypical image depicted by the media, in which families with PMR wives experience serious marital problems. This is consistent with other local studies[25,26] that the marital relationship of different couples are not homogeneous. Some couples are happily married, while others are experiencing varying degrees of difficulties.

Our findings may have implications for service planning and provisions. Services designed to target socio-economically disadvantaged parents appear unable to adequately meet the specific needs of new arrival parents. There should be components targeting their specific needs in terms of parenting in a new environment. For example, components to enhance self-efficacy (acquisition of language and culturally appropriate social skills; building up their social network) could be incorporated into parenting programmes for new arrivals to facilitate adaptation.[1,14]

Limitations

Unlike the non-PMR sample where the MCHC register could be used as a sampling frame, the PMR sample was only a convenience sample, as there was no sampling frame for participant selection. This might have resulted in selection bias. Furthermore, due to logistic difficulties, it was not possible to calculate the participation rate for the PMR sample.

The present sample consisted mainly of PMR participants from socio-economically disadvantaged backgrounds. We were not able to access PMR families who were more affluent. However, the census indicates that in general, PMR families are more disadvantaged than the non-PMR families. The present results can therefore be regarded as relevant to most PMR families.

Conclusions

The present study fills a gap in the local research on parenting needs of new arrival parents of preschool children by comparing them with their local counterparts, using questionnaires with satisfactory psychometric properties. Although new arrival families are more socio-economically disadvantaged than local families, they are not worse off in all aspects of family life. However, new arrival parents were more troubled by their children's behaviour and their parent-child interactions were more dysfunctional than those of local parents, even after controlling for socio-economic disadvantage. These factors should be taken into consideration in the planning and delivery of services to new arrival parents.

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APPENDIX. Interview guide

1	How long have you been in Hong Kong?
2	What were your reasons for moving to Hong Kong?
3	How was life when you first arrived in Hong Kong? What about now?
4	How do you compare Hong Kong to mainland China?
	4.1 What are the things you like about Hong Kong?
	4.2 What are the things you don't like about Hong Kong?
5	What are the things that make you happy/satisfied in Hong Kong?
6	What are the things that make you unhappy/worried in Hong Kong?
7	What difficulties did you face?
8	How well do you think your child is doing at present?
	8.1 Physical
	8.2 Cognitive
	8.3 Social-emotional
9	What are your concerns about your child?
10	What are the differences in ways of bringing up children in Hong Kong and mainland China?
11	What are your future plans/expectations for your child?
12	What do you think about the services for children in Hong Kong (eg health services, preschool education)?
13	How well is your family doing?
14	What family concerns do you have?
15	What more can the society do to improve the situation of immigrants?