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<th>Perspectives on family health, happiness and harmony (3H) among Hong Kong Chinese people: a qualitative study</th>
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Abstract

Background: Family harmony, an important Confucian ideal in Chinese society is believed to determine family happiness and therefore health, but is this stereotype accurate?

Methods: A qualitative study of 41 Chinese family members living in Hong Kong. Individual recorded interviews thematically analyzed to describe perceived interactions between harmony, happiness and health.

Results: Family harmony comprised four components: (1) communication, (2) mutual respect, (3) lack of conflict, and (4) family time. Notably “Gou Tong” (in Cantonese 溝通)–opportunity and willingness to spend time together- requiring good interpersonal communication, emphasized by female respondents. Lack of conflict was emphasized, whilst diverse values, parenting styles and financial difficulties were common causes of conflict. Respect required reciprocity. Family happiness comprised four elements: family harmony, an important pre-requisite; mutual caring and supportive orientation; sense of security emphasizing financial security in middle-class versus sense of togetherness in lower social class groups, and; contentment. Healthy families were harmonious; “typical” (children/two-parent/two-grandparent); happy; caring and respectful, with; individual health and healthy behaviours.

Conclusions: Family harmony, happiness and health are interrelated and built on a communicative, respectful, caring and contented set of attitudes, and in particular spending family time. Harmony is apparently a core element of good family functioning.

(Word count: 200)

Key words: Chinese, family function, harmony, happiness, health
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Background

Domestic interpersonal disharmony exerts significant coping demand detrimentally affecting family wellbeing and health. Children living in disharmonious home environments demonstrate a spectrum of problems, including behavioural difficulties, impaired academic performance, and antisocial behaviour in adolescence (1), resulting in increased risk of poorer subsequent adult relationships. Additionally, under circumstances of prolonged domestic disharmony and distress, abusive behaviour, suicide (2-4) and family-murders/suicides (filicide-suicides), though rare, are more likely (5). Hong Kong and Taiwan have experienced a spate of filicide-suicides over the past 5 years (6). In contrast, harmonious family environments are presumed to provide supportive and nurturing contexts that facilitate communication, problem-solving and wherein expressions of respect and love for family members are prominent. However, there is little research on what contributes to harmonious home environments, or how individual and family wellbeing relates to such.

In response to an increasing number of family-related problems in Hong Kong we consider contributors to family harmony and the relationship of family harmony to health and happiness. Surprisingly little work has been published on the interaction among these three elements. There is a degree of “self-evidence” to their mutuality: health or wellness is generally associated with better interpersonal relationships and higher levels of social support. Epidemiologically, greater social support and better social networks are associated with lower all-cause mortality, and in chronically ill individuals may protect
against recurrent illness events (7), though causal processes are complex (7,8). Greater social support is also generally associated with better mental health and higher levels of happiness, though these relationships are probably causally bi-directional (8).

Within Chinese societies, such as those of Hong Kong, Taiwan, Singapore and Mainland China, and among Chinese diaspora worldwide, family harmony is a Confucian ideal that equates with happiness (9). However, relentless urbanization and cultural changes from Westernization place traditional cultural values under significant strain everywhere. Durkheim’s early studies of suicide identified social change as a contributing factor towards suicide (10), and the breakdown of established patterns of social function and roles during the decade following the collapse of the former Soviet Union demonstrated how profoundly such changes can impact on a range of health outcome indicators (though data-quality issues may have amplified these apparent effects) (11,12).

Many measures of family and community function actually assess levels of dysfunction, symptomatology and social morbidity, and many are derived from or linked to problem definitions given in the Diagnostic and Statistical Manuals of Mental Disorders of the American Psychiatric Association (13). Moreover, most of these are measures of the individual level. Measures of positive dimensions of social and family systems are less common. A literature search revealed no established measures of family harmony, and nothing applicable within Chinese community contexts. Within the Chinese community of Hong Kong, we therefore set out to examine what people perceived as reflecting family harmony, health and happiness. We first performed a qualitative study to gather
information suitable to enable us to begin assembling an instrument to measure this neglected dimension. This study was part of a population-based project “Family: A Jockey Club Initiative for a Harmonious Society” under the collaboration between the Hong Kong Jockey Club Charities trust and the School of Public Health, The University of Hong Kong. This project aims to identify the sources of family problems, develop appropriate preventive interventions to promote family health, happiness, and harmony (http://www.family.org.hk/). As an initial phase of the project, two qualitative studies were carried out to explore how the local community defined the concepts of family health, happiness, and harmony. One of the qualitative studies focused on the views from community leaders and advocacy groups (14); the one reported here focused on the perspectives from lay individuals.

Study aim

The purpose of this study was to identify initial item domains and gather suggestions for appropriate content to measure family health, happiness and harmony from members of the general population of Hong Kong. A qualitative research approach was adopted.

Methods

Individual face-to-face interviews were used to explore Hong Kong Chinese people's view on family health, happiness, and harmony. A series of open-ended questions were used as an interviewing guide (15-18) to initiate discussion.

Study sample:
Eligible participants were Cantonese-speaking Hong Kong Chinese residents. Participants were recruited from two sources. One was through randomly generated telephone numbers. From each household, one member was purposively selected to participate in a face-to-face interview. The aim of the purposive sampling was to maximize variation on Chinese views of what determines family health, happiness and harmony. Hence, participants were selected based on age, gender, occupation, education, household size, and housing district. We also recruited individuals through the family service centres provided by non-government organizations in order to capture the views from those family service users. Sample size was determined by data saturation (no new material generated over five consecutive interviews). In this study, data saturation was achieved with 41 participants.

Study procedures:

For the general population, the sample was drawn by random number dialing. Within households, individuals were selected using purposive sampling. For family service users, potential participants were identified from Sing Kung Hui Welfare Council, Caritas Integrated Family Service Centres, and Hong Kong Family Welfare Society. To all contacted individuals who met the eligibility criteria, the research assistant explained the purpose of the study and nature of participation. We obtained written consent from the participants. For the general population, when the potential subject agreed to participate, the research assistant invited the participant to come to either the School of Public Health at The University of Hong Kong or a community centre near the participant’s home. For the family service users, the interviews were conducted at the
service centres. Parental consent was sought before we approached respondents aged under 18 years. The interviews were carried out by a trained research assistant or one of the investigators. The interviews were semi-structured enabling participants to freely express their views. Each interview lasted for 30 to 45 minutes. All of the interviews were tape-recorded.

Data analysis:

NVIVO is a software package specifically designed to aid the process of qualitative analysis and was used to facilitate the analytic process. NVIVO enables the organization of phrases and conversational segments into thematically related clusters and segments and the easy creation and assimilation of new or similar themes. All tape-recorded interviews were transcribed verbatim. Transcripts were then analyzed and coded using thematic analysis. Data were subjected to constant comparative analyses (19-20). This involved comparing responses across individuals to determine the core categories. The analytic process was based on immersion in the data and repeated sorting, coding, and comparison. Each interview was examined line by line by one of the team members and all passages pertaining to family functioning were coded. The responses were open-coded, that is, the examination of minute sections of text made up of individual words, phrases, and sentences, resulting in the formation of code categories. Every category was compared with every other category to ensure that they were mutually exclusive, as well as to see how they clustered or connected. Categories were clustered to form broader themes. After systematic comparisons of the categories were made, properties and dimensions for the studied concepts were developed from the interview data. Moreover,
the data were simultaneously and independently coded by a research assistant to increase
the validity of the constructs so derived. Disputes were resolved by repeated discussion
and re-coding and outstanding coding disputes were simultaneously translated into
English and examined by a third party. Otherwise, all analyses were done in the original
Cantonese.

Results

Participants were aged 7 to 90 years; most were female (61%) and had at least
secondary education (83%). Three of the 41 participants were aged under 18 years. Of the
38 adult participants, seventeen of them were married (45%). Current household size
ranged from 1 to 6 members; sixteen participants were from three-person households.
Sixteen participants were employed full-time; six were currently unemployed and six
were students. The majority (85%) of the participants had been living in Hong Kong for
more than 7 years; twenty-two of the participants were born in Hong Kong. Ten
participants had monthly household incomes of less than HK$10,000; twelve had
household incomes between HK $10,001 to 20,000; twelve of them had household
income of HK $30,000 or more (US$1 = HK$7.80). Eleven of the participants currently
received comprehensive social security assistance as they had no other income (Table 1).

The thematic analyses suggested that the three themes of family harmony, family
happiness, and healthy family are interdependent concepts, with family harmony being a
core influence on family happiness and health (Figure 1).
Family harmony

When asked about factors that contribute to family harmony, responses clustered in to four identifiable components: (1) communication, (2) mutual respect, (3) lack of conflict, and (4) having time for family.

Communication. The opportunity and willingness for family members to connect with each other (“Gou tong” [in Cantonese 溝通]) was perceived as an essential element in achieving family harmony. Participants viewed verbal expression among family members as a primary condition for Gou tong:

“… family members would proactively have verbal exchange with each others.”
(Case 8, age 26, female, single)

“Family harmony means we have several times a week to Guo tong. … we are able to talk to each other. When we have dinner together, everyone would talk to each other, rather than simply finishing the dinner.” (Case 33, age 43, female, married)

“… harmony is being able to talk to each other.” (Case 40, age 90, male, married)

“Guo tong is essential in establishing a harmonious family.” (Case 7, age 43, male, single).

While communication was perceived as a key factor in maintaining family harmony, some participants expressed difficulties to maintain Gou tong within their
family. Lack of time was commonly identified as a barrier to achieving Gou tong in the family:

“My husband and I seldom have any Gou tong because we hardly spend time together.” (Case 29, age 58, female, married)

“Although we are living in the same flat, we actually have very little Gou tong. … I get up in the morning and get ready to go to work. When I come home after work, my mum has usually gone to bed. So we seldom have any Gou tong.” (Case 5, age 30, female, single)

“The children usually talk to their mum. …. I work long hours. I really don’t have much time for the family.” (Case 36, age 47, male, married)

Another common barrier, particularly for intergeneration communication within the family was lack of common interest, expressed mainly by younger respondents:

“I don’t talk to my parents because they won’t understand. My mum has been a housewife for 20 years and she doesn’t have any clue about outside world. If I talk to my dad about problems at work, he would simply say, “That’s life”…..I think my mum tries to find ways to have Gou tong with me. But I am not interested to hear about prices in the market. I do big business. I have no time for that.” (Case 8, age 26, female, single).

“I tend to talk to my sister because she is close to my age. It’s difficult to have conversations with my parents. I seldom talk at home. … My younger brother is
at least 10 years younger than me. The age discrepancy creates the generation gap.” (Case 5, age 30, female, single).

Lack of conflict. While maintaining an open communication among family members is important, lack of family conflict was also identified as an indispensible factor in maintaining a harmonious family:

“A harmonious family means lack of conflict among family members.” (Case 19, age 54, female, married)

“There is no conflict or fight in the family.” (Case 25, age 44, female, divorced)

Several factors were commonly identified as contributing towards family conflict: parenting style, diverse values, different lifestyles, and financial difficulties. Married couples with diverse parenting styles often viewed such diversity as a major source of spousal conflict:

“(Conflicts) are usually related to the daughter. We have different parenting style.” (Case 28, age 33, male, married)

“We had different views on parenting. That created a lot of family disputes.” (Case 12, age 46, female, divorced)

“(Conflicts) are usually related to the children. … about how to parenting them … (I) tend to be very concerned about (my kids). (My husband) would criticize me. That creates a lot of diverse opinions.” (Case 37, age 47, female, married)
Different lifestyles and diverse life values were identified as resulting in family conflict:

“(The disputes) are often related to living habits. For example, if I had to go to bed, he chatted on the phone loudly and woke me up. Then we had a fight. … Or my mum would tell my dad off for not hanging up the laundry or not washing the dishes after the dinner. It’s all tedious things.” (Case 13, age 29, female, single).

“We argue because we have different views. It’s probably due to different religious beliefs. We always have fights when we talk about religious matters.” (Case 18, age 53, female, married)

“Hmm … we (the parent-in-laws) tried to show that we care about them. But they feel that we don’t respect their privacy.” (Case 4, age 74, male, married)

Financial matters usually associated with monetary difficulties were often cited, particularly as a common source of family conflict among respondents with lower socio-economic status.

“For example, we go shopping for the baby. I don’t want to spend too much money on baby clothing. But (my wife) won’t care about the price and simply buy whatever she likes. It’s really annoying. Sometimes, I get really upset and tell her off.” (Case 9, age 35, male, married)

“My sister is the only breadwinner and she is still paying off her debts for her studentship. Therefore, we have a lot of disputes related to financial issues…For example, my family would tell me off for wasting money on stationery. But they
don’t understand those are necessities for my study…My mum always insists on spending more money on food to ensure that we eat healthily, but my dad thinks this is a waste of money. That creates conflict too.” (Case 2, age 18, female, single)

“ My son often beats me physically. He asked me for money. If I don’t have any money, he would beat me up.” (Case 39, age 74, female, widowed)

“There is no income. We are facing financial hardship every month. Of course, we have a lot of conflicts.” (Case 14, age 39, male, divorced)

**Mutual respect.** For some participants, mutual respect was another key element in cultivating a harmonious family. Mutual respect was established through reciprocity, respecting diverse values, and being considerate.

“In a harmonious family, family members need to tolerate and consider other members.” (Case 29, age 58, female, married.)

“We have to respect each other…And we have to accept others’ views.” (Case 9, age 35, male, married.)

“Not insisting on holding a strong view is a key point to maintain a family harmony. My husband also shares the same belief. He always said that we shouldn’t be too stubborn…Therefore, when we had a disagreement or conflict, each of us would stand back and take a look at the situation calmly. In this way, we manage to resolve many issues.” (Case 41, age 38, female, married)
Having family time. Participants, predominantly females, perceived that making an effort to spend time with the family contributes to a harmonious family. Particularly, they emphasized the sense of togetherness.

“A harmonious family means we would spend time with each other. For example, we go out together, have a vacation, or go out for dinner.” (Case 16, age 49, female, married)

“It means we give time for our family. That is, we provide more opportunities for the family being together. It’s very important that we treasure having the time together.” (Case 16, age 49, female, married)

“It’s having time together with the whole family, such as having the whole family to go out for dinner and talk to each other. It seems very simple, but it’s an important element to maintain the family harmony.” (Case 5, age 30, female, single)

Family happiness

Family happiness was influenced by four elements: (1) family harmony, (2) caring and supportive attitude and behaviours, (3) sense of security versus sense of togetherness, and (4) contentment.

Family harmony. The assumption of most participants was that family harmony is a prerequisite for, or in some cases synonymous with family happiness: family happiness was perceived as an emergent property of family harmony.
“I think happy family is a higher level concept. A harmonious family will bring family happiness…Family happiness includes an element of family harmony.”
(Case 8, age 26, female, single)

“If the family is harmonious and has no disputes, it would be a happy family.”
(Case 26, age 32, female, married)

“Everyone gets along well…living in harmony…that would be a happy family.”
(Case 4, age 74, male, married)

Caring and supportive orientation. For some participants, expressing care and being supportive were important in establishing a happy family. Similar to mutual respect, reciprocity was emphasized in the act of caring and being supportive.

“There must be a mutual respect, mutual love and care.”(Case 36, age 47, male, married)

“A happy family must have an element of true caring…You have to care about your husband and kids. You need to express your care to them. For example, you need to ask them, ‘How was your day? How were things at school?’” (Case 8, age 26, female, single)

“Every family member needs to care and help each other.” (Case 15, age 50, male, married)
Sense of security versus sense of togetherness. As with harmony, financial security, a stable income sufficient to meet basic needs, was a major contributing factor to maintain family happiness, emphasized by middle class participants.

“…being able to support family’s basic needs such as providing food and a comfortable home” (Case 3, age 39, male, married)

“A happy family means no worry about not able to meet the basic needs such as food. You can eat whatever you like…” (Case 18, age 53, female, married)

“A happy family must have a good financial condition. If a family always has to worry about money, it won’t be a happy family…for example, the parents would feel really bad not able to meet their children’s needs. Children would compare with their peers. This is normal. We are human beings and we always compare with our peers. If I cannot meet my kids’ needs, it would affect their self-esteem.” (Case 7, age 43, male, single)

“A happy family means…you have a stable job.” (Case 37, age 47, female, married)

In contrast, unlike middle class people who have more career opportunities and are likely salaried, participants from low social class, many of whom are hourly-paid must commit more time to their jobs, for at most a marginally higher income, and particularly those receiving CSSA, emphasized the importance togetherness for maintaining a happy family. As upward mobility is difficult and having a higher income is not possible, having family time and opportunities for “gou tong” was most important to enhance the sense of togetherness.
“Happy family means being able to spend time with the children in the evening. For example, being able to have dinner together or simply just spend time at home.” (Case 29, age 58, female, married)

“Family members have time together. And we can gou tong.” (Case 28, age 33, male, married)

“We can talk to each other and share our happiness.” (Case 27, age 38, female, widowed)

**Contentment.** Being at ease with the situation was a way to attain family happiness. The narrative data showed that participants held a similar view of contentment parallel to a popular Chinese idiomatic phrase “chih tsu ch’ang lo” [知足常樂]: self-contentment brings constant happiness.

“Although we don’t have a big house, fancy clothes, or expensive food, we feel that we have enough. Therefore, we are happy…I am easy and I know that I have enough. This is happiness.” (Case 1, age 52, female, married)

“We lower our expectation. Therefore, we are happy.” (Case 11, age 50, male, married)

“It’s difficult to achieve happiness. I think it’s more appropriate to describe it as a sense of contentment. I feel satisfied with my situation and therefore I am contented.” (Case 7, age 43, male, single)
Healthy family

Six elements were perceived to contribute to a healthy family: (1) family harmony, (2) being a “typical” family, (3) being happy, (4) caring and respect, and (5) being healthy.

Family harmony. Once more family harmony was perceived as a prerequisite, this time for a healthy family. Participants emphasized that a harmonious family with no conflict is essential for healthy family function.

“A healthy family means everyone lives in a harmonious situation. There is no dispute in the family.” (Case 9, age 35, male, married)

“A healthy family is a harmonious family. Apart from a harmonious relationship between the spouses, children also need to have a harmonious relationship.

Family disputes are normal. It happens in every family. The most important thing is being able to put it behind after the fights and continue to maintain a harmonious relationship” (Case 1, age 52, female, married)

“I think my family was healthier when I was a child. My parents had less fights. We were able to spend time with each other on Sunday. I studied at a half-day school. We used to go out and play after school. We had a lot of time together. That’s why it was the healthiest.” (Case 14, age 39, male, divorced)

“A healthy family seldom has any disputes and has a harmonious relationship. My husband and I seldom have fights.” (Case 41, age 38, female, married)
Being a “typical” family. Another perceived prerequisite for a healthy family was to have a typical, traditional nuclear family structure including parents and children, though some participants emphasized the extended-nuclear family of three-generations by including grandparents. Therefore, participants from a broken family tended to perceive their family as unhealthy even though they felt their family may be more harmonious.

“A healthy family must consist of a mother, a father, grandparents, and children. This is the healthiest family. For example… my daughter would take a look at the photo album and would point to her father, grandparents, and aunts. It was painful for me to watch her. It’s not right. How could I say this is a healthy family?” (Case 21, age 33, female, divorced)

“A healthy family means a complete family. A broken family would be considered as an incomplete family.” (Case 7, age 43, male, single)

“Both my daughter and me want a normal family… my daughter wants her parents, both dad and mum… We don’t need to be wealthy. We just want a stable environment.” (Case 27, age 38, female, widowed)

“When I was still a child, my dad and my mum were still together. My mum would take me to school. My parents and I went out for dim sum on Sunday. We would go to the park. To me, that was a healthy family.” (Case 5, age 30, female, single)
Being happy. For some participants, having a happy family was also a factor in achieving a healthy family, reflecting healthy family could be the highest-order concept of the three family concepts.

“When we see each other and feel very happy. That is the healthiest state in the family.” (Case 9, age 35, male, married)

“We are all very happy.” (Case 36, age 47, female, married)

“A healthy family means…happy.” (Case 37, age 47, female, married)

Caring and respect. Again, as with family harmony and happiness, expressing concern and mutual respect were considered important elements to maintaining a healthy family. Additionally, sharing responsibility was perceived as an expression of concern for or about the family.

“(Family members) need to show their concern about other members.” (Case 8, age 26, female, single)

“We (Family members) need to show our respect to each other.” (Case 9, age 35, male, married)

“There should be a mutual respect, caring and loving.” (Case 36, age 47, male, married)

“Regardless whether the wife has a job or not, the husband shouldn’t act like a king when he’s at home…The husband needs to share the responsibility to do the housework and help the children with their homework.” (Case 23, age 50, female, divorced)
Being healthy. While the narrative data revealed that healthy family was primarily related to the function of the family as a whole, the health condition of each individual family member was also seen to influence the family health. Being healthy and no cigarette smoking and alcohol consumption were perceived as the determinants of the health condition among family members.

“A healthy family means no one in the family smokes or drinks.” (Case 39, age 74, female, widowed)

“A healthy family also means family members are physically healthy.” (Case 41, age 38, female, married)

“No family member drinks or smokes.” (Case 30, age 7, female, single)

“A healthy family means family members are not suffering from illness or pain.” (Case 2, age 18, female, single)

Discussion

We asked Hong Kong Chinese people about their concepts of family harmony, family happiness, and family health. Their responses suggest that family harmony appears to be a core element of family functioning, uniquely contributing towards family happiness and health. Without harmony, it was not seen as possible to have a happy and healthy family. This is consistent with the strong emphasis and value placed on harmony within Chinese culture (21,22). Previous studies on relationship harmony focused on the level of harmony in dyadic relationships (21,23), whereas this study examined the key contributors to family harmony. Respondents suggested that family harmony requires
four components: communication, having time together as a family, mutual respect, and lack of conflict. Conflict, as expected, was a detrimental factor for, or the converse of family harmony. In contrast, communication, with an emphasis on being able to connect among family members (“Gou tong”) through family time and direct verbal expression, was considered to be important in achieving family harmony. When we interviewed community leaders for their views they also identified lack of conflict and effective communication as essential elements for family harmony (14). Elsewhere connectedness and exchange were identified as important components of relationships among Chinese college students (24). This is in contrast to the popular conception of Chinese communication stereotypically characterized by implicit communication and listening-centredness (24). Implicit communication refers to a communication style which is contained, reserved, implicit and indirect (24). This style of communication was thought to enable individuals to negotiate meanings with others whilst preserving existing relationships without disrupting group harmony (25). However, our findings suggest that this is not a preferred family communication style within Hong Kong’s Chinese community. Perhaps exposure to social modernization, urban living and Western media influences have encouraged more direct forms of verbal communication or perhaps contemporary urban living has required the evolution of more explicit forms of communication. However, some of our participants described their inability to engage in direct, verbal communication with family members due to a sense of uneasiness about initiating conversations with their family members. This possibly reflects a conflict between traditional beliefs and the realities of day-to-day behaviour in family communication. Traditional Chinese values place a strong emphasis on filial piety and
righteousness in which family relations are structured hierarchically based on age, generation, and gender. In contrast to family structures based on equal status, family structure based on hierarchical order discourages explicit, direct communication and expects family members to know others’ feelings without direct enquiry (22). However, hierarchical systems may also demand unconditional respect from lower to upper members of the hierarchy, which may not be reciprocated, and power is disproportionately represented in upper echelons, with fear, threats, shame and loss of face often used as a means to control lower-ranking members. These processes can lead to significant resentment in lower ranking groups. It may also be the case that some persons have not learned the verbal skills needed for more direct but non-confrontational communication. Hence, to avoid stressful exchanges that are difficult to control, some individuals prefer to remain unforthcoming. The evolution and roles of direct communication in relationship harmony needs further exploration.

Medium-income families strongly emphasized the importance of employment and an adequate income to meet family needs, and conflicts over spending habits were clearly apparent. Considerable stress arises from financial constraints, sometimes as a barrier to social participation, sometimes to aspirations, particularly among children and teens. Many parents felt failures in providing for their family. Financial constraints were also cited as a source of conflict in lower income families but they differed in that there was less emphasis on income as a necessity for happiness, unlike the middle-income groups, and a focus on interactions as a source of happiness instead of money, when the latter is limited.
A number of elements indicate that reciprocal relationships are the foundation of good intra-family relations. For example, communication, respect, spending time with family, and being supportive were expected to be reciprocated in family interaction. The complementary interaction among family members was highlighted in the narrative data. This corresponds to Fiske’s relational model which proposes that the discordance in the desired model of interactions among family members may result in disharmony and unhappiness (26).

A traditional three-generation family remains the stereotype of the healthy family. This is not surprising as the government and media have been promoting traditional three-generation family structures within Chinese societies in China Mainland, Hong Kong and Singapore. However, this is primarily to help care for the elderly and reduce government expenditure thereon. While this stereotype might induce further stress in broken families, there seems to be an underlying element of unfulfilled expectations once more. The healthy three-generation family stereotype, while idealized, is somewhat weakened by reports of intergenerational discord, again, frequently over unmet expectations for role performance (husbands not helping with housework, children not showing expected respect, in-laws interfering in parenting) which are not unique to Hong Kong or Chinese families.

The concepts of family harmony, happiness, and health, according to our respondents, appeared interrelated and underpinned by the latent concept of contentment. Respondents suggested that family harmony was the foundation for achieving a happy and healthy family. Secondly, several common factors appeared in two of the three concepts: shared family time was an important factor in both family harmony and
happiness; caring for family health and happiness; respect influences family harmony and health, while financial security was important for harmony and happiness. However, even where income was low, happiness was possible if contentment prevailed. These findings suggest a single hierarchical construct of family relationship comprising multiple dimensions within this Chinese culture. Future studies developing and testing the psychometric properties of these three family concepts are clearly needed.

In summary, this study offers insights into how Hong Kong Chinese people conceptualize and inter-relate family harmony, happiness, and health. Such information is a crucial first step to guide future studies that develop measurements of family functioning. On a methodological note, we only interviewed one or two members from each family being recruited in the study. Therefore, we were unable to compare the views among group members from each family. Moreover, observational methods need to be developed to confirm these findings. It would therefore be worthwhile for future studies to explore the possible effect of the complementary family interaction in family harmony, happiness and health.

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References


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* CSSA: Comprehensive social security assistance
Figure 1. Conceptual model for concepts of family harmony, happiness, and health