Social Isolation and Loneliness among Elderly Immigrants: The Case of South Asian Elderly Living in Canada

Abul Hossen
Shahjalal University of Science and Technology

Immigration is a worldwide phenomenon in the age of globalization. Highly educated young people from developing countries immigrate to developed countries such as Canada to improve their lives. Young immigrants sponsor their parents to join them or their parents move to Canada to be close to their children and grandchildren. When these seniors migrate to a new world, they are disconnected from their familiar way of life, resources and family relations. Coming from a developing world with its own characteristics, features and setting foot in an advanced country, is a cultural shock. Cultural, religious, and language differences negatively contribute to making the new community environment different for these elderly. Lack of financial resources and community networks also increase their sense of alienation and isolation. The present study suggests that better family relation, social networking, financial support, and accessing health care would be the key to address the problem.

Late in life immigrants are often at risk of psychological stress, and social isolation because of language barriers, small social networks, and cultural differences from their host society (Emami, Toress, Lipson, & Ekman, 2000). It has been noted that the social networks of those who migrate late in life tend to be very limited (Weeks & Cuellar, 1983). Because of their recent arrival, unfamiliar social environment, poverty, poor health and communication problems, it is difficult for them to participate effectively in the economic, social, political, and cultural life. As a result, they become alienated and isolated from the mainstream society (Duffy, 1995). Difficulties in understanding media news reports, reading newspapers and magazines or making use of public transportation to visit friends or shop reinforce their sense of loneliness and social isolation (Maiter, 2003). Because of the cultural norms, financial condition and expectation of physical and emotional care, the elderly tend to live in multigenerational households. This living arrangement is complicated and does not shield the elderly from feeling lonely; sometimes it exacerbates the situation. Some studies have found that multigenerational households can reduce loneliness and stress levels and facilitate adjustment to a new society (Kiefer, Kim, Choi, Shon, & Kim, 1985). Other studies show that multigenerational living is likely to increase stress and conflict and cause dissatisfaction (Gold, 1989). Their dependence on kin leads to
conflict, particularly with respect to filial expectations from their married sons (Kim, Kim, & Hurh, 1991). This dependency, however, can threaten intergenerational solidarity and negatively impact older immigrants if families are not able or willing to provide assistance. Adult offspring may not be able to assist their parents because of their own struggles in adjusting to a new country (Yu & Wu, 1985). Other offspring may prefer to live in non-ethnic neighborhoods and chose not to live with their parents (Ishii-Kuntz, 1997). As mentioned by Walker and Ahmed (1994), “our concern is that supportive extended families are not universal, nor is family support inevitable - something planners and practitioners often fail to recognize (p.95).” Studies among Indians and Pakistanis living in Britain reveal that the extended family that unilaterally supports their elders is a myth and that these elders expect to return to their homelands (Baker, 1984).

There is, however, limited literature about the effects of immigration on the South Asian elderly who were sponsored by their children (Choudhry, 2001). Researchers have pointed out that very little is known about specific ethnic groups (Jackson, 1989), much less the old who are immigrants in this country, and especially about how they live on a daily basis. As one researcher explained, seniors are the most powerless, least influential, and most ‘forgotten’ segment of the ethnic population (Disman, 1984).

The present study explores this paradox of immigrant family life. Why do older immigrants so often describe themselves as lonely, isolated, and bored while they appear to be so closely integrated into their kin network? Why and how this discrepancy happens? In order to address these questions, this study focuses on the demographics of the elderly population in Canada in general and South Asia in particular. This study also discusses the conceptual meaning and interrelations between social isolation and loneliness in order to understand the concepts. This study explains factors contributing to elderly immigrants feeling of social isolation and loneliness and policy implications.

The Demographic Profile of the South Asian Elderly Immigrant Population in Canada

The number of older adult immigrants has been increasing markedly in recent years (Newbold, 2004). Seniors represent 12 percent of the present population of Canada. By the year 2041, it is estimated that 23 percent of the population will be aged 65 and over (Durst, 2005). While 12 percent of the Canadian population was older adults aged 65 and older in 2001, 28 percent of these older adults were immigrants. Of the older immigrant adults, 68 percent were of European background and 19 percent were from Asia (Statistics Canada, 2003). Most older immigrant adults have been in Canada for many years and are aging here. In contrast, only a small number immigrated to Canada when they were already older. For example, about three percent of immigrants who arrived in 1997 (less than 6000) were older adults. About half of these older immigrant adults (43%) were from Asia and four percent were of South Asian descent (Chappell, Gee, McDonald, & Stones, 2003). According to the 2001 census, the total number of South Asian immigrants in Canada are 917,000 (Tran, Kaddatz & Allard, 2005). However, it is difficult to estimate how many South Asian older adult are
Social Isolation and Loneliness: Conceptual Meanings and Interrelations

Social isolation is considered to be an objective measure of social contacts or lack thereof, while social loneliness is the subjective expression of dissatisfaction with the number of social contacts (Townsend, 1957). Social isolation is sometimes referred to as aloneness or solitude. Those who are often alone, however, are not necessarily lonely. Solitude can be a personal choice (Woodward, 1988). Social loneliness is defined as negative feelings about being alone, and as such is an experience that occurs irrespective of choice (Cattan, Newell, Bond, & White, 2003).

Social loneliness, then, can be thought of as negatively perceived social isolation (Gierveld, 1987). In general, an absence of both isolation and loneliness is deemed essential to the well being of older adults (Sinclair, Parker, Leat, & Williams, 1990). Delisle (1988) defines social isolation as being separated from one’s environment to the point of having few satisfying and rewarding relationships. This situation can occur in older age as a result of retirement and the loss of daily contacts related to work, from death of family members or friends, or through relocation of one’s residence that may be necessitated by declining health, coupled with the absence of regular caregivers (Cattan et al, 2003). Loneliness refers to an experienced lack of social contacts, intimacy, or support in social relationships (Gierveld, 1987). Hence, many researchers interpret loneliness as discrepancy between actual and desired interpersonal relationships (Peplau, 1985). Weiss (1973, 1993) who is generally acknowledged as the “father or parent” of modern research on loneliness (Perlman, 1989) identified two types of loneliness: loneliness through social isolation and loneliness through emotional isolation. The former describes loneliness caused by a lack of social integration and embeddedness. This type of loneliness may, for instance, be experienced following relocation and can be best resolved by acquiring new contacts. The latter – emotional isolation – refers to an absence of a reliable attachment figures, such as a partner.

The interrelationship between loneliness and social isolation is a complex one (Gierveld & Havens, 2004). Although loneliness is an individual’s subjective evaluation of her or his situation, the degree of loneliness has a rather weak connection to the characteristics of the objective social situation. Loneliness is one of the possible outcomes of the evaluation of a situation consisting of a small number of relationships (Dykstra, 1995). But socially isolated elderly are not necessarily lonely, and lonely elderly are not necessarily socially isolated in objective terms. Depending on the social situation and on personal characteristics, some elderly with a small number of social contacts consider themselves lonely, while others, with the same number of social contacts, feel well and sufficiently embedded (Townsend & Tunstall, 1973). The latter may also be true to people who prefer to be alone and who opt for privacy as a means to avoid undesired social contacts and relationships. The figure below explains the critical links and rela-
tionships between social isolation and loneliness:

![Diagram](image)


Factors Contributing To Social Isolation and Loneliness among Elderly Immigrants

Loneliness research tends to focus on individual factors, that is, either on personality factors or on lack of social contacts (Jylha & Jokela, 1990). However, loneliness could be expressive of the individual’s relationship to the community. It is conceivable that the difference among cultures and the manner in which people’s social relations are organized within them will result in cross-cultural variations in the way people perceive the causes of their loneliness. The difference of the social context, interpersonal interactions, and the support networks which are available to individuals in various cultures are bound to affect the causes people attribute to their loneliness as outlined by Rokach and Brock (1997). Doherty, Hatfield, Thompson, and Choo (1994) assert that researchers should take cultural and ethnic differences into account when designing research, if the commonality and differences between people are to be truly understood. Medora, Woodward, and Larson (1987) maintained that “among the important factors affecting the individual’s experience of loneliness are the culture and the family in which he or she develops (p.205).”

One of the most widely discussed ideas relating migration to social isolation is what is presented by Goode (1963) who suggested that migration was a mechanism by which industrialization was destroying the extended kin network. This
idea was popularized a few years later by Packard’s book, *A Nation of Strangers* (1972). Field (1972) has suggested that the migration of children away from parents and/or migration of older people themselves leads to a disintegration of the social life of older people.

In order to discuss the matter and to understand the prevalence of loneliness and isolation among the elderly immigrant, it is pertinent to discuss the cultural nuances and variances of South Asia and Canada (Ryan, 1985). In the subsequent sections, this study discusses how the psycho-socio-economic differences can impact on the psychological well-being of the immigrant elderly and push them to feel lonely and isolate them from the mainstream society, as well as from their own family.

**Cultural Differences: Individualism Versus Collectivism**

The elderly Bangladeshi immigrants grew up in a society in which family loyalty was a central value, age was associated with wisdom and was accorded respect, and aging parents maintained the authority as head of household even after their children had married and had children of their own (Rack, 1982). The father is the earning member, protector, head, and the judge in deciding family matters. The wife and children see him as the final authority. He does the outside work and the wife, the inside work. The roles of husband and wife are clearly defined and there is no conflict or confusion. Children adjust in this setting without any difficulty (Rack, 1982).

When these elderly follow their children to Canada, however, they find life to be very different than the one they had anticipated (Kauh, 1997). They find a culture in which the elderly are not respected for their wisdom and dismissed as being too old fashioned and out of touch. In Canadian society, self-actualization is held as the ultimate goal of healthy psychological development and loyalty to self supersedes loyalty to family (Moon & Pearl, 1991).

Triandis (1994) labeled these two distinct cultural values as individualistic and collectivistic depending on the inherent values embedded in the society. Triandis (1994) defines collectivism as those cultures that organize their subjective experiences, values, and behavioral mores around one or more collectives, such as the family, the caste, the religious group, or the country. In collectivist society, families place a high priority on dependence, loyalty, and solidarity with family and kin group (Petty & Balgopal, 1998). The interests or desires of the individual are sacrificed for the good of the family, and cooperation among the family members is stressed over individualism (Lessinger, 1995). In contrast to collectivism, the individualistic culture values personal independence, privacy, competition, self-fulfillment, and achievement (Rokach, Moya, Orzeck, and Exposito, 2001).

**Changes in Family Relations and Family Roles**

The immigration experience affects the whole family. It changes the interpersonal dynamics of immigrant family life and in the ways these contrast with family dynamics in the countries of origin. A lot of evidence suggests that immigra-
tion to America has significantly affected the structure of Korean-American families and the relations between generations (Kim, K., Kim, S., & Hurh, W. 1991). In a similar tone Maiter (2003:379) noted that “migration can result in a disruption of familiar family patterns and ties, with resultant changes in roles and responsibilities of individual members. In some families, the traditional support role and high value of elderly family members become disrupted, especially if they have joined their children in Canada at a later date.”

However, upon coming to Canada these elderly lose many of their traditional roles to Canadian strangers or younger English speaking members of their family or community. Their wisdom is questioned in the context of the new culture, of which they know very little. As a result, these elderly lose their major social roles (that of teacher) that were a source of status, power and prestige in their home countries (Kim, Kim, & Hurh, 1991). This “role emptying” places the elderly in an unfavorable position, and they are seen to have very little to offer to the younger generation (Gozdziak, 1989). School-age grandchildren who usually assimilate language and culture faster than their grandparents often find themselves in the unusual role of interpreting that language and culture to their elders. The older individuals who have always played the role of teachers all of a sudden find themselves in the position of students (Gozdziak, 1989). The role reversal is very difficult to accept for both the older and the younger generation.

Another source of stress for the elderly is their grandchildren’s indifference toward their native culture and language and lack of interest in traditional ceremonies and religious practices (Min, 1998). Many youngsters refuse to speak their native language with their elders or are embarrassed by their grandparents’ adherence to tradition. Many elderly fear the loss of parental authority due to the influence of the Canadian system of values. As a result, the family that acts as buffer to the demands of immigration has been cited both as a source of stress and a source of support (Aroian, Spitzer, & Bell, 1996).

Living arrangement, Traditional expectation and Family Conflict

In South Asia, it has traditionally been the responsibility of the family to provide food and shelter for its elderly members. More specifically, traditional norms in South Asian countries (Jeffrey, 1996) demand that sons are responsible for financial provision, while the daughters-in-laws are responsible for providing day-to-day care. Religious obligations also influence this process. For example, the Quran constantly gives advice about obedience, honor and care for parents until their death. In one place, it mentions that “heaven lies under the feet of one’s parents” (Ellickson, 1988: 53).

While co-residing in Canada, however, these elderly experience intergenerational conflict and disappointment over the influence of North American values on their families and the consequent erosion of traditional values (Bunce, and Harrison, 1991). Conflict that does occur often involves disagreements about who in the family is supposed to be fulfilling what role(s) (Detzner, 1996). Simos’ (1973) research with Jewish-American families illustrates the conflicts that can develop between older parents and children when the parents are viewed as “overly” dependent on the children. In many cases, conflict evolves from the
elder’s belief that the young should adhere to traditional filial piety practices and show respect, deference, and absolute obedience. Although the younger generations continue to show respect, the absence of many traditional rituals of deference is a recurring source of conflict. Despite their reluctance to discuss family conflict directly, it is evident in almost every life-history case across cultural groups in both generations throughout the life course (Detzner, 1996).

*Overwork*

While co-residing, most of the elderly look after grandchildren and do household chores. Because of the age and physical frailty, some of them undergo enormous hardship looking after very old and even incapacitated spouses and taking care of their grandchildren. For most grandmothers, taking care of the youngest ones is a joy rather than a chore. Due to cutbacks in easily affordable childcare, however, many working families today are unable to pay the large childcare costs required and are relying extensively on grandparents to not merely assist but to even take the main load of caring for the very young and other related household tasks (Yee, 1997). This load of domestic work, which is increasingly challenging for older women due to their age and physical fitness, is now being more publicly acknowledged as a form of exploitation – the multiple burdens that continue to drain older women (Yee, 1997).

*Financial Problems*

Financial problems may constitute yet another source of stress for the elderly immigrants. Financial difficulties and unstable employment have been noted in the literature as being particularly problematic for the immigrants (Dion & Giordano, 1990) and as contributing factors to psychological disturbances (Nicasso, 1983).

The elderly South Asian immigrants are newcomers in Canadian society and most of them have never been in paid employment in the Canadian labor market. Since their work histories do not qualify them for Social Security and employment pensions in Canada, they are more likely to be poor (Boyd, 1991). Moreover, according to the sponsorship based immigration requirement, these immigrants are not eligible to get any kind of social security benefit for up to 10 years (Boyd, 1991).

*Conclusion and Policy Implications*

The psychological adjustment for ethnic minority immigrants to western society has become an important social issue over the past few decades. As we discussed earlier, the elderly feel lonely while they live in multigenerational households (Gold, 1989). Data from various studies reveal that it is the family that still provides major sources of support and protection and plays a role of shield against depression, loneliness, and isolation in later life (Murphy, 1982). Research on psychological and social adjustment has underscored the importance of intimate and confiding relationships within the family (Murphy, 1982). Studies on British Asian elderly persons, Muslims and Hindus, have shown greater psychological
well-being among extended families where three generations of a family cohabit, which is the traditional norm in many immigrant communities, than where grandparents live separate from their children and grandchildren (Sonuga-Barke & Mistry, 2000).

The importance of addressing social isolation and loneliness to improve older adults’ well-being and quality of life is increasingly recognized in international policy and in some national health strategies (World Health Organisation, 2002). Health promotion services and activities intended to alleviate social isolation and loneliness among older people have long been considered important in providing support to develop, improve, and maintain social contacts and mental wellbeing (Walters, Cattan, Speller, & Stuckelgerger, 1999). It is, therefore, important both in practice and in policy terms to understand the context of these factors and to identify older adults’ own perspective on social isolation and loneliness (Victor, Scambler, Bond, & Bowling, 2000). Since social isolation has been perceived as a problem of old age, a wide range of services and activities have evolved to combat these negative experiences which includes home visits, adhoc one-to-one support, social activities, education, training, and transportation.

References


