

Editorial

Filling the missing gaps on research in Chinese adolescents

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It is a popular belief that Napoleon Bonaparte once said, “When China moves, she will move the world”. Why might China have influence on the world? There are three unique attributes of China that may contribute to China’s influence on the world.

In the first place, China has a long history of over 5000 years. Such a long history signifies that the Chinese culture has much to offer to the world. Actually, the inventions of gun powder, paper, printing technique and compass have greatly transformed the Western civilization and contributed to Western technological advances. Chinese philosophies including Buddhism, Taoism, and Confucianism have shaped many Asian ideas. Chinese medicine has also attracted much attention from Western medical practitioners and researchers in the search for complementary and alternative medicine. In short, there are many elements in the Chinese culture which contribute to our understanding of human nature and formulation of solutions to contemporary social problems. Such elements are particularly insightful for psychologists, medical practitioners, educators, and other allied professionals when they work with adolescents.

Second, the huge Chinese population is a great source of influence. The World Population Clock showed that the population of China was 1,359,140,968 in 2010, which was roughly one-fifth of the world’s population. The huge Chinese population poses one problem for researchers and practitioners working in the field of adolescent health – to what extent the theories and research findings developed in the West are generalizable to Chinese people? This is a legitimate question because knowledge on adolescent development has largely been developed in Western culture. Drawing insights from the perspective of multicultural counseling that counseling knowledge and techniques developed in Western contexts may not be applicable to people in non-Western contexts, one may cast doubt on the applicability of Western concepts and techniques in the field of adolescent health to Chinese contexts.

Faced with the problem of cross-cultural application of Western concepts and techniques, there are three possible responses. First, for those who uphold the belief that there is not much variation in human behavior across cultures (i.e., cultural universalism), they may simply apply Western knowledge on adolescent health in Chinese contexts without further thought. Second, for those who believe that human behavior is essentially different in different cultures (i.e.,

cultural relativism), they may develop indigenous knowledge and techniques in the field of adolescent medicine and health. Third, for those who hold a middle-of-the-road point of view, they may integrate both Western and local knowledge and concepts for studying adolescent health and medicine.

Finally, the rapid economic growth in the Chinese economy in the past few decades has also fueled the potential influence of China on the rest of the world. Coupled with the open door policy and economic reforms in China since the late 1970s, the return of Hong Kong and Macau to China in 1997 and 1999, respectively, under the political framework of “One country, Two systems” also pose interesting socio-political changes which affect the lives of Chinese adolescents. In Taiwan, democratization in the past two decades has fueled the quest for individual freedom and rights particularly among Taiwanese adolescents. Such socio-economic and political changes influence more than the political and social landscape in Asian countries. Social and political transformation in China and her stability will definitely have a profound impact on the world.

The preceding discussion obviously suggests that it is important to carry out more research on Chinese adolescents. Unfortunately, a survey of the literature shows that Chinese adolescent psychology and related issues are under-researched. For example, in a systematic review of the quality of life studies in Hong Kong, Shek and Lee (1) showed that quality of life research on Chinese adolescents in Hong Kong is sparse. Similar observation was highlighted by Shek (2). Using “adolescence” as the search term, a computer search conducted in December 2010 showed that there were 387,598 citations in PsycINFO and 44,100 citations in MEDLINE. Meanwhile, using “adolescence” and “Chinese” as search terms, an identical search showed that there were 16,146 and 131 citations in PsycINFO and MEDLINE, respectively. These figures clearly suggest that existing research studies on adolescence are predominantly conducted in the West and there is a strong need to investigate adolescent behavior in different Chinese communities (3).

There are at least four missing gaps in the research based on Chinese adolescents. First, in contrast to the West, there are few Chinese psychosocial assessment tools. The importance of assessment can be captured in Walter Hudson’s (4) two axioms of treatment: ‘The first states: “If you cannot measure the client’s problem, it does not exist”. The second, a corollary of the first, states: “If you cannot measure the client’s problem, you cannot treat it” ’ (p. 65). Unfortunately, as pointed out by Shek (5), objective assessment tools measuring psychosocial functioning in different domains are grossly lacking in different Chinese communities.

Second, there is a need to understand learning and academic behavior in Chinese adolescents. Under the influence of Confucian ideas, Chinese parents regard academic achievement to be very important and they expect their children to study hard. Many parents still hold the belief of “the sea of learning knows no bounds; only through diligence may its shore be reached” (*xue hai wu yai, wei qin shi an*). Many parents also regard diligence to be a key to successful academic performance, as exemplified in the saying that “reward lies ahead of diligence, but nothing is gained by indolence” (*qin you gong, xi wu yi*). Therefore, it is important to study the process of learning and related phenomena in Chinese adolescents.

Third, with rapid industrialization and urbanization in China, many parents and their children migrate to the cities to find better jobs in the “world factory”. While many theories predict that such migrant families and their children may face many education and health issues, research findings on the health and adjustment issues among migrant children in China are lacking (6). Actually, migrant families and adolescents in China are quite unique in the world which definitely deserves more empirical studies.

Finally, a review of the literature shows that there are few validated adolescent prevention and positive youth development programs in Asia. In view of the growing adolescent issues in different Chinese communities, there is an urgent need to develop more adolescent prevention and positive youth development programs in different Chinese contexts. Besides, as most of the existing programs are not rigorously validated, there is a need to evaluate the existing programs (7–9). In the long run, such research can help to promote evidence-based adolescent prevention and positive youth development programs in different Chinese contexts.

Against the above background, this special issue attempts to contribute to the literature on Chinese adolescent health and development by incorporating several papers on Chinese adolescent assessment tools, learning, learning difficulties, migrant adolescents in China, and evaluation of positive youth development programs in Hong Kong. We earnestly hope that this special issue can stimulate more research devoted to the health and development of Chinese adolescents.

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