This factsheet is intended for professionals, students and members of the Chinese and Vietnamese community in Britain. Much of the information will be useful for mental health service users and carers.

Introduction

Background

Chinese

Vietnamese

Challenges

Copyright note for Mind factsheets:
Both individuals and organisations are welcome to print and

Brian’s story
I had to attend a medical interview to see if I was fit to work. There was no consultation of my medical notes. After the interview I felt worthless, stressed, humiliated, tearful, but luckily had my wife as support.

Julia’s story
Pressures at work started to build up and I had to take time off with stress. After three months the stress turned into depression.
General health
Isolation
Employment
Language barriers
Lack of information
Problems faced by women
Mental health of Chinese and Vietnamese people in Britain
Discrimination
Social stigma
Types of mental health problems
Carers of people with mental health problems
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Useful contacts

Note on language: The terminology of psychiatric diagnosis used in this factsheet reflects the language of the sources referred to. The use of stress turned into depression.
such language in no way implies Mind’s unqualified acceptance of it.

**Introduction**

This factsheet outlines some of the challenges facing the Chinese and Vietnamese communities in the UK and their mental health needs. The Chinese community, which has been resident in this country since the latter part of the 1800s, makes up the third largest minority in Britain.\(^1\) As a community the Chinese face some specific challenges, including stigma, language barriers, isolation and a lack of social support.

It is estimated that about 80 per cent of the 26,000 Vietnamese refugees that came to Britain as a result of the Vietnam war were ethnic Chinese.\(^2\) This community has been described as one of the most disadvantaged groups to have arrived in Britain. They share similar problems to the Chinese community, in addition to the negative experience of being refugees.

But, as a recent literature review established, despite the size of the Chinese minority and their long-established presence, there has been little research on the mental health needs of this group.\(^3\) Although there is no evidence that the Chinese community experience more mental health problems than the general population, researchers found that Chinese people are less likely to use mental health services. This may be due to language barriers and to a lack of cultural awareness among mental health professionals. These findings reflect other studies that show that mental health services offered by the statutory and voluntary sectors largely fail minority ethnic communities.\(^4\)

The Chinese Mental Health Association, the only national organisation dealing with the mental health needs of the Chinese community, notes that little has been done to address the needs of the Chinese community. It believes that most of the current good practices that are initiated are provided by people of Chinese origin or by Chinese organisations. This

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**Eating disorders are not a lifestyle choice**

The development of my eating disorder, as with the majority of sufferers, was not a vain attempt to lose weight in order to resemble skinny models or celebrities.

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**Do TV hospital dramas reflect reality?**

Shows such as Casualty are full of portrayals of unprofessionalism and poor conduct.

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More...
factsheet concludes with some of these examples of good practice.

**Background**

**Chinese**

The Chinese community in the UK has existed since the end of the nineteenth century and has traditionally been perceived as insular and self-sufficient. (5) In the early 1900s, Chinese people were employed as seamen in Britain and the early Chinese communities were established in the main seaports of London and Liverpool. These communities remained relatively small until the 1940s.

From the end of the Second World War to the 1950s, many of the later Chinese immigrants were students and professionals from other parts of the world - mainly South East Asia. In the 1960s and 1970s, there was a large influx of Chinese people into the UK to work in catering businesses, the majority arriving from Hong Kong.

The number of people arriving from Hong Kong rose between 1987 and 1997. This was largely due to anxieties about the return of the colony to Chinese rule in June 1997. (6) The table below gives the most recent figures available for the ethnic composition of the UK.

<table>
<thead>
<tr>
<th>Ethnic group</th>
<th>UK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black</td>
<td>1.2 million</td>
</tr>
<tr>
<td>Indian</td>
<td>0.9 million</td>
</tr>
<tr>
<td>Pakistani and Bangladeshi</td>
<td>1.9 million</td>
</tr>
</tbody>
</table>
The complexity and diversity of the Chinese community needs to be recognised. Community members may speak a variety of primary languages in addition to Cantonese. They may practise different religions. Most significantly, there may be distinct differences between generations, including the degree of identification with the dominant culture.\(8\)

Despite the community's size, there is currently no national organisation that speaks or campaigns on behalf of the Chinese community in the UK as a whole, although there are a significant number of community groups. These tend to be run either by restaurateurs, who provide social support for members, or by welfare organisations, providing support services, such as housing and welfare.\(9\)

**Vietnamese**

During the 1970s and 1980s, the majority of Vietnamese people settling in Britain were refugees from Hong Kong refugee camps, following the Vietnam war. This was mainly due to continuing boat rescues, asylum seekers and family reunion programmes for relatives of refugees already living in this country.

The Government adopted a dispersal policy in relation to the majority of the 26,000 Vietnamese refugees.\(10\) This was done for several reasons:

- in order to avoid the creation of ghettos
• it was believed that it would benefit the refugees in terms of eventual integration
• to reduce the housing and socio-economic pressures on local authorities.

Like the Chinese, many Vietnamese people work in the catering industry.

Challenges

General health

A survey on the health of minority ethnic groups, conducted in 1999 on behalf of the Department of Health,(11) found that Chinese adults were less likely than the general population (by about 40 per cent), and less likely than all other minority ethnic groups, to report limiting long-standing illness. They were also much less likely than the rest of the population to have had an illness or injury in the past two weeks that caused them to limit their usual activities. They also showed low rates of attendance at hospitals, and took less prescribed medicine. The survey indicated that they took relatively low levels of exercise, but smoked less than the rest of the population, and also consumed less alcohol.

At the same time, Chinese men and women were at least twice as likely as the general population to be classified as having a severe lack of social support.

Isolation

The Government's dispersal policy (see 'Background') has resulted in scattered settlements, which contributes to increased isolation for many Chinese and Vietnamese people. This has also been an instrumental factor in undermining the Vietnamese family structure.(12) In rural communities the impact is even greater, as culturally appropriate services tend to be concentrated in urban areas.
Employment

The Chinese in Britain have traditionally worked in the catering industry, but research indicates that younger generations, who are born and educated in Britain, are dissatisfied with the limited employment options of the catering trade. Long working hours in this industry may also present a major obstacle in accessing mainstream health provision and may result in inappropriate health solutions.

The effects of working in the catering trade mean that "workers commonly face low pay, jobs which include accommodation (in the event of unemployment, housing is also affected), overcrowded, poor working conditions, long unsociable hours and employers’ failure to pay National Insurance. The consequences are often social isolation, mental stress, depression and ill-health." (13)

There is also evidence of high unemployment among these communities. The Deptford Vietnamese Health Project in south London (14) reported 100 per cent unemployment affecting the 300 families in its local Vietnamese community.

Language barriers

A number of Chinese and Vietnamese people are either unable to speak English or lack confidence when doing so. One report estimated that about 70-80 per cent of the first generation do not speak English. (15) This can make it very difficult to interact with relevant authorities when trying to access mental health services.

In 1995, a social worker at the Deptford Vietnamese Health Project in south London reported: "it is 'language' that Vietnamese women view as the biggest barrier to improving their lives. Few will travel beyond Deptford market, about half a mile from their homes, because they are scared of getting lost and being unable to ask for directions." (16)
Research on the health and social needs of Chinese and Vietnamese communities in Avon indicated that of the 94 people studied:

- 35.1 per cent had poor or no English skills
- 46.8 per cent needed interpreting and translation services to see their GP or other care professionals
- 68.2 per cent, who needed an interpreting or translation service, relied on family members, including children. (17) Most of the burden of translation falls on the second generation refugees as there are very few official interpreters. (18)

In addition, consultation through an interpreter places demands on a GP's time and they may have little experience of working with patients from minority ethnic cultures. This often results in inaccurate diagnoses, and inadequate explanations of treatment. (19)

In 1995, a survey conducted by the Chinese National Healthy Living Centre found that those working with the Chinese community estimated that between 80 and 90 per cent of their clients would need an interpreter to consult an English-speaking clinician. The shortage of interpreters meant that many contacts with professionals were a wasted opportunity. (20)

**Lack of information**

A survey of health service users of Chinese origin was conducted in Oxford between 1992 and 1993. The results highlighted the language barriers faced by this community. It revealed that 46 per cent of the people questioned lacked basic information on how to access the health service system. The main reasons given were poor English and unfamiliarity with the system. (21)
Problems faced by women

Women who have come to Britain through marriage often speak very little English and "many women would describe their role as that of being a support to husbands, to look after and respect their in-laws and to take care of their children." The Chinese Mental Health Association reported that research has shown that "the lack of facilities for learning new languages make it difficult for such mothers to embrace outside interests and they can be virtually left out on a limb." The Deptford report said that there were some English classes available, but the beginners feel that it is pointless without Vietnamese speaking teachers.

Mental illness may be exacerbated since many Chinese and Vietnamese women experience and tolerate isolation and/or violence at home because of their restricted access to income, housing and other support services. The Chinese Mental Health Association observed that while more men than women were diagnosed with schizophrenia, more women than men received a diagnosis of depression.

Mental health of Chinese and Vietnamese people in Britain

Discrimination

Mind believes that mental health problems can be caused by many factors. Oppression in the form of racism is undoubtedly one.

The social conditions of Chinese and Vietnamese people must be considered in any assessment of the health of these communities. Chinese and Vietnamese people face discrimination in the fields of employment, housing and education. This means the denial of access to, or second-rate opportunities in these fields. As the Chinese Mental Health Association comments: "Given the linguistic difficulties experienced by the first generation and the social constraints and disadvantages experienced by all minority ethnic groups, it is doubtful
that these factors will not have an impact on mental health."

**Social stigma**

There is also a stigma attached to mental health problems in the Chinese and Vietnamese communities. The Chinese Mental Health Association believes that "in the Chinese world, mental illness will bring a strong sense of shame. A common coping strategy is hiding from family, friends and the community. Mental health problems are kept inside the individuals and relieved by gambling, alcohol or angry outbursts. Another way of hiding is to perceive symptoms as physical rather than psychiatric in origin. This leads to not accessing services."

The problem of stigma was confirmed by the survey conducted by the Chinese National Healthy Living Centre in 1996: "What came over very strongly was the very considerable stigma attached to mental illness by the Chinese community and this, combined with limited knowledge about the condition, was identified as the cause of widespread discrimination."(25)

**Types of mental health problems**

The following figures give some indication of types of mental health problems being reported.

- In 1995, the Deptford Vietnamese Health Project(26) revealed that one in ten adults were experiencing mental health problems ranging from anxiety and depression to schizophrenia.
- During the period covering 1999 to May 2000, the Vietnamese Mental Health Services had on its records 280 mental health cases. The breakdown according to diagnoses is as follows:

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Cases</th>
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</table>
Carers of people with mental health problems

The concerns of Chinese carers are similar to those of carers from other communities. A 1992 poll of 60 Chinese carers found that 37 per cent of people being cared for had mental health problems. Their carers also admitted to feeling "very inadequate in attempting to care for them."(27)

The following factors were also highlighted:

- Access to appropriate information and services
- Respite care and support
- Racial stereotyping

Access to appropriate information and services

Services tend to be underused, mainly because information is usually in English. Many carers could not always communicate with service providers, and therefore were not always aware of what was available. However, the help that was available tended to be inadequate and not specific enough to meet their needs. A survey of Chinese elders and their carers by Birmingham Social Services, reported that "they wanted day care, respite care, home-care services and long-term residential care that is culturally sensitive and appropriate."(28)
Respite care and support
Research by the Chinese Mental Health Association reported it was difficult for Chinese carers to take time off from caring. Many were unaware of respite care opportunities, and 80 per cent of carers interviewed had never had a holiday.

Racial stereotyping
Stereotyping depicts Chinese families as preferring to 'care for their own'. However, changing family structure and housing problems indicate that this is not always possible. Service providers do not consider the need to support carers or the people they look after. A study of a Chinese community in Merseyside found that 70 per cent of elderly people did not live with their relatives, but in fact lived alone.\(^{(29)}\) The Chinese National Healthy Living Centre survey found that "the responses shattered the stereotypical image of caring and supportive extended families in this group. Most respondents either hid their problem from their family or were shunned by them because of it."\(^{(30)}\)

Diagnosis and assessment
Psychiatrists, the police and approved social workers all have statutory responsibilities under the Mental Health Act 1983 in relation to the recognition of mental health problems. There is concern, particularly in relation to people from Black and minority ethnic (BME) communities, that these professionals do not have the necessary awareness of cultural values, norms and general knowledge of ethnic communities to do this task effectively.

Approved social workers
Approved social workers (ASWs) are involved in the assessment of people in a 'mental health emergency'. They receive specific training for the purposes of this assessment and it is their role to decide the best
course of action. This could involve a decision to detain an individual in hospital under a section of the Mental Health Act.

Of the professions with responsibilities for assessment under the Mental Health Act, only ASWs have a statutory requirement to show an understanding of working in a multi-racial society. In addition, translation services are often unavailable. This, in turn, makes the diagnosis or assessment procedure unreliable and highly stressful. Confronted with these linguistic and cultural barriers, professionals tend to see Chinese and Vietnamese people as difficult patients.

**GPs**

GPs play an important role for people from minority ethnic communities, as they are frequently their first point of contact with the psychiatric system. As with psychiatrists, police, ASWs and indeed all health professionals, better training is also needed for GPs to increase their awareness of minority ethnic communities and so provide an improved service. There is little research or information about GPs in relation to BME communities.

**Psychiatrists**

Psychiatrists make diagnoses, as well as deciding upon the type of care to be offered. Psychiatrist Dr Mark Blackwell, in his research about the mental health of the Chinese community, found that there were three main areas where Western psychiatrists occasionally ‘fall in error’ when treating Chinese patients:(31)

**Patients not receiving appropriate treatment**

Dr Blackwell identified reported reluctance amongst some psychiatrists to diagnose Chinese mental health problems, in particular, schizophrenia. This results in patients not receiving treatment.(32) Reasons for this reluctance include the stigma attached to mental health problems within
the Chinese and Vietnamese communities and, in part, publications questioning the validity of cross-cultural diagnoses.(33)

**Misinterpreting**
There are few Chinese and Vietnamese psychiatrists, and psychiatric training is eurocentric in its approach. Some psychiatrists have concluded that without "the understanding of the culture of patients from Black and minority ethnic backgrounds, consultations with a psychiatrist from a similar community or input from a personal knowledge expert consultant, misinterpreting unfamiliar behaviour easily happens."(34)

**Mismanagement**
The family network within Chinese and Vietnamese culture is very important. Attempting to discuss mental health issues in front of a multi-disciplinary team could cause acute embarrassment to the family and a lasting loss of faith in the doctor.(35)

**Treatments and services**
The Asian and Chinese Counselling Project in Camden, North London found that "it is easier to talk to someone in your own language who understands your culture. A lot of our clients cannot speak English or cannot express themselves well in a foreign tongue, especially when trying to express emotional feelings."

Studies have indicated that many clients would welcome the opportunity for talking treatments and have found it more helpful than the physical treatments offered.(36) Often treatment and services for Chinese and Vietnamese communities are not relevant to their needs or of a high enough quality.

A counselling service, for example, should be appropriate to the culture of its clients in order to be effective. Reports have also shown that there is a lack of both well-trained specialist interpreters and Chinese-speaking
mental health professionals, and also of appropriate advocacy schemes.

As with assessment, the treatment and rehabilitation processes for Chinese and Vietnamese people with mental health problems take longer than usual. The Chinese Mental Health Association found that medication was preferred, but only because other options, such as counselling, family therapy or occupational therapy, were much more difficult to organise. This again was because of linguistic and cultural barriers.

Findings from research into psychiatrists' views on managing Chinese patients in Merseyside revealed that:

- many thought that there was a lack of information on Chinese culture
- the production of an information pack may be a simple initial step in addressing this issue
- they felt that community nurses, fluent in Chinese and familiar with the culture, would be a viable and effective first step to overcoming some of the problems encountered in managing Chinese psychiatric patients. Their role would include aiding accurate diagnosis, monitoring and working with the patient in the context of the family.

Ethnic monitoring of hospital patients by NHS Trusts has only been mandatory since April 1995. As a result, there is at present a lack of statistics on the different types of treatments received by people from different ethnic groups.

**Good practice**

The effectiveness of BME service providers, operating with few resources, has been highlighted and documented. They are largely responsible for the innovative service developments, which appropriately
meet the mental health needs of BME communities.\(^{(40)}\)

For appropriate services to be developed for people from Chinese and Vietnamese communities (as with other minority ethnic communities), they need to be involved in planning and implementation from the outset, rather than attempting to slot them into services which are not tailored to meet their needs.

**Chinese National Healthy Living Centre**

Some of the issues discussed in this factsheet have been addressed by the Chinese National Healthy Living Centre. It was founded in 1987 to promote healthy living and provide access to health services for the 170,000 strong Chinese community in the UK, over 60,000 of which live in London. The London-based centre provides a unique Sunday doctor surgery with bilingual NHS doctors, and a range of services, including a disability support scheme, a Cantonese helpline, health talks and bilingual health resources, including literature and videos.

The centre currently serves 2,000 people a year, mainly from the London area. It also handles 6,000 telephone enquiries. It is open for visitors to have informal contact, and also conducts outreach programmes in Chinese schools and home visits for the disabled.

The centre also works to promote mental health, conducts research and advises Government departments and national bodies on the Chinese community’s health needs. In 1996 the centre was commissioned by the NHS Executive’s Ethnic Health Unit to undertake the first ever national survey of the mental health needs of the Chinese in England.\(^{(41)}\)

**The Chinese Mental Health Association**

The Chinese Mental Health Association (CMHA) is the only specialist charity serving Chinese mental health service users in the UK.
Established in 1992, its vision is to promote and safeguard the mental health of the Chinese community in Britain.

As CMHA is a specialist charity in this field, it is able to focus on mental health and delivers a range of pioneering services. Its main achievements include:

- publishing the first book on Chinese mental health issues in the UK (Mental Health Foundation, 1997)
- conducting the first mental health supported housing research funded by the Department of Health (1999 to 2003)
- developing the first Chinese mental health users forum in the UK (2003 to present)
- developing the first national Chinese mental health promotion project in the UK through a range of bilingual media and activities, including a website, a service directory, translated mental health booklets, user-led newsletters, magazine columns, seminars and video presentations (2002 to 2005)
- setting up the first national mental health helpline for the Chinese community in 2004
- conducting the first research into dementia and the Chinese community in the UK (2005 to 2007).

CMHA's services are supervised and audited by a pool of mental health professionals, including a medical director of a mental health trust.

Users' perspectives are also put high on its agenda. Members of the CMHA users forum input into various projects by becoming members of their steering groups. This means that BME groups and organisations can provide valuable input to mainstream statutory agencies regarding diagnosis, assessment and treatments. Where this occurs, the notion of 'mainstream' can appropriately be redefined and good quality services can be established.
**Diverse Minds**

The Diverse Mind programme was set up by Mind with support from the Department of Health, to make mental health services more responsive to the needs of people from BME communities.

Mind's policy on BME mental health calls for action, including improved information services, translation and interpreting services, training for mental health staff, reduced coercion into the psychiatric and criminal justice systems and support for BME organisations through campaigning, providing information and training. They provide:

- a quarterly magazine highlighting issues around minorities and mental health
- subsidies towards training or conferences
- information about training and conferences
- opportunities to become involved with a BME network in mental health.

For more information, or if you would like to become a member, contact the Diverse Minds liaison officer at:
Mind
15-19 Broadway
Stratford
London E15 4BQ
tel: 020 8519 2122
diverse@mind.org.uk

**Further reading**

**Articles and chapters in books**

Blackwell, M.J., 1995, *Setting up a special service for refugees from*
Vietnam in the United Kingdom and the measurement of schizophrenia in this group, MPhil Thesis, University of London.


Parker, D., 1994, 'Encounters Across the Counter: Young Chinese People in Britain', New Community , Vol.20, No.4, pp.621-34.


Books


Mental Health Foundation, 1996, Mental Health in Black and Minority Ethnic People: the Fundamental Facts.


Yee, L. and Au, S., 1997, Chinese Mental Health Issues in Britain - Perspectives from the Chinese Mental Health Association, Mental Health Foundation.
Mind website publications


Reports


Other resources

Mental Health Media Council, 1993, *Cultural Identity and Racism Video Directory* (a comprehensive list of videos for sale or hire in the UK).


The Chinese Mental Health Association have translated several of Mind's booklets into Chinese. Please contact them directly to order copies. (See 'Useful contacts' below)

**Useful contacts**
General
Joint Council for the Welfare of Immigrants
115 Old Street
London EC1V 9RT
tel: 020 7251 8708
fax: 020 7251 8707
email: info@jcwi.org.uk
website: www.jcwi.org.uk
A national voluntary organisation, campaigning for justice and combating racism in immigration and asylum law and policy. They run advice lines for specific queries on immigration, refugee or nationality issues.

Migrant Helpline
Head Office
The Rendezvous Building
Freight Services Approach Road
Eastern Docks
Dover
Kent CT16 1JA
tel: 01304 203 977
fax: 01304 203 995
email: information@migranthelpline.org
website: www.migranthelpline.org.uk
Charity offering reception services to newly arrived migrants. Also works in communities, offering outreach and raising awareness. Note that despite the name, Migrant Helpline is not a helpline.

Refugee Council
Head Office
240-250 Ferndale Road
London SW9 8BB
London Advice Line: 020 7346 6777 (Mon, Tues, Thurs and Fri 10am to 4pm, Wed 2pm to 4pm)
Provides help and support to asylum seekers and refugees.

**National Chinese organisations**

The Chinese in Britain Forum
1st Floor
Boardman House
64 Broadway
Stratford
London E15 1NG
tel: 020 8432 0681
fax: 020 8432 0685
e-mail: info@cibf.co.uk
website: www.cibf.co.uk

Services include consultation with Chinese groups, discussions of social policy issues, national network membership and website, bulletins and quarterly newsletters, national and regional conferences, seminars and workshops, training, surveys and research.

Chinese Information and Advice Centre
4th Floor
104-108 Oxford Street
London W1D 1LF
legal advice helpline: 020 7462 1285 (Wed and Fri 10am to 1pm)
tel: 020 7323 1538
e-mail: info@ciac.co.uk
website: www.ciac.co.uk

Charity offering free legal advice and support to Chinese people living in the UK.
Chinese Mental Health Association
2nd Floor
Zenith House
155 Curtain Road
London EC2A 3QY
Wah Sum helpline: 0845 122 8660 (Mon-Fri 10am-8pm)
tel: 020 7613 1008
fax: 020 7739 6577
email: info@cmha.org.uk
website: www.cmha.org.uk
Wah Sum helpline (national Chinese mental health helpline), Chinese information materials, bi-lingual counselling, mental health assessment, befriending, housing support (Barnet), carers support and user social groups.

Chinese National Healthy Living Centre
29-30 Soho Square
London W1D 3QS
tel: 020 7287 0904
fax: 020 7534 6545
email: general@cnhlc.org.uk
website: www.cnhlc.org.uk
Information service, health promotion, preventive care and primary care for Chinese people.

Local Chinese organisations
Bristol and Avon Women's Group
St Agnes Church
Thomas Street
St Pauls
Bristol BS2 9LL
tel: 0117 935 1462
fax: 0117 955 3330
email: bacwg2@onetel.com
website: www.bacwg.co.uk
Provides advice for Chinese women, on mental health issues and welfare benefits.

Camden Chinese Community Centre
9 Tavistock Place
London WC1H 9SN
tel: 020 7388 8883
fax: 020 7383 2886
email: info@camdencc.co.uk
website: www.camdenccc.co.uk
Support, advice and information on welfare issues, housing and immigration.

Chinese Association of Tower Hamlets
Sailors Place
680 Commercial Road
London E14 7HA
tel: 020 7515 5598
email: londonchinese@hotmail.com
Advice, counselling, drop in and telephone interpreting services for Chinese and Vietnamese people.

Derbyshire Chinese Welfare Association
110-122 Abbey Street
Derby DE22 3SQ
tel/fax: 01332 342 436
Community centre offering advice, information and support around the welfare, educational, social and cultural needs of the local Chinese community. Offers guidance on education and training, employment, benefits and health. Runs a Chinese elders group and a Chinese Sunday
school.

Hackney Chinese Community Centre  
28-32 Ellingfort Road  
London E8 3PA  
tel: 020 8986 6171  
fax: 020 8533 5066  
email: hccshackney@hotmail.com  
A community centre for different sectors of the Chinese and Vietnamese communities.

Kut-O Chinese Association  
340 High Street  
Chatham  
Kent ME4 4NR  
tel: 01634 841 026  
The Kut-O Chinese Association is a non-profit making organisation, set up in 1983 by a group of UK residents from the island of Kut-O in the New Territories of Hong Kong. They provide information and assistance to the Chinese community within the Kent area and run a Chinese school and social functions for the community.

Lambeth Chinese Community Association  
69 Stockwell Road  
London SW9 9PY  
tel: 020 7733 4377  
fax: 020 7733 5045  
email: infolcca@msn.com  
Aims to assist non-English speaking Chinese clients to have better access to mainstream facilities.

Leeds Chinese Community Association  
84-86 North Street
Leeds LS2 7PN
tel/fax: 0113 234 6019
e-mail: lcca@leedschinese.co.uk
website: www.leedschinese.co.uk
Community centre offering drop-in advice, health advice, information and advocacy service. Lunch club for older people, Mandarin classes, ESOL and other classes available.

London Chinese Community Network
Ground Floor
Boardman House
64 Broadway
Stratford
London E15 1NG
tel: 020 8432 0683/0684
fax: 020 8432 0685
e-mail: info@chinese-network.net
website: www.chinese-network.net

The Pagoda Chinese Community Centre
Henry Street
Liverpool L1 5BU
tel: 0151 233 8833
fax: 0151 233 8839
e-mail: chinese.pagoda@liverpool.gov.uk
Community centre for Chinese people. Services include advice on benefits, legal matters, housing, education, employment and training, immigration and nationality. Also available are health care surgeries, health link interpreting services and a Chinese Carers Network with respite care. Activities include language and recreational classes and a lunch club for elderly Chinese.

Southwark Vietnamese Chinese Refugee Community
Thomas Calton Centre
Alpha Street
London SE15 4NX
tel: 020 7635 0022
fax: 020 7277 9040
Advice for the Vietnamese Chinese community, particularly refugees and asylum seekers, including benefits, housing and homelessness, immigration and nationality. Culturally sensitive counselling and language support available. A day centre for older people is open Monday to Friday from 9am to 4pm, with lunch and activities. Mother tongue classes for children aged 5 to 16 years old. Group work for women, older people and unemployed people.

Swansea Chinese Community Co-op Centre
2nd Floor
37-38 The Kingsway
Swansea SA1 5LF
tel: 01792 469 919
fax: 01792 241 792
email: swanseachinese@aol.com
website: www.swanseachinese.co.uk
Services for members of the Chinese community. Advice and information on a range of issues, including racial harassment and local services. Training and recreational and social activities.

National Vietnamese organisations
Vietnamese Mental Health Services
Thomas Calton Centre
Alpha Street
Peckham
London SE15 4NX
tel: 020 7639 2288
fax: 020 7639 0008
Aims to increase access to adequate and appropriate health and social care for all Vietnamese people who have mental health difficulties and their carers and, to provide a quality, culturally sensitive service to these people.

**Local Vietnamese organisations**

An Viet Foundation  
12-14 Englefield Road  
London N1 4LS  
tel: 020 7275 7780  
email: anviet@anvietuk.org  
website: www.anvietuk.org  
Centre for the Vietnamese community, including refugees and asylum seekers. Advice on benefits, housing, immigration, business, careers and training. Their drugs project provides counselling, advocacy and advice.  

Bristol and District Vietnamese Refugee Community  
17-19 Dean Street  
St Pauls  
Bristol BS2 8SF  
tel: 0117 944 5657  
Range of services for the Vietnamese and Chinese Vietnamese communities. Advice on housing, health, education, employment, training and benefits. Counselling service and assistance with translation and interpreting.

Cambridgeshire Vietnamese Refugee Community  
Upper Floor Offices  
An Lac House
Range of services for Vietnamese refugees in Cambridgeshire. Advice and information on benefits, housing, employment and health. Translation and interpreting services. Elderly, women's and youth groups. Social and cultural events and activities.

Community of Refugees from Vietnam - East London
C/o Poplar Methodist Church
119 East India Dock Road
London E14 4DE
tel: 020 7538 4986
e-mail: crveastlondon@aol.com
Advice and information on benefits, employment, housing and counselling in the Tower Hamlets area.

Deptford Vietnamese Health Project
Lind Clinic
James Lind House
Grove Street
London SE8 3QF
tel: 020 8692 8830
fax: 020 8694 9013
Health and welfare advice and support for Vietnamese refugees, particularly young families with children. Offers advice on a range of issues including welfare benefits, health, housing and education. Can provide advocacy and help clients gain access to local services. Drop-in advice on Wednesdays 10am to 4pm. Appointments are necessary at other times.

Midlands Vietnamese Community Association
8 Charleville Road
Handsworth
Birmingham B19 1DA
tel: 0121 554 9685
Advice, information and support for the Vietnamese community. Provided advice and assistance with benefits, employment, education and training. English language classes available.

Nottinghamshire Vietnamese Community Project
30 Wiverton Road
Sherwood Rise
Nottingham NG7 6NP
tel: 0115 969 1289
fax: 0115 969 1288
Advice, social and education centre for Vietnamese refugees. Advice on welfare rights, housing and homelessness, immigration and nationality issues and domestic violence. Mother tongue classes, lunch club and play schemes. Health project addressing primary health care needs. Various social and cultural needs. Translation and interpreting service for other agencies, for which there are charges.

Portsmouth Vietnamese Association
Friendship House
Elm Grove
Southsea
Portsmouth PO5 1JT
tel: 0239 275 5727
Provides advice and social activities for the Vietnamese community. Elders group, music and sports groups for young people, mothers and toddlers group. Vietnamese language classes.

Vietnamese Community Association in SW London
44 Church Road
Provides advice, information and support in accessing services. Befriending, outreach and translation services also available.

This factsheet was originally written by Carole Reid-Galloway, Mind Information Unit, June 1998. It was last updated by Sarah Gillam, March 2006.

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42. NHS Executive Mental Health Task Force, 1994, *Black Mental Health - A dialogue for change*, NHS.

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