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Older women's perceptions of and responses to abuse and neglect in the post-migration context

Dr. Sepali Guruge

Dr. Parvathy Kanthasamy

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Acknowledgements

Principal Investigator: Dr. Sepali Guruge
Co-Principal Investigator: Dr. Parvathy Kanthasamy
Research staff: Jalajah Jokarasa, BSc
Shree-Sai Sathananthan, BSc, MSc(c)
Maryam Chinchian, MSc, MSc
Dr. Khosro Refaie Shirpak
Students: Teresa Yi Wan, BSc, MN(c)
Petroiya Paterson, BSc, MN(c)
Nishanthiga Gobalasundaratnam, BSc
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Executive Summary

Background: Violence against women occurs in every community and society. According to Statistics Canada reports on victims of violence, while both older and younger adults are more likely to be victimized by someone known to them, nearly half of older victims experienced abuse/violence in the hands of a family member compared to about 35% among younger victims. Of Canada's foreign born population, approximately 3.5 million are older immigrants, and women comprise approximately half of this population. However, health research on violence against older immigrant women is limited.

Purpose and method: The purpose of our study was to explore the experiences of and responses to abuse/violence and neglect among a group of older immigrant women. This project builds upon our previous work but the primary impetus for the study came from our community partners. This qualitative study involved in-depth individual interviews (n=18) and focus group discussions (n=25) with a group of older women from the Sri Lankan Tamil community in the Greater Toronto Area. The audio-taped interviews and focus group discussions were translated and transcribed, coded, and analyzed using inductive thematic analysis.

Findings: Participants spoke about both positive and negative relationships they have had in the post-migration context. Those who had experienced abuse/violence spoke about financial, physical, emotional, and sexual abuse along with various other forms of threat, control, and neglect that they themselves and/or other older women in the community have experienced. The abusers included their husbands, children, and children-in-laws. The community and the society were also implicated in the abuse/violence owing to the various ways in which the community and the society exerted power and control over older immigrant women. Participants spoke about the many factors at the micro, meso, and macro societal levels that negatively shaped older women's responses to abuse. Some of the key determinants of women's responses included children's and grandchildren's welfare, community expectations, unfamiliarity with Canadian ways, financial and immigration concerns, and limitations in accessing health, social, and settlement services.

Implications: Being in Canada has a paradoxical role in the experiences of and responses to abuse/violence among older Tamil women. On the one hand, being in Canada has given them more opportunities to escape from the abusive situation. On the other hand, they feel more vulnerable to abuse/violence and neglect as well as restricted in responding to it. Based on the findings, we offer a number of recommendations for health care professionals, social and settlement workers, and policymakers. Some of the recommendations included: Addressing family and community expectations of older women that lead to abusive situations; Establishing language training and further education and employment opportunities for older women; Offering linguistically and culturally appropriate services, supports, and care; and removing immigration sponsorship criteria.

Study Report

Background

Older immigrants

In Canada, “immigrants represent a considerably large group among seniors. In 2001, approximately, 29% of people who are 65 to 74 years old, and 28% of those aged 75 to 84 years were immigrants (Turcotte & Schellenberg, 2006, p. 271). The proportion of older immigrants is even higher in the major cities across Canada. For example, of all seniors who resided in Toronto in 2001, 63% were immigrants. This figure was 41.5% and 51% in Abbotsford and Vancouver respectively (Turcotte & Schellenberg). Among older immigrants who arrived in Canada in or after 1991, 75.6% belonged to a racialized community (Turcotte & Schellenberg). Women represent a greater proportion of the older immigrants. For example, in 2001, approximately 58.5% of immigrants in the 65 to 74 year old group were women (Turcotte and Schellenberg, 2006).

Violence Against Women

Elder abuse is a “single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person” (WHO, 2008). WHO defined five types of elder abuse: physical, psychological/emotional, financial/material, sexual, and neglect. These have serious physical and mental health consequences. Elder abuse is a global health problem (Sherman, Rosenblatt, & Antonucci, 2008). According to Statistics Canada reports on victims of violence, while both older and younger victims experiences abuse/violence at the hands of someone known to them, nearly half of older victims were abused by a family member (compared to about 35% among younger victims). While considerable health research is emerging in the U.S. and Canada on the topic of elder abuse (such as, Anetzberer, 2005; Brandl, 2007; Brandl et al., 2003; Gorbien, 2005), a search of the published literature showed no Canadian health research on abuse/violence against older immigrant women.

Community Context

Since 1983 riots and ensuing civil war in Sri Lanka, approximately over 500,000 Tamils have been internally displaced and more than one million Tamils have fled Sri Lanka seeking refuge elsewhere. Canada has the largest Sri Lankan Tamil community outside of Sri Lanka. The majority of Tamils in Canada have settled in major urban centers such as Vancouver, Edmonton, Ottawa, and Montreal. Over 250,000 Tamils are living in the Greater Toronto Area (Cheran, 2000).

Several research projects (such as Beiser et al., 2008; Guruge, 2007; Hyman et al., 2006; Kanthsamy, 2005) have been conducted with/in the Tamil community in Canada. Beiser et al.

(2008) survey on mental health points to the importance or the impact of social isolation, limited income and financial dependence, and language barriers as increasing the older Tamil immigrants' reliance on their adult children. The findings also indicate that the elderly takes on more work than they can or prefer to do because of the obligation they feel about helping out their children who are often their sponsors and/or the social exclusion the families face in the larger Canadian society.

As is the case in most communities and societies around the world, violence against women exists in the Sri Lankan Tamil community. In a study conducted by Hyman et al. (2006), older Tamil women participating in a focus group discussion noted various forms of intimate partner violence (IPV): physical abuse, suspicion, beating everyday, insulting and criticizing wife's parents or family, "hurting the mind," and strong words or "calling animal names." Guruge's (2007) study on IPV/wife abuse included a number of older Tamil women. One older woman spoke about additional harassment that she experienced from her adult children who wanted the woman to return to her husband (the children's father). However, none of the studies went beyond partner violence and none of the studies focused on the older Tamil immigrant women's experiences of abuse/violence and neglect in the post-migration context. No other Canadian health science research examined the topic among older immigrant women.

While this project builds upon our previous work (such as Guruge, 2007; Kanthasamy, 2005), the primary impetus for the project came from our community partners, in particular, from Vasantham, Tamil Seniors' Wellness Centre.

Theoretical Framework

The study was informed by a social determinants of health approach and a feminist theoretical perspective.

Method

A qualitative methodology was used in this study.

Following ethics approval from the appropriate agencies, we recruited participants using word of mouth. Participants for individual interviews (n = 18) were recruited from different parts of the Greater Toronto Area (GTA) i.e. downtown Toronto, Scarborough, North York, Markham, and Etobicoke to ensure diversity of participants. Individual interviews were conducted to gain an in-depth understanding of the topic and to hear about the unique experiences of women. The interviewers used a combination of unstructured to structured, and open-ended to close-ended questions to allow maximum flexibility in exploring the topic in-depth.

Following individual interviews, we carried out focus group discussions with 3 groups of women (n = 25) who were not part of the individual interviews to simultaneously seek the opinions of participants about the common experiences across individuals to both confirm the emerging

themes from the individual interviews and to fill the gaps in the emerging ideas. The 3 focus groups were held with participants from Downtown Toronto, Scarborough, and North York.

Almost all interviews and all focus groups were conducted in Tamil to allow those who do not speak English an opportunity to voice their opinions and concerns. The interviews and focus groups were on average approximately 1 ½ to 2 hours long. An honorarium was provided to participants to defray the costs of participating (i.e. time, transportation, and childcare for their grandchildren).

Data analysis

The data obtained from the interviews and focus groups were translated into English and transcribed, and imported to NVivo8. Using a few initial interviews as a guide, the PI prepared a coding scheme, which was modified by the whole team during the coding of the remaining interview and focus group transcripts during several full and partial team meetings. Following the initial inductive thematic analysis, we examined the findings in terms of the theoretical perspectives used in this study.

Study participants

As can be seen in Table 1, a diverse group of women participated in the study. Their age varied from 48 to 85; length of stay in Canada varied from 3 to 30 years; and level of education ranged from 2 years to completion of university education. Their length of marriage varied from 20 to 57 years. Twenty-two women were married, 6 were divorced, and 15 were widowed. They had from 0 to 10 children. With regard to age, even though we invited women who were at or older than 55 years of age (as per the definition of retirement age in Sri Lanka until recently), two women who were 48 years old wanted to take part in the study, as they felt that due to physical disabilities they belonged in the category of "older" women. They were not turned away.

Table 1

Demographic information of the study participants

Variables	Individual interviews participants (n = 18)	Focus Group # 1 (n=9)	Focus Group # 2 (n=8)	Focus Group # 3 (n=8)
Age	48 - 85	48 - 72	54 - 77	62 - 79
Years in Canada	3 – 30	3 - 25	3 - 18	7 – 18+
Level of education	2 – university	6 – 13	10 - university	2 – 13
Years of marriage	20 – 57	22 – 53	20 – 57	34 - 56
Marital status				
Married	n = 9	n = 6	n = 3	n = 4
Divorced	n = 3	n = 1	n = 1	n = 1
Widowed	n = 6	n = 2	n = 4	n = 3
Number of children	0 - 10	1 - 5	1 - 8	2 - 8

Results

1. Experiences of abuse/violence and neglect

The participants' accounts offered vivid descriptions of their experiences of various forms of violence including emotional, physical, sexual, and financial abuse as well as threat, neglect, and control. In most cases, the primary abusers were the women's husbands. As is the case in almost all communities and societies across the world, IPV/wife abuse appears to be a serious concern for older Tamil women. In addition to their own experiences of IPV, the participants in individual interviews and focus groups discussed familiarity with other older Tamil women experiencing IPV. Both the individual interview and focus group participants also spoke about various forms of threat and control they experienced at the hands of their children, children-in-law, and grandchildren. The excerpts below demonstrate some of their experiences:

Husband:

If my husband saw me talking to any woman, he would ask me what I told them. If he saw me talking to a man, he would ask what is there to talk with a man and would beat me...it doesn't matter if the man was my uncle, cousin, or an elderly relative... (I # 10)

My husband scolded me, 'why should you study? You have children to take care'. But in Canada I need English wherever I go. He said that I shouldn't go to school.... He then asked me to go for work. I asked him, how I could go to work if I didn't learn English. I should know English to talk with my co-workers. (FG # 1)

Adult Children:

P2: They [the adult children] expect the seniors to cook and look after the house when they go to work. And the seniors have to take the grandchildren out for classes. Some older parents don't even know that they could receive money [from social assistance] and can go out.

P: The children sponsor them by themselves, and take their parents' money.

P1: They [the older couple] can no more live together.

I: Why?

P: To look after the children. If the adult children have two or more children, everyone will invite them [the older couple] to look after their children. So, father will stay with one child and the mother will stay with another. (FG # 3)

P: The mother lives in the basement. The daughter does not give the mother a key to the rest of the house because she thinks that her mother will sleep on the sofa and won't keep the house clean. They always keep the house locked. They give her less food as giving to a dog. Life in the basement is very hard. At times it will be very cold and even hot as well. The son-in-law and the grandchildren keep quiet. (FG # 2)

Children-in-law:

He [the son-in-law] thinks that I am a widow and why should I have anything on my own name, and why can't I give everything to them and just be a slave to them. (I # 14)

She was receiving welfare. Her son-in-law had asked her for money but she had refused. So he chased her away from their home. She was living with someone else but her daughter was still talking to her. The son-in-law got to know this and the daughter had problems in the family. So she [the older woman] went back to Sri Lanka and lived with another daughter there in Colombo. (I # 18)

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P2: *Some women take their husbands away so their mothers-in-law can't live with them. They won't give them a chance even to look at their grandchildren. (FG # 2)*

Grandchildren:

P1: *There, in Sri Lanka, everyone listens to elders' words and respect them. But here I see no one listening to their elders. No one is obedient and respectful.*

P2: *Here we're just grandparents. (FG # 3)*

When they were kids they will be very close with their grandparents but as soon as they grow up, they will start to tease us and make fun of us. (FG # 2)

Both sons/sons-in-law as well as daughters/daughters-in-law were implicated in the abusive and neglectful acts. Only a few participants spoke about the kind of neglect they experienced by their grandchildren. The control that the children (and children-in-law) exerted over their parents was high in many cases. According to both the focus group and individual interview participants, some older women were not allowed out and others were not allowed in, and their comings and goings were controlled and monitored carefully.

While some of the adult children were worried about the safety of their parents, others did not want to face "unnecessary" problems in case if their mother/parent go out and talk about "family problems" or simply gets lost on the road due to unfamiliarity with the city and/or the language. In many cases, the adult children were pressed for time, and their requests for help from their mother came as an expectation or a requirement that were placed upon them including the household work and (grand)childcare. Regardless of the reasoning the participants felt abused, neglected or controlled.

The participants spoke about the pre-migration context in which the older people were much respected and revered. The adult children sought their older parents' advice regarding most life situations. However, in the post-migration context, the situation is reversed and often older people are dependent on their adult children for advice, information, and support because often the adult children have been living in the country longer than the older parents, or due to financial, language, and/or transportation barriers they face in the post-migration context. The degree of dependency the older women have on their adult children along with the culture of the new country and its emphasis on nuclear family and individual rights puts the older immigrant women at a disadvantage.

The participants also discussed the various kinds of power, threat, and control that the Tamil community in Toronto exerted on them. The excerpts below demonstrate some evidence of the community's control over older women's actions and choices:

It's not that I hate my language but because my environment now is different, so, I need to talk in English. But they complain if I talk in English. (I # 14)

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I was already old when I joined the work. But I didn't care. Others [other Tamils] always ask me why my children let me go to work. They laugh at me sometimes (FG # 2)

Some of the control that the community placed had to do with older women's choices about living alone, speaking Tamil/English, dressing up according to Sri Lankan/Canadian style, or finding paid employment, or seeking external help to deal with abuse/violence and neglect that the women encountered within the family. Those who did not abide by the community expectations and rules were often perceived as shaming themselves, and 'worse,' shaming their children and grandchildren.

The participants also experienced neighborhood violence in their urban/suburban contexts. For example, the next excerpt from a focus group discussion (Participants = P, P1, P2...) demonstrates some of the issues that the older women face in apartment buildings:

P: We face so many problems in our apartment building.

P1: Some play songs at night in a high volume. We cannot sleep.

P2: Once, when I was walking back home from the store, a lady came beside, pulled my bag and ran away. It happened just in front of our building entrance.

P: We try to get back home as early as possible. We're afraid of going in the elevator after 8pm. (FG # 2)

Such situations left the older women concerned about their own safety. Such situations also became rationale for the children/children-in-law's control over their older parents' (especially mothers') comings and goings when children/children-in-law are busy or not available to know whether the older women are safe or not. This situation in the post-migration is different from the pre-migration context where older women were familiar with the neighborhood and fluent in the language, and older women were more respected.

In addition to such community control and neighborhood violence that the women experienced, participants also spoke about various forms of societal violence such as, ageism, racism, and ethnic discrimination that the women themselves and/or their husbands experienced in Canada:

Our daughter sponsored us. My husband was looking for work but he couldn't find one since he was a senior. This affected our life. We had to rely on our children for everything (FG # 2)

The government is unfair. They say for the first three months we can't receive anything and then for 10 years we can't break the sponsorship no matter what happens. If the husband has sponsored the wife, she has to go to work and give her whole income to him. That's the law. (FG # 1)

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We can go to a travel agency and book a ticket but recently I heard a travel agency has cheated so many people who have tried to book tickets to Sri Lanka. All the xxxxxxx temple devotees lost their money in it. My husband's sister lost her money as well. I can ask my son but he seldom has time to do such things. He has to go online to check whether there's any cheaper deal going on, so we'll wait until he has time. Since we're not familiar with using the computer we can't do things on-line. (FG # 2)

These excerpts show a number of ways in which older women felt that the society contributed to their vulnerability directly and indirectly. In the first, a participant highlighted the impact of ageism on the woman's husband which also has an impact on the woman. While ageism can affect Canadian born older women also, the impact of ageism was perceived to be severe on the older immigrant women and those belonging to racialized communities, in particular. The participants also spoke about the government's failure to protect the older people as contributing to their vulnerability and abuse. For example, the last excerpt on p.8 indicates that the woman believed "it is the law" that she had to give her income to the husband. This was not an isolated perception. The failure to provide accurate information to older immigrant women about their rights and/or how to protect themselves from fraudulent claims made, for example, by various businesses or service providers was considered a serious neglect on the part of the government. As such the larger society was implicated in the abuse and neglect that older immigrants' faced. Along with this issue are the scams that go on in society cheating new and older immigrants.

Moving across the world and settling in a new city where one faces language, transportation, and weather related barriers can be challenging and life-altering at any age, however, this can be more difficult for older people and women, in particular, given that they live in a gendered, racialized, classist, and ageist society. Thus, the findings of this study have to be understood in the immigration and the post-migration contexts.

2. Women's responses to abuse

When the older women experienced abuse and/or neglect, they felt they had only two choices: move out of the current home or remain in the current home with the abuser. None of the two choices provided an appropriate solution to the problem, thus, the participants spoke about often struggling to make a decision.

Moving out was considered only when the participants felt they could no longer tolerate the abuse or the neglect. Moving out often meant moving out to live with another family member or finding one's own place or, when both these options were not possible, moving out to a shelter. Some of the complexities involving moving out are evident in the following excerpts:

I knew a woman; her daughter owns a house but had rented the basement to someone else. So the mother is living in another basement. She says she will have problems if she lived with her daughter. The mother is suffering a lot (FG # 3)

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I didn't like the way my daughter-in-law treated me. So I asked my son to find me another place to stay. Another son of mine was here, so he found a place for both of us to stay. (FG # 1)

I was living with them [one child and her family] for a while. Then I moved to a bachelor apartment. Then I received a metro house. Then, my younger son moved to Toronto. So I left the metro house and rented an apartment to live with him. (FG # 3)

In some cases the women had to move out of the second home also. However, moving out was not an option for most older women. Participants identified many reasons for this difficulty (which we have discussed in the next section).

The participants' accounts also show that those who could not move out of the abusive home, often attempted to make the best possible out of the situation as well as fight for their rights regardless of the consequences of such acts and behaviors. This is evident, for example, in the following excerpts:

He said that I shouldn't go to school. I didn't say anything to him. I just went to school on my own. (FG # 1)

Even my husband's relatives tried to rule me like this but I chased them away. They asked me to stay at home and not to go outside. (FG # 2)

Some others felt that given that their children are busy and it is highly difficult to find a suitable job at their age, especially when they are new to Canada, seeking formal social and settlement support and services to cope with the abuse and neglect was necessary.

Determinants of women's responses to abuse/violence and neglect

Seeking and obtaining formal social and settlement support was often difficult, especially for those who did not speak English. They had to approach Tamil service providers to obtain such support. This meant having to face the fear of the potential for other community members knowing about the abuse and/or women's actions.

Many other factors prevented most women from leaving the abuser or the abusive home or seeking support to better respond to the situation. These factors, by and large, were related to: their children's and grandchildren's welfare; family and community expectations; unfamiliarity with Canadian ways (weather, transportation, language); limitations in health social and settlement services; and financial and immigration obligations.

Children's and grandchildren's welfare

One of the key factors that shaped women's responses to abusive situations was their gender role socialization regarding ideas about the good wife/mother/grandmother. Women are expected to take on the roles of the nurturer and carer for the family, which places an enormous burden on them to remain in and preserve their marriage and/or maintain family harmony at all costs. The following excerpts show evidence of such thinking:

Here I was put down [by son-in-law] and that made me very unhappy. But my daughter is the only daughter and I can't leave her and go, because it will be bad for her children so I thought I should sacrifice my life for those two children [grandchildren]. (I # 14)

My children keep forcing me to live with him [husband]. I am living alone, there's no one to look after me. My children rented us rooms in the same buildings. He lives on the 10th floor and I live on the 3rd floor. (FG # 3)

As can be seen from the above excerpt, the pressure on women to remain married also came from their own family members living in the GTA. Women were also prevented from seeking help from anyone outside the family because of various reasons some of which included the circumstances related to the civil war, to getting the unmarried adult children married off, or to the financial situation within the family.

Community expectations

Participants felt considerable pressure from the community to take a particular course of action in response to an abusive relationship. The following quotes support these ideas:

My husband is a very troublesome person. Others [other Tamils] advise me to adjust with him. But if I kept living like that I will end up as a mentally challenged person. (FG # 2)

In our Tamil community, people say we shouldn't tell about the abuse to anyone, because it's disgrace. I never told to anyone, won't even cry louder when he beats me. (I # 10)

The community perception of self and being part of the community are important considerations for women because of the various forms of subtle and overt racism and othering they experienced in the larger Canadian society. Therefore, going against the community or its expectations was not an easy decision or a task for the older women.

Unfamiliarity with Canadian ways

The new setting in Canada was an unfamiliar space/place to many older women especially those who arrived more recently. Those who had family members and friends who were well established in the GTA found the process of getting to know the place much easier. However, in general, a number of factors such as language, weather, and transportation posed significant

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barriers for older women experiencing abuse and/or neglect. These barriers also negatively influenced their seeking support to better deal with the abuse. The following illustrate the challenges of settlement and highlight a number of factors related to the Canadian context:

I had financial problems and language barriers. It was hard to survive with this weather since I have asthma. At the beginning it was hard to find Tamil friends. I didn't have much support at first. (FG # 3)

I couldn't go out on my own since I didn't know English. So life was hard in Ottawa. ...It's really hard to survive here without knowing English. (FG # 3)

Here we have no one to ask. If it was Sri Lanka, neighbors would speak for the woman. But here, there's no one to speak for us. So we have to try and get outside support. But it is difficult if you don't speak English. (I # 8)

In addition to the language differences, transportation barriers and Canadian Winter weather literally isolated the older women and left them even more dependent on their abusers.

Limitations in accessing health, social and settlement services

Limitations in the accessibility and availability of services were noted as a significant concern by the participant in both individual and focus group meetings. One of the related key concerns had to do with the lack of familiarity with the available services and difficulty getting to the services as well as the lack of culturally and linguistically appropriate services. Participants in one focus group, for example, spoke about some of those concerns in the following manner:

P1: Those who are educated can do everything, but others can't.

P: Some parents don't know anything about the money and they even can't go alone and speak for themselves. The children won't allow them to go anywhere.

P1: They don't know anything about the law.

P: They're not aware that the government can give them some money to survive.

P1: In our building, those who can do their things by themselves, do OK. But those who really need help don't know how to reach for help.

P2: They can find help if people guide them (FG # 2)

Some participants spoke about other older women in the community who remained in abusive situations because they did not know where to go for help or how to get there. They were perceived as being worried to ask for help from other community members for fear or stigma or the worry of information getting back to the abuser. Others were worried about the limitations in the services available:

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Nursing homes mostly have people with severe illnesses. Once, no one answered the door of a room. After a couple of days, they broke down the door and went inside and found the person dead. (FG # 1)

We need more time to get ready. That's a problem with aging, isn't it? The elevator won't come on time in our apartments. So, in that case seniors miss their Wheel-Trans. They will only find a note when they come down. It happens very often. (FG # 2)

Financial and immigration concerns

The biggest hurdles identified were related to older immigrant women's financial situation and their fear of the immigration sponsorship criteria. There were also often the same reasons that the abusers used to keep the women "in place" and/or "under control." Participants spoke about their concern that because of the way the Canadian immigration system is set up, the women's actions, such as going on welfare or being unemployed, or filing charges against the husband or the children or the children-in-law, could negatively affect their chances of sponsoring any other relatives. For example, one woman spoke about her son's control and persistence that she should not apply for social assistance because of his fear of consequences of such actions on him:

My son didn't want me to apply for welfare. So he didn't give my passport and other documents. So [the legal officer] wrote to my son asking him to submit my passport or else he should come to the courts. He then sent me the documents and I applied for welfare (I # 15)

Most participants noted that immigration sponsorship criteria were of significant concern to them and their families that prevented most older women from seeking external help.

3. Older women's resilience and new opportunities

Despite the many barriers and constraints the participants faced, their stories showed remarkable resilience. The participants spoke about other older Tamil women who similarly showed untold resilience. The older women also took advantage of the fact of being in a new space and place, looked for many new opportunities to improve their lives by taking on new jobs, engaging in new hobbies, learning a new language, or volunteering at various informal community groups. They also felt more encouraged to separate from their abusive family member, be it their husband or children or anyone else in the family. The following excerpts demonstrate some of their attempts to build a new life with some self-dignity and self-esteem.

I came to Canada 5 years ago. I got separated from my husband three months after my arrival. (I #6)

I don't mind living with children but I thought it would be better if I lived alone. I want to live with self-respect. (FG#2)

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I have seven children. I understand that everyone is different, so I applied for a senior's home and I am living happily. All my children visit me. (FG#2)

Those who could access formal social supports and services felt that they were able to begin an independent life. While many felt that they could not approach their community members for support because of various (previously discussed) reasons, by and large, most had received support from other community members or community leaders or they themselves had helped other Tamils in similar situations. However, it was not clear whether, had they had a choice, they would have sought help from counsellors from other ethno-cultural backgrounds.

Discussion

This study incorporated the voices of women who are currently experiencing abuse, violence, and neglect not only at the hands of their husbands, but also other family members such as their own sons and daughters, and their sons- and daughters-in-law. By speaking with women about their individual situations, we were able to gain an in-depth understanding of their experiences and their responses to abuse and neglect. This approach to our study also provided a window into the resourcefulness and resiliency of these older women. To our knowledge, no other Canadian health science research has explored this topic.

Our findings show that older women experienced emotional, physical, sexual, and financial abuse from their husbands. This result is similar to other studies' findings on IPV throughout the lifespan among both immigrant and non-immigrant communities (Fisher, Zink, & Regan, 2006). Our study went beyond the focus on IPV to include an exploration of abuse and neglect that the older women suffered at the hands of others, including their children and children-in-law. The kinds of abuse they experienced from their children and children-in-law included emotional, physical, and financial abuse, as well as various forms of threat and control. Both sons and sons-in-law, as well as daughters and daughters-in-law, were implicated. Summarizing the general literature on elder abuse, Fryling, Summers, and Hoffman (2006) noted that while both men and women can commit abusive acts against the elderly, men represent a higher percentage of abusers (except in the area of neglect where there appears to be a relatively equal representation), and that most offenders are the adult children. In the pre-migration context, the elderly were respected and cared for, and adult children went to their older parents for advice regarding most life situations. However, in the post-migration context, the situation was reversed. Older people became dependent on their adult children for advice, information, and support because often the children had been living in the country longer than their parents or because of financial, language, and/or transportation barriers the elderly faced in the post-migration context.

Moreover, the older women experienced various forms of threat and control from their community. The findings show that the community exerted considerable control over the older women's decisions regarding leaving the abuser, living alone, engaging in paid employment, or refusal to engage in unpaid work. The underlying patriarchal belief is that the women should

sacrifice their life for the benefit of their children and grandchildren. Our previous work on IPV (e.g., Guruge, 2007) showed that older women are more vulnerable to control from their community when they become widows since the women's social status is often tied to that of their husbands. For example, as widows, they often are not allowed to take a central role in various rites of passage such as the marriage or puberty ceremonies of their children and grandchildren.

Our study findings also show how the society at large was implicated in the older immigrant women's experiences of abuse and neglect. While both immigrant and non-immigrant elders experience ageism, for older immigrant women, convergence of multiple "isms" of oppression, including ageism, sexism, racism, and classism, have made older immigrant women from racialized communities "invisible" to society. Owing to immigration rules, seniors are dependent on their sponsors for 10 years following their immigration to Canada. Even at age 65, many are not entitled to social security funds due to their late arrival in Canada (Guruge, Kanthasamy & Santos, 2008). They are unable to secure employment in the new setting because of language differences, lack of prior "Canadian experience," ageism, and racism; as a result, they are often dependent on their children. Even if they receive a pension, most often such income is given to or taken away by their children as a result of the financial difficulties the children face in the new context. For older women, lack of or loss of finances and consequential financial dependency create fear of poverty, loss of social status at home and in the community, loss of self-esteem, and stress. Beiser et al.'s (2006) findings also showed that financial stresses negatively affected Tamils over 50 and that even with limited finances, some felt obligated to assist their children financially.

Barriers to knowledge about existing services and to accessing and using such services, as well as the lack of appropriate services, were noted in the current study as preventing women from accessing the available services. Although abusive acts and neglect also took place in the pre-migration context, participants perceived that the women's vulnerability to abuse and neglect increased in the post-migration context. Moreover, they perceived that various factors specific to the post-migration context reduced women's opportunities to respond to abuse and neglect in a manner most suitable for them and their families. The findings indicate that those factors created situations in which changes in family dynamics, social isolation, older women's financial and transportation dependency, and lack of time and support for the families appeared to shape older women's responses to abuse and neglect. Similar findings were noted in our previous studies in the Tamil community (e.g., Guruge, 2010; Guruge & Humphreys, 2009; Morrison, Guruge, & Snarr, 1999) regarding the barriers to disclosing IPV. The barriers identified there included lack of awareness of their rights; feeling shame and embarrassment; feeling that it would be disloyal and a betrayal; feeling they deserved the abuse; not wanting to be responsible for hurting the abusive family member; fearing reprisal or other consequences such as abandonment, being moved to an institution, family break-up, or being alone; being concerned about confidentiality and the desire to protect their own and their family's standing in the community; believing that family problems should be kept within the family; and limited social

support. These factors are not unique to immigrant communities. What may be unique to the post-migration context are geographical isolation, financial constraints following immigration, language difficulties, immigration and sponsorship criteria, loss of or limited social networks and support, and the new (post-migration) context. Although the previous studies were about IPV specifically, our current study showed similar barriers for the older immigrant woman dealing with abuse and neglect within other relationships.

Study Limitations

Recruitment of study participants involved convenience and snowball sampling strategies, which might have restricted our sample representation. Even though 4 of the 9 members of our research team were fluent in Tamil, it is possible that we lost some of the cultural nuances during the translation of the interviews and focus groups that were conducted in Tamil.

Conclusions and Implications

The study provided meaningful insights into the perceptions of and responses to abuse/violence and neglect among older immigrant Tamil women in Canada. These insights highlight a need for work at the individual, family, community, and societal levels to support the women who are experiencing abuse and neglect and also to stop abuse and neglect from happening in the first place. Some of the actions/activities that can be undertaken in collaboration with/by policymakers, agency administrators, community leaders, researchers, social and settlement workers, and health professionals include:

- make available more accessible health, social and settlement services to older women and men;
- advocate to eliminate government restrictions that affect older people and the criteria of sponsorship;
- address social support programs and networks;
- increase the accessibility of existing services by staffing Tamil speaking service providers;
- organize intergenerational social and cultural events;
- identify a single point of entry of access for information and services;
- translation of existing documents regarding the rights of newcomer women and make them widely available at various community locations as well as at points of entry to Canada;
- raise further community awareness of the negative impact of abuse;

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- work with community leaders to address community norms that lead to abusive situations;
- establish language training and further education opportunities for women;
- offer linguistically and culturally appropriate one on one counselling;
- arrange transportation and escorts for older women experiencing difficulties with mobility;
- advocate for policies that address financial concerns of older immigrant women.

In addition, it is also important to fund more research to answer questions such as: What are the common post-migration factors that lead to older woman abuse across immigrant communities? What can be put in place across communities to better support older immigrant women dealing with abuse? What individual, family, community, and societal factors can be addressed to stop abuse and neglect from happening in the first place?

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45 Charles St. East,
Suite 101
Toronto, ON, Canada
M4Y 1S2

Tel 416.972.1010

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