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Examining Recent Older Immigrants' Lives in their Communities and their Experiences Contributing to Canadian Society

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A thesis submitted in partial fulfillment of the requirements for the Master of Science degree in Health and Rehabilitation Sciences

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Abstract

This thesis investigated recent older immigrants' experiences contributing to Canadian society, focusing on older adults who moved to Canada to join their families in Canada. Narrative inquiry was used to gain insight into recent older immigrants' lives and experiences. Four participants were interviewed three times each. Analysis involved a holistic-content and a life course approach. Three themes were identified: (1) Receiving and Giving Back; (2) Staying in the Background; and (3) Contributing as Expressing Identity. This study highlights and acknowledges recent older immigrants' informal and hidden contributions, the multiple ways they contribute, and the challenges they face in doing so. Furthermore, it demonstrates how recent older immigrants experience contributing to their families and communities and how family class immigration is connected to strong family and cultural rather than economic values.

Keywords

Older Adults, Recent Immigrants, Contributing, Narrative Inquiry, Life Course Approach

Lay Summary

Canada is experiencing a high increase of immigration. Immigrants currently make up to 22% of Canada's population. Each year, Canada welcomes up to 17,000 older immigrants who came through the family class program. The Canadian society is often perceived as tolerant and inclusive, especially towards minorities. However, discourses about older immigrants as a drain on resources and of little value to Canadian society are gaining prominence. There is a discrepancy between Canada's immigration policy and the Canadian society. On the one side, the Canadian government encourages immigration and provides a list of integration services for recent immigrants. On the other side, immigrants who come to Canada and contribute economically are more welcome into this country than immigrants who do not or cannot contribute economically.

This thesis investigated recent older immigrants' experiences contributing to Canadian society. The term 'recent older immigrant' refers to someone who immigrated to Canada as an older person. They most likely entered Canada through the family class program and live together with their families in Canada. Four recent older immigrants were interviewed and shared their story about living with their families and contributing to their surroundings. Three themes were apparent which were labeled as: (1) Receiving and Giving Back; (2) Staying in the Background; and (3) Contributing as Expressing Identity. This study highlights and acknowledges the contributions older immigrants make, which might be unrecognized by broader society, but visible and important to their immediate community, families, and to themselves. This knowledge can support recent older immigrants' inclusion in society, their well-being, and their quality of life, as well as benefit their surroundings.

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Chapter One: Introduction

1.1 Positioning in Field: The need to give back to Canada

“We are very pleased to inform you that you have been recommended to begin a Master’s degree at Western University.” - Two years ago, I relocated from Germany to Canada to continue my academic career at the graduate level. I moved in with my cousin, her husband, and their two small children into the house where they had lived for the past ten years. I considered myself lucky to have been accepted into the Master’s program at Western University. Also, I was happy that I could live together with my family who cared for me and gave me a nice home. From the moment I entered the immigration office at the airport in Toronto to my first class at the university, I felt welcomed. I was helped to settle in as quickly and comfortably as possible by everybody I met. I was surprised by everything I received: funding for my study; my own working space at the university; deliciously prepared dinners by my family; and so much more. It seemed as if I got more than I deserved and could give back. And exactly because of this, a feeling of guilt became my companion.

Despite all these efforts made by seemingly everybody around me, I still experienced feelings of homesickness, loneliness, and culture shock. Oftentimes, I felt like a foreigner in a country I did not seem to belong to. I realized that these feelings might seem odd coming from me who was constantly surrounded by her family and moved from a country that does not differ much from Canada. But my life in Canada still seemed completely different than the life I had before. It felt wrong to me to have those negative feelings in light of everybody putting a lot of effort in order to accommodate me; so my guilt grew.

After a couple of months, I decided to tackle this feeling of guilt by trying to contribute to my surroundings. I wanted to give back to others rather than to receive from them. I tried to give back to the university by becoming a more hard-working student. At home, I took over the children’s morning routine and helped out whenever I was needed. The more I contributed, the less guilty I felt, and the more I enjoyed my stay in Canada.

This personal experience made me wonder if others felt the same; especially if they came to Canada without the intention to work and having lived in their home country most of their lives. Do they also have the need to contribute? If yes, how do they give back? How do they feel when giving back? These questions motivated me to look deeper into this topic and explore how recent older immigrants experience immigrating to Canada and contributing to their surroundings.

1.2 **Research Purpose**

In the past decades, Canada has been experiencing two major demographic changes: an increasing proportion of older adults and a high rise of immigrants (Statistics Canada, 2017; Turcotte & Schellenberg, 2010). Immigrants currently make up approximately 22% of Canada's population (Statistics Canada, 2017). Many immigrants choose Canada as their new home due to beneficial economical, health, or political conditions, and to unite with their emigrated family members. For 2019, the Canadian government is planning on admitting more immigrants to live in Canada through the parents and grandparents sponsorship mechanism¹ which will lead to a higher proportion of recent older immigrants in Canada (CCIRC, 2019). Aside from a growing number of immigrants, the Canadian population is aging. The demography of an aging population is characterized by a growing proportion of older individuals, who are over 55 years of age, at greater rate than the proportion of younger individuals (Chappell & Hollander, 2013). In Canada, the size of the older immigrant population (60 years and over) is increasing more rapidly than the Canadian-born older population which means that immigrants will represent a larger proportion among the senior group of 65 years and up (Turcotte & Schellenberg, 2010).

Canadian society is often perceived as tolerant and inclusive towards diverse social groups. However, discourses about older people and immigrants as being a drain on resources and contributing little to Canadian society are gaining prominence (Esses, Jackson, & Armstrong, 2010; Nangia, 2013; Townsend, 2010). Nevertheless, studies show that immigrants as well as older Canadian-born citizens do contribute meaningfully to society (Evra & Prokopenko, 2019; Morrow-Howell, Hinterlong, & Sherraden, 2001). Whereas younger immigrants contribute to Canadian society mainly through employment (Evra & Prokopenko, 2019), older Canadians continue contributing by engaging in volunteering activities, helping and supporting family members, being politically active, and much more (Turcotte & Schellenberg, 2010). However, literature lacks sufficient evidence about how older Canadian immigrants contribute to society after they immigrate to Canada as older adults. An older immigrant, who decides to spend their late life in Canada, can face challenges in contributing in ways that are personally meaningful. For instance, opportunities for formal volunteering may be limited by language barriers or lack of social contact with the community, which may in turn lead to feelings of social exclusion and lower sense of belonging (Turcotte & Schellenberg,

¹ For 2019, 20,000 immigrants are planned to be admitted to Canada through the parents and grandparents sponsorship, compared to 17,000 immigrants in 2018.

2010). In addition, their life experiences may not have involved volunteering, and they may not have a basis from which to engage in volunteering (Bass & Caro, 2001). Recent older immigrants may be more likely to serve as informal volunteers, such as caregivers for family members (Turcotte & Schellenberg, 2010). However, recent older immigrants may not consider caregiving a rewarding or meaningful activity and rather may feel a sense of obligation from family members to contribute. On the other side, within a Western culture, older immigrants may feel pressures to contribute meaningfully to their communities by volunteering but are not able to find opportunities to act respectively (Ekerdt, 1986; Hinterlong et al., 2001; Moody, 2001). Due to these potential threats, it is necessary to explore the experiences of recent older immigrants as they seek, or do not seek, opportunities to contribute to society.

This study aimed to answer the research question, how do recent older immigrants experience contributing to their families, communities, and Canadian society? The focus of the study was on individuals who immigrated after retirement in order to live with their families (i.e. children, grandchildren) in Canada. This study further aimed to identify the roles recent older Canadian immigrants play within their families and communities, the challenges, facilitators, and pressures they encounter in doing so, and the benefits or drawbacks they experience regarding contributing to their surroundings.

1.3 **Organization of the thesis**

Throughout this thesis, I use first-person language in order to demonstrate reflexivity (Berger, 2015). In the second chapter, I provide a literature review to introduce and justify the importance of studying the lives of recent older Canadian immigrants and their experiences contributing to their communities. In the third chapter, the methodology and methods of the study are explained. I describe how I collected the older immigrants' stories using narrative inquiry and how I analyzed the data through a social constructivist lens and with the life course approach and holistic-content approach. In the fourth chapter, the participants' constructed narratives are presented, and in the fifth chapter the results and themes including subthemes of the study are demonstrated. In the last chapter, I discuss the themes from the results, state limitations, implications, and propose future research, and summarize the thesis in a conclusion.

1.4 **Definitions of Key Terms**

There are several terms which I refer to throughout the thesis. In order to set a common understanding of these terms, I define them at the beginning of the thesis.

Canadian society refers to recent older immigrants' surroundings, such as family, neighbourhood, themselves, and their communities. Within this thesis, *community* refers to any group that the recent older immigrants are part of either in Canada or their home country. The definition of *contribution* is kept broad. It can reach from formal volunteering in an organization down to self-care in order to not become a burden to the immediate family. Therefore, when stating 'contributing to Canadian society', I generally refer to any contribution recent older immigrants, including the study participants, do which benefits their families, neighbourhood, themselves, and their communities.

Chapter Two: Background Literature

Research in the field of migration has never been more needed in order to inform policy and practices that address the challenges of migration and diversity in ways that ensure the well-being of immigrants, the support and cooperation of all members of the society, and collective benefits for the nation. Immigration is part of the fabric of Canada and makes a significant contribution to Canada's economy and society. Integration of and discrimination against recent older immigrants can have an influence on what contributing activities they are motivated to engage in or to what possibilities they have access to. Furthermore, recent older immigrants' health and well-being can determine if they are able to engage in contributing activities and in what way they contribute. Therefore, in the first part of this chapter, I present information on current immigration in Canada with a focus on recent older immigrants, their integration experiences, and their health and well-being. Next, common contributions of recent older immigrants are presented by discussing concepts of productive aging and meaningful occupations. Then, I explain how the term "contribution" is understood in this study by synthesizing literature on recent older immigrants' contributions. Lastly, I provide a rationale for then to study and pay attention to this issue.

2.1 **Recent Immigration in Canada**

Immigration is defined as the action of moving to a foreign country and the process of receiving a permanent resident or citizenship status (Parry, 2016; Statistics Canada, 2011a). In Canada, the term immigrants refers to persons who reside in Canada but were usually born in a different country and who have been "granted the right to live in Canada permanently by immigration authorities" (Statistics Canada, 2011b). Some immigrants have arrived recently, while others have spent most of their lifetime in Canada, however, the majority of them receive Canadian citizenship (Statistics Canada, 2018). Today, the proportion of immigrants in Canada has reached its highest value with more than 7.5 million foreign-born individuals (22.3%) and is predicted to continue to grow (Statistics Canada, 2017). This development has shaped and enriched the economic, social, cultural, linguistic, and ethnic structure and composition of the Canadian population. While in 1971 most of the immigrants came from the British Isles, Europe, and United States, the majority of the over six million new immigrants from 1990 to 2016 were born in Asia and the Middle East (61.8%), followed by Africa (13.4%), Europe (11.6%), the Americas, and Oceania (IRCC, 2017; Statistics Canada, 2017). This change in immigrants' source continent increased the proportion of visible minorities and decreased the

percentage of immigrants with English or French as their mother tongue from 71.2% to 27.5% (Statistics Canada, 2017). Nevertheless, English and French remain the official languages of integration into Canadian society. Only 6.8% of immigrants reported not being able to converse either in English or in French at time of arrivals (Statistics Canada, 2017).

Current domestic immigration law and policy has been most notably shaped by the Immigration Act of 1976 which was replaced by the Immigration and Refugee Protection Act in 2002 (Hum & Simpson, 2002). The acts were created by the Parliament of Canada to determine who is allowed into the country and resulted in a world-leading system in managing immigration with a non-discriminatory program. This so-called “colour-blind” system still has not changed its aim to avoid assessing potential immigrants regarding their personal features, such as race, ethnicity, colour, religion, gender, and nationality (Canada & Canada. Regulations, 1983; IRCC, 2017). However, the history of immigration to Canada has been criticized by its hidden racist eligibility criteria as they favour certain factors which are supposed to ensure an easier integration of the immigrants. Therefore, the criteria are focused on rather European, white immigrants who are easier to be integrated culturally and socially into the existing culture of Canada.

People are able to immigrate to Canada through four main categories: economic immigrants, refugees, humanitarian immigrants, and family-class immigrants (Statistics Canada, 2017). Temporary foreign workers, Canadian citizens born outside Canada, and individuals with student or working visas are not considered immigrants (Gilmore, 2012). The Canadian government states a number of goals of accepting immigrants to Canada. Economic immigrants can enhance and promote Canadian economic development; by admitting refugees, Canada aims to fulfill its international obligation and uphold its humanitarian tradition; and the objective of the family class program is to reunite families. Economic immigrants constitute the biggest proportion of the immigrant categories (60%), followed by people who joined their family already in the country (27%), and refugees (12%) (Statistics Canada, 2017).

“Recent older immigrants” is the term that is used to refer to someone who comes to Canada and goes through the stages of initial settlement as an older person (usually 65 years and up). Those older immigrants, whose motivation to immigrate was to live together with their families, entered Canada most likely through the family class program (McDonald et al., 2001). Adults who currently hold Canadian citizenship or residency are eligible to sponsor a family member to join them in Canada (Government of Canada, 2019a). In the Acts of 1976 and 2002, ‘family’ refers to the father, the mother, and children who depend on support by their parents

due to their age or disability (Canada & Canada. Regulations, 1983). Furthermore, spouses, partners, parents, grandparents, and adopted children are eligible to be sponsored by their family member living in Canada (Government of Canada, 2019b). Under certain circumstances, other blood relatives, such as cousins, aunts, uncles, nieces, and nephews can be admitted through the family class (Government of Canada, 2019c). For all types of sponsorship, the sponsor needs to be able to support the sponsored relative financially and socially in Canada (Government of Canada, 2019b). Sponsored parents and/or grandparents are more likely women, with less education, less work experience, weaker English or French skills, not married, and of advanced age (VanderPlaat, Ramos, & Yoshida, 2012).

Through the Immigration and Refugee Protection Act, 2002, provinces gained more power in setting their own immigration laws. In 2018, Ontario's Immigration Act came into effect which positioned the province as a full partner on immigration with the federal government (Ontario, 2017a). Ontario is the most multicultural province in Canada, and almost half of all new immigrants chose it as their new home (Ontario, 2017a; Ontario, 2018). Most of Ontario's immigrants are of European origin, followed by Asian, African, Arab, and South American (Statistics Canada, 2018). Toronto has the second highest proportion of immigrants (55%) world-wide with a high rate of visible minorities (Statistics Canada, 2017b).

2.1.1 Integration of and Discrimination toward Recent Immigrants

How a recent older immigrant experiences immigration to and settlement in Canada depends on integration processes and discrimination experiences. Kymlicka (1998) considers integration a process in which the country and the newcomer have to take action. Integration and discrimination may impact recent older immigrants' experiences of contributing to their communities. For instance, in Canada there may be opportunities to engage in contributing activities that may enhance involvement in their communities. In contrast, discrimination towards recent older immigrants might limit their possibilities to engage in contributing activities outside of their homes or immediate social network. It is stated in the Canada-Ontario Immigration Agreement that the province is required to maintain and enhance the settlement and integration of immigrants to Ontario. Furthermore, Ontario's Anti-Racism Act states that eliminating systemic discrimination and racism and advancing racial equity support and benefit the development of society as a whole (Government of Canada, 2017). Canada and Ontario share an interest in maximizing the contributions of immigrants to achieve economic, social,

and cultural goals and ensuring that residents of Ontario are aware of the benefits of immigration (Government of Canada, 2017).

Certain factors are commonly seen as crucial ingredients for a successful integration including: adopting a Canadian identity, participating in Canadian institutions, learning an official language, and having inter-ethnic friendships or mixed marriages (Kymlicka, 1998). However, these criteria do not form a substantial theory of integration. Integration can also be considered a multidimensional process in which recent immigrants are able to participate in the economic, social, and political life of Canada (Joppke & Seidle, 2012). Economic integration means that immigrants can participate in the labour market with an appropriate qualification and obtain sufficient income. Social integration refers to the feeling of identity and belonging to the Canadian community by forming social networks within and across groups. Political integration involves engagement in work and social organizations and community services. Integration is seen as a reciprocal process which involves mutual obligations for new immigrants and Canadian society (Government of Canada, 2017; Omidvar & Richmond, 2005). The ideal intent is for both sides to work together to build secure and cohesive communities by eliminating barriers and the immigrant adopting norms and views of Canadian society without complete assimilation (Enzinger & Biezeveld, 2003).

In order to reduce barriers and enhance integration, the Canadian government implemented programs and strategies for recent immigrants to settle in Canada as fast and smoothly as possible. For instance, recent older immigrants are offered the provincially funded Newcomer Settlement Program through which community agencies help establish connections to job training, community services, and health care (Ontario, 2019a). Furthermore, older newcomers can take free English and French language training classes through several programs offered by the federal government (Ontario, 2019b). Acquiring official language skills as part of the integration process has been associated with social and economic benefits for recent immigrants as well as maintenance of their health (Ng, Pottie, & Spitzer, 2015). As soon as recent older immigrants receive residency status and pass the age of 65 years, they are eligible to obtain Old Age Security (OAS) in addition to the pension from their home country (if applicable) and are covered by prescription drug insurance, such as the Ontario Drug Benefit program (Government of Canada, 2019c, 2019d; Ontario, 2019c). These programs can reduce financial burden and promote health, especially for older immigrants who receive a low pension and/or have chronic diseases (Dean & Wilson, 2010).

Research suggests that recent older immigrants have a low sense of belonging to the new country, and therefore, are less likely to be motivated to be involved in integration programs or organizations (Peace, Holland, & Kellaber, 2006; Turcotte & Schellenberg, 2010). One reason for this finding is a lack of place attachment to Canada. Place attachment refers to the gamut of processes in which individuals form behavioural, cognitive, and emotional ties to their physical surroundings (Peace et al., 2006; Oswald & Wahl, 2005; Rubinstein & Parmelee, 1992). This attachment can develop through social-centred determinants, such as social norms and relationships, person-centred determinants, such as life stages in the life course, and body-centred determinants, such as the relationship of the body to environmental features (Rubinstein & Parmelee, 1992). Some recent older immigrants have a strong sense of belonging towards their new country and feel very connected to their new society which motivates them to contribute outside of their homes, whereas others have a low sense of belonging and feel excluded (Peace et al., 2007). There is a gap in research on the integration experiences and sense of belonging of recent older immigrants who came to Canada through the family class (VanderPlaat, Ramos, Yoshida, 2012). Exploring their experiences contributing to their communities can help to address this gap.

Although Canada's integration policy is considered one of the most welcoming towards recent immigrants among Western nations, the majority of Canadians indicated that they agree that Canada should accept fewer immigrants and refugees (Andrew, 2014; Omidvar & Richmond, 2005). Furthermore, immigrants who came to Canada through the family class are vulnerable to discrimination (VanderPlaat, Ramos, & Yoshida, 2012). Discrimination can be based on social markers, such as race, language, religion, country of origin and/or other characteristics and can be experienced on a scale from conscious to sub-conscious interactions on the microlevel up to institutional, systemic practices on a macrolevel (Edge & Newbold, 2013). Judgements and actions create oppressive environments that marginalize people who are targeted by discrimination (De Maio, 2010; Hilario, Oliffe, Wong, Browne, & Johnson, 2018). Nowadays, one-fifth of the Canadian immigrant population experiences discrimination by Canadian-born individuals, and recent immigrants report more discrimination than established immigrants (Nangia, 2013). This development can be explained by two main factors: visible minorities and the selectivity process.

At the beginning of Canada's immigration history, most immigrants came from British regions, Western Europe, and the United States. After Canada's economy grew, cheap labour workers were sought from Asia and Africa (Beiser, 2005). This led to an overwhelming arrival

of visible minorities in the past three decades. Canadian multiculturalism and anti-racist policies have not been adequate to resolve the growing social exclusion and racism towards those newcomers (Avery, 1979; Knowles, 1997; Menzies, 1998; Saloojee, 2003; Ward, 1990; Winter, 2001). The contradiction between Canada's official policies of multiculturalism, anti-racism, and immigration integration, and the growing reality of social exclusion of recent immigrants is becoming more apparent (Omidvar & Richmond, 2005). Feeling discriminated against can lead to a sense of obligation to contribute to Canadian society in order to limit the discrimination. Furthermore, discrimination could lead to older recent immigrants not wanting to or even being denied engaging in certain contributing activities in their communities. Therefore, discrimination may be a threat to older recent immigrants' inclusion and freedom of contributing in meaningful ways.

Besides Canada's deficient anti-discrimination policy, Canada's immigration policy has been criticized for its selectivity of immigrant types (Hum & Simpson, 2002). Immigration rates are continuously increasing in Canada, motivated by the economic needs of the country facing an aging demographic. Research suggests that Canadian government policy determines the type of admitted immigrants, and through this, affects the "quality" of immigrants (Hum & Simpson, 2002; Reitz, 2005). The immigration process favours those who are most suitable for enhancing Canada's economy (i.e. Express Entry). In particular, Ontario's immigration act focuses on receiving economic immigrants in order to enhance the labour market (Ontario, 2017). People who are coming to Canada as retirees and in advanced age have lower labour-market participation and higher levels of utilization of the public health system (Frances, 2002; Gunter, 2011; Stoffman, 2002). This immigration selectivity leads to discrepancy in Canada's society between immigrants who are economically contributing and welcomed and those who do not or cannot contribute directly to the labour market and are discriminated against (Beiser, 2005). A debate about immigrant family reunification in Canada has started in which it is stated that there were numerous cutbacks made to this policy because of the intensifying perceived competition of resources between Canadian residents and newcomers' family members (Daniel, 2005; Esses, Jackson, & Armstrong, 2010).

Some immigrants experience immigration as an opportunity to reach a better economic, social, and life quality in Canada. Others might face challenges, such as language barriers, missing connection to the community, or discrimination. The development of growing discrimination could not only hinder recent older immigrants to contribute to society and include themselves into the community, but it also has an impact on their health. Visible

minorities and immigrants who experienced discrimination were most likely to experience worsening health, especially lower mental well-being (De Maio & Kemp, 2010; Edge & Newbold, 2013). Although the economic position of Canadian society suggests that family class immigration might not be in the best economic interest of the state and recent older immigrants are viewed as a burden (Frances, 2002; Stoffman, 2002), the humanitarian side argues that family reunification leads to fundamental social, physical, psychological, and spiritual well-being of the younger newcomer population who contribute economically to Canada (Deshaw, 2006; KAIROS, 2005; OCASI, 2005). Therefore, access to family relationships and networks can support the settlement, integration, attraction, and retaining process of immigrants, and by this, benefit Canadian society as a whole (Deshaw, 2006; Khoo, 2003; Kofman, 2004; Li, 2003). Furthermore, research suggests that the age at arrival and early socialization experiences of recent older immigrants might explain variations in their integration experiences (Vang & Chang, 2018). For instance, younger recent immigrants tend to be motivated to connect with others outside of their homes, whereas older recent immigrants concentrate on their immediate families (Vang & Chang, 2018).

2.1.2 Health of Recent Immigrants

Health is another key factor that influences recent older immigrants' engagement in activities. A decline in health could limit ability to engage in their contributing activities of choice, while engaging in contributing activities may positively or negatively influence their health. Recent immigrants to Canada are, on average, healthier than resident Canadians as a result of the medical screening which occurs during the immigration process (Ali, McDermott, & Gravel, 2004; Chen, Ng, & Wilkins, 1996; DesMueles et al., 2004; Dunn & Dyck, 2000; Laroche, 2000; Newbold & Danforth, 2003). For instance, new immigrants are at lower risk of premature acute stroke, acute myocardial infarction, preterm birth, and other chronic diseases and they are less likely to report depression, bipolar disorder, and other mental health problems than long-term immigrants and Canadians (Ali, 2002; Chiu et al., 2009; Perez, 2002; Saposnik et al., 2010a; Saposnik et al., 2010b; Schaffer et al., 2009; Strafford, Newbold, & Ross, 2010; Urquia et al., 2010). However, studies have shown that new Canadian immigrants' health deteriorates over time. For instance, the longer an immigrant resides in Canada, the higher the risk of developing diabetes, sub-clinical atherosclerosis, and maternal placental syndrome (Creatore et al., 2010; Lear et al., 2009; Ray et al., 2007). The length of time when the health deteriorates varies from study to study from months up to decades. These findings suggest that the Canadian environment, such as socio-economic status, lifestyle, and communities can have

a negative impact on recent immigrants' health and well-being (Ng et al., 2005). Furthermore, the process of immigration and settlement is another factor which leads to lower well-being. For instance, a higher proportion of recent older immigrants reported poor self-reported health at or close to arrival in Canada (Ng, Pottie, & Spitzer, 2015).

As recent older immigrants experience the transition to Canada in a variety of ways, their health and well-being also vary from each other. The World Health Organization (1948; 1986) defines health as the “state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity” and as “a positive concept emphasizing social and personal resources, as well as physical capabilities.” In this definition, well-being refers to a subjective state that can be achieved through life satisfaction, experienced emotions, and self-realization or sense of purpose or meaning (Martin-Maria et al., 2017). There are three conflicting paradigms used to explain and interpret the health of immigrants: sick immigrant paradigm; healthy immigrant paradigm; and interaction paradigm (Beiser, 2005). These paradigms provide possible explanations regarding why certain health patterns among immigrants develop and what factors influence the immigrants' health status.

The sick immigrant paradigm proposes that the people who are least healthy decide to emigrate from their country of origin. This idea developed during the immigration waves before the 20th century, when European immigrants brought communicable diseases to North America (Gushulak & Williams, 2004). Studies showed that refugees and other immigrants who enter a country with unrestricted selection policies are less healthy than the native-born population (Constant, Garcia-Munoz, Neuman, & Neuman, 2018; Fenta, Hyman, & Noh, 2004; Lindert et al., 2009). However, empirical research focusing on Canadian immigrants rejected the validity of the sick immigrant effect, mainly because of Canada's restricted selection policies (see *Healthy Immigrant Paradigm*). The Immigration and Refugee Protection Act states that new immigrants are required to undergo a medical screening and can be rejected if they pose a danger to the public health or a financial burden to social services (Waldman, 2002). Nevertheless, anti-immigration ideologies still include the idea of immigrants bringing sickness to the country.

The healthy immigrant paradigm is also referred to as the *Healthy Immigrant Effect* and contradicts the sick immigrant paradigm as it proposes that the most healthy and well-adjusted people immigrate into a new country, and therefore, are healthier than the native-born population at the time of their arrival (Beiser, 2005; Hyman, 2007; Gogia & Slade, 2011; Gushulak, 2007; Ng, 2011; Elamoshy & Feng, 2018). The most striking findings of the healthy

immigrant effect are that these positive health profiles are found among those immigrants who have less education and lower income, two factors which are associated with poor health in Canada (Frank, 2019). Furthermore, the healthy immigrant effect appears to be strongest during adulthood, but less during childhood and late life (Vanz, Singouin, Flenon & Gagnon, 2015). These health patterns of immigrants are often explained through the positive self-selection of healthy immigrants and the positive selection and medical screening by the host countries (Constant, Garcia-Munoz, Neuman, & Neuman, 2018). However, immigrants tend to lose health advantages compared to the Canadian-born population the longer they reside in Canada (Beiser, 2005; Hyman, 2007; Gogia & Slade, 2011; Ng, 2011). This decline is suspected to lie with convergence and/or resettlement stress (Beiser, 2005). Convergence refers to the idea that immigrants are exposed to the same health risks and lifestyle as Canadians, and for this reason their health converges to the Canadian average. In contrast, qualitative studies revealed that the majority of immigrants who participated in the studies experience the same or even improved subjective health since immigration, because of more available services and resources (Dean & Wilson, 2010).

The interaction paradigm points out the inadequacies of the sick and healthy immigrant effect. The interaction paradigm proposes that health develops through interacting processes between factors, such as the immigrant's characteristics, pre- and post-migration stressors, and coping strategies of immigrants and society (Beiser, 2005). For example, recent immigrants' health varies depending on the country of origin, region of immigration, gender, entry class (immigrant vs. refugee), and many more factors (Beiser, 2005; Ng, 2011). How society treats those newcomers also has an influence on the immigrants' health. Poverty, unemployment, social exclusion, and discrimination, all commonly faced by immigrants, are connected to poorer health (Beiser & Hou, 2002; DeVoretz, 1995).

These three paradigms offer frameworks to explain the recent immigrants' health status in Canada by focusing on health patterns, disease phenomena, predispositions, and societal influences of the new country. Furthermore, they could explain why recent older immigrants contribute in certain ways or why they do not engage in contributing activities. For instance, the sick immigrant paradigm could lead to a higher risk of discrimination towards recent immigrants and excluding them from contributing activities. Furthermore, recent older immigrants might feel obliged to prove themselves as valuable members of the community, despite the sick immigrant paradigm, and therefore, engage in contributing activities that might not be meaningful to them or negatively influence their health.

2.2 Contributions by Recent Older Immigrants

In the literature, there is no consensus about what late life contributions entail and how productive engagement by older people can or should be defined (O'Reilly & Caro, 2008). However, studies revealed that older people continue to stay productive contributors, by being engaged in the workforce or volunteering, to their surrounding which can have a positive as well as negative impact on the older people themselves. The approach of *productive aging* focuses on older people and their active engagement in productive contributions. In the following, its definition and limitations will be presented, and how productive activities can have an impact on older people's well-being. Then, the concept of meaningful occupations is explained and put into the context of immigration. Lastly, literature to date regarding older adults' contributions and activities is presented.

2.2.1 Productive Aging

Research shows that older adults who continue to stay active contributors in later life display better wellness than those who enter the last life stage without compensating roles and relationships (Moen, 1996). Therefore, "productive" activities of any kind can have major beneficial impacts on older adults' physical and mental well-being. The concept of *Productive Aging* focuses on contributions older people make and their subsequent physical, mental, social, and environmental benefits. However, Hinterlong and colleagues (2001) criticize this concept because of its focus on the term "productive" and its disdain of leisure time (Hinterlong et al., 2001). In the following, the definition and limitation of the concept of productive aging is presented and put into the context of recent older immigrants.

Productive aging describes activities through which older people contribute to society (O'Reilly & Francis, 2008). The term was introduced by Robert N. Butler (1975) who aimed to dispel the 'myths about aging', and specifically, the myth about 'old age unproductivity'. He portrayed older adults as invaluable contributors, who volunteer, take care of others, and advise (Achenbaum, 2001). Over the years, research supported Butler's approach and demonstrated that older adults continue to contribute to society in advanced ages. Therefore, the concept of productive aging has gained more and more importance in the field of gerontology.

In Western countries the term *productivity* is commonly connected to activities which bring in an economic benefit (Dosman, Fast, Chapman, & Keating, 2006). Within this definition, older adults are positioned as either net consumers and passive recipients of resources and support (Achenbaum, 2001; Angus & Reeve, 2006; Fernandez-Ballesteros et al.,

2011; Van der Meer, 2006; Yoon & Kolomer, 2007) or as overly productive, highly engaged, and exceedingly active (Morrow-Howell, Hinterlong, & Sherraden, 2001; Rudman, 2006; WHO, 2002). Both directions have been criticized for focusing either on older adults' economic productivity or on their over-engagement in productive activities (Wiles & Javasinha, 2012).

There are different approaches to defining productive aging². Hinterlong and colleagues (2001), who follow a sociological perspective, consider any contributions made by older adults (inside and outside of the market) as productive aging (Hinterlong et al., 2001). In Herzog's (1989) words, productive aging is "any activity that produces goods or services, whether paid for or not, including activities such as housework, childcare, volunteer work, and help provided to family and friends" (Estes & Mahakian, 2001, p. 203). Kaye and colleagues (2003) conceptualized productive aging in two compatible dimensions: external dimension and internal dimension. The external dimension refers to older people's tangible contributions to their surrounding and society. The internal dimension focuses on personal experiences and the impact of the older people's act of contributing on their own well-being. Studies documented that engaging in meaningful and productive roles can lead to older people's better health and well-being (Morrow-Howell et al., 2005; Hinterlong, 2008). This positive outcome can be reached if older people set themselves goals and achieve those by overcoming challenges and optimizing their capacities (Baltes & Smith, 2003). Furthermore, finding new roles can help adapt to cumulative changes and find new sense of meaning or purpose in life (Flood, 2005). Therefore, older people who are actively and productively engaged in life do not only benefit their society, but also their own physical, mental, and social well-being.

In order for older people to be able to act on their potential and make substantial contributions, society needs to adjust to older people's needs. However, prejudicial attitudes and discrimination limit the opportunity for older people to contribute (O'Reilly & Caro, 2008). Researchers taking up the concept of productive aging aim to bring a more positive approach towards old age and point out the value of older people to society, however, there are certain challenges related to this approach.

For instance, productive aging excludes concerns about natural and artificial limits that hinder older people from aging productively (Hinterlong et al., 2001). Natural limits can be caused by biological issues (i.e., diseases), whereas artificial limits are imposed on older adults by society and institutions (i.e., retirement). Additionally, older adults could see themselves obliged to be productive because society dictates that productivity is necessary, therefore,

² See O-Reilly & Caro (1994) for an overview of literature.

leisure may not be an accepted form of late-life activity (Hinterlong et al., 2001). Moreover, Ekerdt (1986) states that if there is the belief that an active, engaged lifestyle is morally and ethically preferable, then productive aging could lead to roles that emphasize busyness over meaning. Moody (2001) argues that the concept of productive aging is limited to the activities for which an external reward system exists, and that the concept should be broadened to a range of activities that infuse an older adult's life with meaning. In addition, Morris & Bass (1988) suggest that it is necessary to create "meaningful and productive roles that can address the aspirations and fully employ the generative capacity of the older population" (Hinterlong et al., 2001, p. 12). Recent older immigrants who engage in 'productive' activities in order to appear busy and please the expectations of Canadian society, which favours busyness, might find the experience of contributing more negative than those who choose to contribute in order to fill their lives with meaning. Therefore, it is essential to not only support recent older immigrants in engaging in productive activities, but also enable them to participate in personally meaningful occupations whichever they might be.

2.2.2 Meaningful Occupations

The term *occupation* is defined as "groups of self-directed functional tasks and activities in which a person engages over the lifespan" (CAOT, 2007; Law et al., 1996, p. 16). Occupations refer to activities and tasks in which the individual participates in different areas of daily living to occupy themselves, such as self-care, leisure, and productivity³ (Law et al., 1996). Research suggests that participation in meaningful occupations can have a significant and positive influence on the individuals' health and well-being (Law et al., 1998). Individuals have the need for occupations which satisfy and challenge them and balance their everyday routine (Christiansen, Backman, Little, & Nguyen, 1999; Jonsson, Moller, & Grimby, 1999). In order to achieve meaningfulness in occupations, a balance between the challenge of the activity and the individual's skills is required (Law, 2002; Moneta & Csikszentmihalyi, 1996). These kinds of occupations can create *flow* which is referred to as a state of consciousness that can lead to happiness (Csikszentmihalyi, 2014). *Flow* occurs at the midpoint between anxiety and boredom; exactly where an individual's skills meet their challenges. In order for a recent older immigrant to experience flow through contributing and its positive effects on his or her well-being, the chosen activity needs to be fulfilling and the participation must be voluntary, supported by the environment, and focused on the task, and it needs to create a sense of mastery

³ In this context the term *productivity* refers to social and economical contributions to society.

for the individual (Csikszentmihalyi, 2014; Law, 2002). In contrast, occupations which cause a sense of obligation or are perceived as overwhelming can have a negative impact on an older adult's well-being (Ekerdt, 1986; Law, 2002; Moneta & Csikszentmihalyi, 1996). In this study, contributing is considered a form of occupation. Recent older immigrants may experience a given type of contributing activity as either a meaningful occupation or an obligation.

Participation can be defined as the involvement in formal and informal (everyday) occupations or in life situations (Simpson & Weiner, 2002; WHO, 2001). It occurs in different areas of life, such as work, civic life, and family/community (Law, 2002). Formal activities are structured through rules or goals and may be led by a designated instructor or organization. Informal activities include less planning and are initiated by the individuals themselves (Law, 2002). A related concept, *social participation*, refers to older adults being engaged in social groups and communities (Levasseur, Richard, Gauvin, & Raymond, 2010; Chen, Lauderdale, & Waite, 2016). Levasseur and colleagues (2010) defined social participation on six levels based on the degree of involvement of individuals with others and on the goals of the social activities: (1) Doing activities in preparation for connecting with others, (2) Being with others, (3) interacting with others without specific goals, (4) collaborating with others to reach the same goal, (5) helping others, and (6) contributing to society. Many forms of contributing overlap with these levels of social participation. Through social engagement, individuals provide material and social support and a sense of belonging (Berkman, Glass, & Seeman, 2000). Furthermore, studies suggest that social participation is linked to a better health and longer life expectancy for older adults (Berkman, 1995; Berkman, Glass, Brisette, & Seeman, 2000; Levasseur, Desrosiers, & St-Cyr Tribble, 2008; Chen et al., 2016). However, social participation can change after life transitions, such as immigration and retirement (Bennett et al., 2012; Cornwell, Laumann, & Schumm, 2008). Recent older immigrants who engage in contributing activities might be able to participate in the community socially. For example, volunteering at an organization can bring recent older immigrants in contact with other people and make them feel part of something meaningful.

Immigration involves a relocation from one country to another, and therefore, an adaptation of individuals from a certain cultural context to another (Berry, 1997). This often leads to the recent immigrant not being able to continue their activities from their home country and either interrupt this activity or find an alternative in Canada, which serves the same purpose as their initial activity but differ in their performance (Gupta & Sullivan, 2008; Krupa et al., 2009). Therefore, recent older immigrants might face challenges when trying to engage in meaningful

occupations or in familiar habits and routines in Canada (Gupta & Sullivan, 2008; Krupa et al., 2009). Furthermore, moving away from the known surrounding impacts an individual's engagement in familiar roles, perception of their own identity, and health and well-being (Bennett et al., 2012; Meleis et al., 2000; Huot & Laliberte Rudman, 2010). Role change is defined as a change in cultural pattern of occupation that consists of routines and habits (CAOT, 1997). For instance, a recent older immigrant who moves into their children's home might take over the role of a caregiver for their grandchildren, and through this, become restricted to a caretaking role and limited in community occupations, which in turn could lead to distress for the older immigrant (Bacallao & Smokowski, 2009). The new country's culture also has an impact on the recent immigrant's perception of and adjustment to new cultural practices, and therefore, on their ethnic identity (Bacallao & Smokowski, 2009; Khazzoom, 2006). Studies showed that recent immigrants adapt quicker to their new surroundings if they retain their ethnic identity and at the same time perform unfamiliar, meaningful occupations in the new country (Nayar & Hocking, 2006; Nayar, Hocking, & Wilson; 2007).

Recent older immigrants likely experience a disruption in their daily occupations and may struggle to engage in meaningful occupations in their new country. Occupations in which they contribute to their communities and surroundings may be especially meaningful, and it is essential to explore the process, benefits, and drawbacks of such activities.

2.2.3 Contributing Activities

The literature lacks common ground on how *contribution* should be defined (Daniel, 2005). Most of the recent older immigrants in Canada are shown to either be engaged in the workforce or retired (VanderPlaat et al., 2012). However, the more they advance in age, the more likely they are to withdraw from participating in the labour-market (VanderPlaat et al., 2012). As this thesis focuses on recent older immigrants who came to Canada after retirement and are not currently employed, economic contributions are not considered. Nevertheless, they still contribute to the best interest of their families and communities in the social and cultural realm (VanderPlaat et al., 2012). Therefore, in this study, the term *contribution* refers to any activity outside of the workforce by recent older immigrants which benefits their surroundings (i.e., community, neighbourhood, family) and/or themselves (i.e. self-care, household).

Volunteerism is often used synonymously with contribution. Wilson (2000) defines volunteerism as “any activity in which time is given freely to benefit another person, group, or organization” (p. 215). Voluntary activities can be allocated either to formal or informal

volunteering. Formal volunteering is organized by an institute or organization, whereas informal volunteering is carried out individually without any organization (i.e. taking care of grandchildren) (Lee & Brudney, 2012). Formal as well as informal volunteering can be divided into two dimensions: people-oriented and task-oriented (Finkelstein & Brannick, 2007). These two dimensions are related to motives for helping, role identity as a volunteer, and the personality dimension of helpfulness (Finkelstein & Brannick, 2007). In Canada, the participation of seniors in community volunteering has stagnated (Narushima, 2005). Nevertheless, volunteerism was proven to be beneficial from both organizational as well as individual perspectives (Narushima, 2005). It is argued that volunteering provides opportunities for older adults to receive self-help by sustaining their self-esteem and sense of well-being and to enhance their self-worth and intellectual stimulation (Cocca-Bates & Neal-Boylan, 2011; Hinterlong, 2008; Narushima, 2005). Volunteering provides meaningful roles for older adults as well as promotes citizen engagement and an exchange of services in an aging population (Narushima, 2005). Research showed that formal and informal volunteering only has positive impacts on individuals' health and emotional well-being when the activity is voluntary and meaningful to them (Krause, 2009). For instance, formal volunteering is a way to re-integrate marginalized citizens, including older adults and immigrants, into society, and therefore, decrease social isolation and create social connectedness (O'Brien et al., 2011). Recent older immigrants may not benefit from volunteering, however. Some studies suggest that typical older formal volunteers in Canada are well-educated and started volunteering at a younger age (Bass & Caro, 2001; Ulpukka, 2014), whereas recent older immigrants tend to have a lower education and lower income (Dempsey, 2005). Canadian statistics show that recent older immigrants are less likely to be involved in voluntary organizations and more likely to volunteer informally by caring for their family (Turcotte & Schellenberg, 2010; VanderPlaat et al., 2012).

Care-taking can be considered an informal volunteering activity. Because formal volunteering might be limited for many older people due to opportunity issues (i.e. health, financial resources), older adults might tend to contribute to society in this unrecognized way (Martinez et al., 2011). *Care taking* or *informal support* is a multidimensional concept which is characterized by support provided in the context of an unpaid relationship based on personal ties between individuals (Bigby, 2004). Usually personal ties have their seeds in common membership of a kinship system (i. e. family) (Bulmer, 1987). Informal support can be divided in two concepts, instrumental (caring for) and affective (caring about) support (Bigby, 2004). Instrumental support can either be direct (i.e. personal care, domestic or household tasks) or

indirect (i.e. coordination of formal services, facilitation). Affective support generally involves spending time together, sharing activities, and companionship with the cared for individual (Dalley, 1988).

One type of care-taking, childcare, is associated with the older person's health and well-being. For example, older adults who become grandparents at a later age (after 50 years) and actively take care of their grandchildren have a lower mortality and a better health than those who do not take part in their grandchildren's lives (Christiansen, 2014; Gessa, Glaser, & Tinker, 2016). Usually grandmothers take over the role of a caregiver and experience more health advantages than grandfathers if non-custodial childcare is provided (Christiansen, 2014; Hildbrand et al., 2016; Smorti, Tschiesner, & Farneti, 2012). However, childcare can lead to distress and a higher mortality when grandparenthood is not on a voluntary basis, such as in cases of custodial childcare (Carr, Hayslip, & Gray, 2012; Lee, Lee, & Clarkson-Hendrix, 2016). Furthermore, informal support given to any kind of family member can lead to a sense of obligation for the older person, and therefore, cause pressure and stress (Martinez et al. 2001). Particularly caregiving as a late life activity can impact perceived health status, depending on role satisfaction, role occupancy, role integration, and role stress (Kataoka-Yahiro, 2010; Zhou, Mao, Lee, & Chi, 2017). Depending on the motivation and meaning of providing care, recent older immigrants might experience this activity either positively or negatively. Nevertheless, engaging in informal support is a contribution made to the family, and consequently, to Canadian society.

Although formal and informal volunteering provide many benefits to the volunteer, not every recent immigrant might be motivated to engage in those activities. Depending on their motives and personality, they might choose leisure or self-care over contributing tasks for others during their retirement (Finkelstein & Brannick, 2007). Leisure activities during retirement can be home entertainment, exercise, social activities, education, and any other activity which older people do only for their own pleasure and health. All of these activities are associated with older people's well-being if they are meaningful to the individual (Earl, Gerrans, & Halim, 2015; Mannell, 2007). Furthermore, continuing leisure activities from before retirement, according to continuity theory, and expanding the repertoire of new activities during post-retirement, according to activity theory, are both connected to older people's higher life satisfaction (Nimrod, 2007). As recent older immigrants age, they are more likely to pursue retirement/leisure activities and curtail caregiving responsibilities (VanderPlaat et al., 2012). In this thesis, leisure time or self-care are considered as a contribution to the recent older

immigrant's family and society, as they take care of themselves, and therefore, do not perceive themselves as burden to their surrounding (Dosman et al., 2006; Martinson & Halpem, 2011; Morrengioello & Gottlieb, 2000).

2.3 **Study Rationale**

Through this thesis, I aimed to contribute to the literature on older immigrants by exploring how recent older immigrants contribute to their communities. This topic is important given the growing proportion of recent older immigrants in Canada. Integration programs aim to include those recent older immigrants in society, however, these immigrants proved to have a lower sense of belonging towards Canada and prefer to stay closer to their families and homes than engage in activities outside of their immediate social network. In addition, discrimination towards recent older immigrants and the threat of excluding them from the wider community are growing and could prevent them from contributing to their surroundings. Discourses regarding older immigrants' health and potential to access, but not contribute, resources may motivate recent older immigrants to contribute to their new country. However, such contributions may negatively impact an older immigrants' health. Conversely, recent older immigrants may benefit from contributing activities, especially if such activities hold meaning for them. Commonly, recent older immigrants engage in informal activities, such as childcare or selfcare, rather than in formal activities, such as formal volunteering. Literature in this area lacks information about of how recent older immigrants experience contributing to Canadian society, what specific barriers they encounter, and what motivates them to contribute in certain ways. This study aimed to fill this gap by collecting and analyzing four stories from recent older immigrants who immigrated to Canada in order to live together with their families.

Chapter Three: Methodology and Methods

In this chapter, I describe the methodology and methods used in this study. First, I introduce narrative inquiry as the best methodological approach for this study. Next, I describe the underpinning of the study, that is, a social constructivist lens and a life course approach and the use of narrative interviews to co-construct participants' narratives about experiences of immigrating and contributing to Canadian society. The collected narratives were analyzed using the life course approach and holistic-content mode and later re-written and interpreted through a social constructivist lens. Lastly, I elaborate the quality criteria and ethical considerations regarding this study.

3.1 **Methodology: Narrative Inquiry**

Qualitative methods are used to answer questions about meaning, perspective, and experiences often from the participant's standpoint (Berg, 2001; Hammarberg, Kirk, & de Lacey, 2016). Within this thesis, aligned with the qualitative research tradition, I applied narrative inquiry. The term narrative is often used synonymously with story and is understood as a series of events which are chronologically connected and presented as a spoken and/or written text (Creswell, 2007; Czarniawska-Joerges, 2004). Individuals' lives are dynamic, marked by constant changes or transformations related to changes in their environment, such as time and place, or personal growth (Squires, 2008; Wells, 2011). It is in human's nature to tell stories in order to communicate with each other and share their individually experienced reality (Clandinin & Connelly, 2000; Denzin, 1989; Lieblich, Tuval-Mashiach, & Zilber, 1998). Therefore, narratives are a way of getting to know an individual's identity, personality, and experiences (Clandinin & Connelly, 2000). Narratives include a story that involves a speaker (participant) connecting events, and it conveys the meaning that the speaker wants to convey (Riessman, 2008). The role of the researcher is to listen to the participants' stories, thereby enabling the researcher to enter the speakers' world of thinking (Hiles & Čermák, 2014). Narrative inquiry aims to answer the epistemological question of "how do we come to endow experience with meaning" (Bruner, 1986, p. 12). The goal of narrative inquiry is to make meaning out of the told stories by methodically organizing time and space, and making sense of selfhood, identity, and how things have happened (Clandinin & Connelly, 2000; Smith & Sparkes, 2008).

In this study, the narrative approach allowed me to gain insight into recent older immigrants' experiences of contributing to society by asking them to share their story around

and about immigrating to and living in Canada. Furthermore, this approach allowed me to examine the participants' experiences, meanings, and current lives by considering their life span and background (Baddeley & Singer, 2007). In this regard, interpreting the context and meaning of the stories is the researcher's main task. Each researcher has a personal view of reality which is influenced by different factors, such as experiences, social location, and much more (Finlay & Ballinger, 2006). Collective views of reality which determine how we know what we know are called 'paradigms' (Finlay & Ballinger, 2006).

3.1.1 Paradigmatic Considerations: Social Constructivism

Paradigms are “a basic set of beliefs that guide action ..., deal with first principles or ultimates ..., are human constructions ..., [and] define the worldview of the researcher-as-interpretive bricoleur” (Denzin & Lincoln, 2018, p. 97). It is human nature to seek understanding of the world one lives in by developing meanings of one's experiences (Creswell, 2007). According to Denzin and Lincoln (1994), qualitative researchers, in particular narrative inquirers, try to make sense of and interpret “phenomena in terms of the meanings people bring to them ... [and] describe routine and problematic moments and meaning in individuals' lives” (p. 2). Each thing, behaviour, or action can be experienced differently by individuals, and therefore, are ascribed several meanings. Researchers who follow a social constructivist paradigm acknowledge these multiple meanings and beliefs and recognize several realities which are subjective, context-dependent, and co-constructed (Denzin & Lincoln, 1994; Finlay, 2006). For these reasons, a constructivist perspective is commonly used for the narrative approach (Finlay, 2006).

The social constructivist paradigm involves the view that meanings are not stamped on individuals but rather formed through interactions with others (Creswell, 2007). Furthermore, social constructivists aim to understand and reconstruct others' realities by finding a consensus with them (Lincoln, Lynham, & Guba, 2011). Typically, the social constructivist researcher poses open-ended questions to generate discussions and interactions with the participants, and by this, forges meanings of experiences (Lincoln, Lynham, & Guba, 2011; Patton, 2002). The discourse between the researchers and participants is dialogic which means that communication between the two parties is used as a transaction in order to inductively construct a pattern of meaning together (Creswell, 2007; Lather, 2006). Additionally, social constructivist researchers address the “process” of interaction by focusing on their own background and on the participants' life settings, and through this, make sense and interpret the meaning others have about the world (Creswell, 2007). For this study, the social constructivist lens allowed me to

capture each participant's reality and acknowledge its value and veracity. My goal was to make sense of the participants' meaning they have about immigrating to Canada and contributing to society. I listened to the participants' stories which included their experience and meanings immigrating to Canada and contributing to society. When re-writing the participants' stories, I relied as much as possible on their views of the situation, however, my interpretation was shaped by my own experience and background.

Primary components of the constructivist paradigm are relativism, subjectivism, and reflexivity (Finlay & Ballinger, 2006). Narrative inquiry also "advocates pluralism, relativism and subjectivity" (Lieblich et al., 1998, p. 2). The term relativism means that the researcher considers all realities and experiences as 'real' and valid (Finlay & Ballinger, 2006). Subjectivism refers to researchers including their own values, experiences, and assumptions in the analysis of the study data and negotiating them socially and historically (Braun & Clarke, 2013; Creswell, 2007; Finlay & Ballinger, 2006). According to the constructivist paradigm, the researchers hold an emic perspective which means that they are part of the participants' group and co-construct the reality with the participant (Creswell, 2007; Ponterotto, 2005). They acknowledge that they are part of the study setting by demonstrating reflexivity. Reflexivity is "where researchers engage in explicit, self-aware analysis of their own role" (Finlay, 2002, p. 531). It is essential that researchers show, rather than tell, who they are, where they come from, and what impact they have on their participants (Lincoln, Lynham, & Guba, 2011; Tracy, 2010; Wengraf, 2001). Through reflexivity, narrative researchers can be aware of their own narratives, limits, and implications they impose on the data. Reflexive narrative researchers are required to describe what they know and how they know it by actively constructing interpretations of their knowledge and position in the field, instead of simply reporting 'facts' or 'truths' (Finlay, 2002). They need to present their standpoint as conditioned by certain perspectives that should be as explicit as possible. In order to demonstrate reflexivity, I positioned myself in the field of study in the first chapter of the thesis. I acknowledged that because of my immigrant background, I share some values and experiences with the participants. Therefore, my interpretation and meaning of the participants' stories might differ from other researchers who have a different background. In addition, I took reflexive notes to display how my interpretations developed and were influenced throughout the study process. These notes were discussed with my supervisor and thesis committee and later included in the analysis. By considering relativism, subjectivism, and reflexivity, I was conscious of my limits and personal interpretation I imposed on the data and openly presented them to the reader in the discussion section.

3.1.2 Theoretical Approach: Life Course Approach

As mentioned above, this thesis is also guided by the life course approach as described by Elder and colleagues (2003). The life course theory refers to temporal patterns of life and provides a framework for studying phenomena which occur in individuals' lives and influence their later life situations (Elder, Johnson, & Crosnoe, 2003; Leisering, 2003). Furthermore, the approach includes sequences of events which are socially defined, and roles individuals adopt over time (Elder et al., 2003). It orients research "as to how lives are socially organized in biological, social, and historical time and guides explanations of how the resulting social pattern affects the way individuals think, feel, and act, as they age over time" (Bengtson, Elder, Putney, 2005, p. 15). In the past decades, the life course approach has been increasingly used to study population health and aging (Alwin, 2012; Bengtson et al., 2005). Researchers have recognized the significance of larger social and historical contexts to understand individuals' health and well-being across the lifespan. Furthermore, they realized that people need to be located according to their life stage or historical context in order to explain their (social) role sequences (Bengtson et al., 2005). The life course approach allowed me to consider the participants' stories about contributing as a whole instead of interpreting certain parts of the story independently from their life course. By considering the participants' past and future, I was able to find links between the two and the participants' present motivation in engaging in certain contributing activities.

Individuals' life courses consist of different life stages along their life span (Bengtson et al., 2005; Kuh et al., 2014; Frost & Pratt, 2017). Moving from one life stage to another is referred to as a life transition. Due to the specific inclusion criteria of the study, the participants were expected to have experienced retirement and immigration as life transitions. Retirement is considered a life changing event, which influences the adults' quality of life, well-being, and life expectancy (Bauger & Bongaardt, 2016; Hendricks, 2012). In fact, retirement "leads to changes in health, social relations, finances, and the allocation of time and (...) individual satisfaction with different domains of life" (Kesavayuth, Rosenmann, & Zikos, 2016, p. 733). Given the centrality of the work role within western cultures, individuals who leave the work force may experience stress and lower levels of well-being (Moen, 1996). In addition, immigrating to another country is a major life course transition that requires a process of adjustment to new life circumstances (Kulu & Milewski, 2007). Researchers following the life course approach conceptualized five key elements which influence an individual's life course: linked lives; location in time and place; transitions and their timing; human agency; and life-

long process (Bengtson et al., 2005; Elder et al., 2003; Giele & Elder, 1998). A recent older immigrant who moved to Canada after retirement might have experienced the life transitions retirement and immigration differently according to those five principles. All five principles of the life course approach can influence how recent older immigrants contribute to Canadian society, the expectations placed upon them, whether they take up these expectations, and their experiences of immigrating and contributing.

Linked lives refers to the interconnectedness of lives, especially across generations, which changes in relation to time, place, and social institutions (Bengtson et al., 2005). This means that individuals are embedded in their social surroundings and are influenced by their relationships with other people (Elder et al., 2003; Giele & Elder, 1998). For example, an older adults' social surroundings can impact how successfully the transition from work to retirement is experienced. People who are supported by their families during the transition from work to retirement tend to age more successfully (Cooney & Curl, 2017), whereas those who experience ageism at their workplace, and therefore, are pushed to retire, are shown to have more mental and physical health issues after retirement (McDonald, 2012). Furthermore, immigrants who compensate for a deficit of social networks in the new country through the support of their families tend to have a higher subjective life satisfaction than those who immigrate alone (Amit & Bar-Lev, 2015; Neto, 2001). In the context of contributing, older recent immigrants might be pressured by their social network to engage in contributing activities, or they might be helped and given the opportunity to contribute to their surroundings. For example, a grandmother who moves to Canada with the aim of taking care of the grandchildren might either feel obliged to engage in childcare or experience this activity as meaningful and pleasurable.

Location in (historical) time and place accentuates the significance of historical and social context in influencing individuals' lives (Bengtson et al., 2005). Historical events or geography and culture create opportunities or constraints which define individuals' choices and behaviours and change their life directions (Elder et al., 2003; Giele & Elder, 1998). For example, immigrants have access to different health care systems in their countries of origin, and their health may improve or decline in the new country they reside in depending on the health care services they receive (Dean & Wilson, 2010). Furthermore, recent older immigrants might experience negative conditions in their country of origin, linked to the specific political situation, for example, which might prompt them to leave their home country in order to live in better conditions.

Transitions and their timing are relative to the social context in which individuals make choices (Bengtson & Allen, 1993; Elder, 1995). The consequences of life transitions depend on

their timing in an individual's life (Bengtson et al., 2005; Elder et al., 2003; Giele & Elder, 1998). This means that biographical and historical timing have an influence on individuals' demographic behavior, employment outcomes, and psychological well-being (Putney & Bengtson, 2003). Structural and cultural lags evolve when the pace of biographical, institutional, and historical change are asynchronous, and therefore, can create tensions in an individual's life (Bengtson et al., 2005; Riley & Riley, 1989; Riley, 1988). For instance, the timing when people decide or are forced to retire can change older adults' experience with retirement. Older adults who enter early retirement tend to have a lower well-being than those who delay retirement (Kesavayuth, Rosenmann, & Zikos, 2016). Another example is the immigrant's age of immigration. The older the recent immigrants are, the lower sense of belonging they have towards Canada, and therefore, are less likely motivated to be involved in volunteering organizations than those who immigrated during earlier life-stages (Turcotte & Schellenberg, 2010).

Human/principal agency refers to the idea that individuals' life courses are influenced by their own plans, efforts, and actions (Elder et al., 2003; Giele & Elder, 1998). They make decisions within opportunities and constraints which are provided by their family background, life stage, structural arrangements, and historical conditions (Bengtson et al., 2005). For example, the choice of how to spend retirement plays an important role in the life course perspective. Research supports that older adults who decide to continue to stay productive contributors following their retirement tend to have a better physical and mental well-being than those without roles (Kesavayuth et al., 2016). Another example are recent older immigrants who move to Canada because of either "pull" or "push" factors. Immigrants who are forced or pushed to leave their own country due to factors, such as war or poverty, tend to have a higher rate of depression and anxiety than those immigrants who choose to relocate (Fenta, Hyman, & Noh, 2004; Lindert et al., 2009), therefore, their motivation for and experiences with contributing might differ.

Life-long process signifies that aging and human development are processes which take place throughout one's life (Bengtson et al., 2005). Relationships, events, and behaviours from earlier life stages have consequences for late life relationships and well-being. For example, according to continuity theory, older adults who volunteered in younger age will most likely volunteer in older age (Bass & Caro, 2001). Recent older immigrants who have been raised in countries where volunteering was not part of their everyday life, might not be interested in engaging in formal organizations and prefer contributing in informal ways.

Each social life event has different meanings to individuals, and this heterogeneity is problematic within life course theory to find patterns in individuals' general behaviour (Bustreo et al., 2018; Hutchison, 2015). How older adults experience contributing to Canadian society and what meaning they ascribe to contributing differs from individual to individual and depends on several factors aside from life course approach principles. For instance, just because recent older immigrants have not experienced formal volunteering in the past, does not mean that they would not engage in a formal volunteering organization in Canada.

Another issue in the life course approach is the imbalance between an individual's life course and the social institutionalization of individuals' life courses. In Western societies, the structure of the life course is closely linked to work life transitions which are divided in three distinct periods: preparation for work when young (education); work during middle years; and retirement from work in late years (Kohli, 1986; Riley, Kahn, & Finer, 1994). Individuals are categorized into these life stages based on their chronological age, but not on their ability or performance (Bengtson et al., 2005; Kuh et al., 2014; Frost & Pratt, 2017). This age-differentiated life course can lead to a mismatch between an individual's strengths and capacities and a lack of role opportunities in society to use and reward those strengths. Literature refers to this mismatch as the *structural lag* (Riley & Riley, 1989; Riley, 1988). Especially long-lived individuals are affected by the structural lag, because the age structure of social-role opportunities did not keep up with the rapid change of how people grow old. Recent older immigrants who move into their family's home might have certain roles and responsibilities assigned to them due to their generational position. For example, depending on how the role of a grandmother is defined in a family, on the one side, she might be expected to act as an additional child-care provider, and therefore, her contribution might not be seen as extraordinary. On the other side, she might be seen as fragile and old, and therefore, not capable of taking care of the grandchildren even if she wanted to. In the past decades, the age structures in education and work have loosened which led to a de-standardization of the life course (Heinz, 2003). Life course patterns which were once considered stable have become more fluid, which means that individuals have more opportunity to move between the work life transitions regardless of their age. Ideally, rather than being restricted to a certain life stage, education, work, and leisure experience are pursued throughout life which leads to an individualization of the life course (Bengtson et al., 2005; Heinz, 2003). This individualization could give recent older immigrants the freedom of determining how they wish to spend their late years and what roles they wish to fulfill, presupposing that society gives them the opportunity.

3.2 **Data Collection in Narrative Inquiry**

“Stories are told by someone, to someone else, at one or more points in time, and in a specific historical and cultural context” (Wells, 2011, p. 23). Denzin (1989) explains that a ‘self story’ positions the self of the teller in the center of the narrative in relation to an experience. In this context, the term experience refers to the individual passing through and making sense of life events (Denzin, 1989). After the story has been told by the participant, it can then be retold by the researcher. The simplest way of collecting those stories is to ask for them (Czarniawska-Joerges, 2004). Therefore, I used narrative interviews in this study in order to generate a narrative of participants’ experiences of contributing to Canadian society. The following section describes the data collection process regarding participant selection, the interview process, and the study setting which is later integrated in the data analysis.

3.2.1 **Sampling and Recruitment**

In qualitative studies, there is no ‘normal distribution’ of the experiences, interactions, or settings assumed which means that qualitative sampling is not intended to represent a greater population (Abrams, 2010). Furthermore, qualitative researchers acknowledge the differences participants bring and are interested in unique ‘outliner’ insights (Miles & Huberman, 1994). The sample size of narrative inquiry is usually small, with a range between one to five participants (Abrams, 2010). I included individuals to the study meeting the following inclusion criteria: (1) immigrated to Canada following retirement in order to live with family; (2) having lived in Canada for at least five years; (3) currently not working/retired; (4) always having lived together with family in Canada; and (5) able to understand English. With the first eligibility criterium I intended to select participants who immigrated to Canada with the motivation to live together with their families rather than find a job. The second eligibility criterium ensured that participants have lived in Canada for a certain time in order to have experienced living in Canada. The third and fourth eligibility criteria excluded participants who mainly contribute to their Canadian surroundings economically and lived alone. The last criterium ensured that the communication between the participants and me is given, and that they could consent to participate in the study in English. The participants, however, were given the possibility to conduct their interviews in either English, Romanian, French, or German.

In order to reach a wide range of participants, I used a two-pronged approach, agency-based and snowball sampling, for this study. Older immigrants who came to Canada after retirement to live together with their families are a sub-group of the population that are often

difficult for a researcher to reach (Atkinson & Flint, 2001). Because they are typically not actively engaged in either the workforce or other public sectors, those older immigrants may be socially invisible. Therefore, the target population of this study can be described as a 'hard-to-reach' or 'hidden' population (Abrams, 2010; Atkinson & Flint, 2001). In order to recruit this population, researchers commonly use agencies, snowball sampling approaches, or both (Atkinson & Flint, 2001; Miles, 2008). Using agency-based sampling, the researcher contacts gatekeepers of organizations and institutes who are connected to a group of potential participants (Abrams, 2010). Snowball sampling is defined as a technique to find potential participants through a series of referrals within a circle of acquaintance (Atkinson & Flint, 2001). Both strategies have advantages as well as disadvantages which have an influence on the data collection. On the one side, agency-based samples make it easier for the researcher to access a bigger pool of participants but may leave out those individuals who are not connected to the agency (Abrams, 2010; Miles, 2008). On the other hand, snowball sampling expands the scope of assessment and reveals social networks, but could over-emphasize cohesiveness in those networks (Abrams, 2010).

I created and distributed flyers (see Appendix A) stating my research purpose, inclusion criteria, and contact information to give interested older immigrants the opportunity to call me. First, I contacted gatekeepers from institutions in London, ON, which are visited by seniors or immigrants regularly, such as libraries, churches, a mosque, an Indian temple, a polish supermarket, and clubs/communities/organizations with immigrants who allowed me to post the recruitment flyer on their information boards. In order to reach older immigrants who are not actively engaged in those facilities, I gave the flyers to fellow (international) students, neighbours, and friends who were involved in immigrant communities. They either passed on my contact information to those older adults who fit the inclusion criteria or to somebody who might know an eligible participant, and by this created a snowball effect. Older immigrants who wanted to participate in the study were encouraged to call me. The first call served for identifying if the older person met the study criteria, including if we could communicate clearly. Snowballing sampling proved to be the most effective strategy, as only older immigrants who received the recruitment flyer from their acquaintances contacted me.

In the first two months of data collection, four older immigrants from London, ON, contacted me and expressed their interest in participating in the study. However, only two of them fulfilled all the inclusion criteria, as the other two did not speak or understand English. After another month passed and no further older immigrant contacted me, my thesis supervisor

and I decided to extend the search for participants geographically. Through this, two other eligible participants from Kitchener and Waterloo were able to participate in the study. As this study was conducted as a Master's thesis, it involved a restricted timeframe and allowed only for a recruitment time of three months. Therefore, my thesis supervisor and I decided to end the data collection after those four participants have been recruited in order to move to the phase of data analysis. One month after data collection was declared complete, two additional older immigrants from Kitchener contacted me to express their interest of participation, however, I did not to include them in the study.

3.2.2 Methods: Narrative Interviews

The most incisive characteristics of a qualitative study are the natural setting which includes face-to-face interactions over time and the researchers as a key instrument who collect their data themselves (Creswell, 2007). As mentioned earlier, narratives are an elementary form of communication between individuals. Telling a story can be simply described as putting actions and experiences into a sequence by organizing them in either a chronological or non-chronological manner. In the chronological dimension, narratives are put together as a sequence of episodes, whereas in the non-chronological dimension, narratives are constructed as a whole from successive events and the configuration of the plot (Bauer & Jovchelovith, 2000). Through narrative interviews, the participant is encouraged and stimulated to tell a story about certain aspects of their lives (Bauer & Jovchelovith, 2000).

In general, interviews are “face-to-face verbal exchange[s], in which one person, the interviewer, attempts to elicit information or expressions of opinion or belief from another person or persons” (Maccoby & Maccoby, 1954, p. 449). More specifically, researchers are able to discover and explore features of lives, such as human experience, talk, and interaction through qualitative interviews (Brinkmann, 2013; Mason, 2002). Qualitative interviews are “prepared, conducted, analyzed, and reported according to some kind of plan or what is normally referred to as a research design” (Brinkmann, 2013, p. 45). Within narrative methodology, the main goal of qualitative interviews is to enable a communication with the participant as an interviewee and as a narrator.

Using narrative methodology, interviews are commonly unstructured and in-depth which minimizes the influence of the researcher and leaves room for the participants to unfold and lead their story (Campbell-Breen & Poland, 2006). Posing clear open-ended questions that contain one idea, are framed in the participant's language, and emphasize what or how something was experienced, encourages the participant to ‘tell a story’ instead of describing a

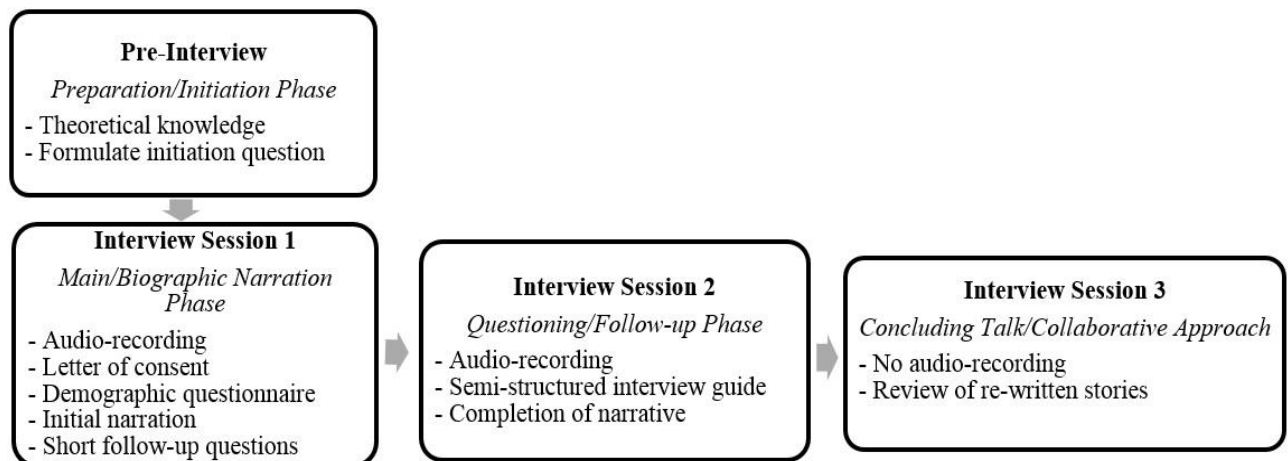
situation or reflect upon a meaning of something (Brinkmann, 2013; Wengraf, 2001; Wells, 2011). Narrative interviews are commonly divided into several phases: preparation and initiation phase; main/biographic narration phase; questioning/follow-up phase; and concluding talk/collaborative approach (Bauer & Jovchelovith, 2000; Wengraf, 2001).

Starting with the preparation/initiation phase, the researcher (interviewer) explores the field in advance and formulates the initial topic for narration for the participants (interviewee). During this phase, the researcher explains the investigation broadly to the participants and formulates an open-ended question which allows them to develop a long story (Bauer & Jovchelovith, 2000; Patton, 2002; Wengraf, 2001). Next, the main narration or biographic phase begins which will not be interrupted by the researcher and ends when the participants pause or signal the end of their story. The questioning or follow-up phase starts as soon as the narration comes to an end. In this phase, the researcher formulates follow-up questions in order to elicit new and additional material (Bauer & Jovchelovith, 2000; Wengraf, 2001). After the questions are answered and the story has been told, the concluding talk or collaborative approach is initiated. This phase allows the researcher and the participants to talk in a more informal and comfortable way about the told narrative. Furthermore, the participants are able to evaluate, change, and validate the re-written narrative and by this provide additional contextual information which can be helpful for interpretation and analysis of the interview data (Bauer & Jovchelovith, 2000; Wengraf 2001).

Although these phases might seem simple to follow, narrative researchers encounter two main issues using the method. First, the researchers are expected to present themselves as ignorant to the participant while in fact their actual knowledge and expectations about the told stories might increase from one interview to the next. Furthermore, the participants might even assume that the researcher does know something about the story, and therefore, purposefully share information in order to please the researcher (Nunukoosing, 2005). This issue is called *strategic communication* (Bauer & Jovchelovith, 2000). Secondly, posing only one broad question at the beginning and expecting to receive a whole life story according to the topic can be difficult to accomplish in practice. These rules of narrative interview define an utopian, sterile procedure, and this method often requires a compromise between narrative and questioning (Bauer & Jovchelovith, 2000; Mason 2002). Nevertheless, narrative interviewing is described to be a subjective method which can be modified according to each study. One might argue that interviewing is in fact the most objective method, if “objectivity means being adequate to a subject matter” (Brinkmann, 2013, p. 4).

Narrative interviews for this study proceeded in several phases. Following Wengraf (2001), I divided interview phases into three different sessions which took place on three different days for each participant (see Fig. 1). This resulted in three interviews per participant and a total of 12 interviews. The time-lag between each participant's sessions was less than two weeks. The purpose of these interviews was to generate a narrative of participants' experiences of contributing to Canadian society.

Figure 1: Phases of Interview Sessions



Preparation/Initiation Phase. In preparation for the interviews, I gained theoretical knowledge about the topic through reviewing empirical and theoretical literature and formulated the open-ended interview question which would elicit the participants' narrative during the first session. The question asked was: "Could you tell me your story living in your community and with your family in Canada, now and over time?"

Main/Biographic Narration Phase. The first interview sessions were conducted in each of the participants' homes involving only the participant and me. After arriving at their houses, I introduced myself and the purpose of the study to the participants. Then, I presented the ethical risks, and the participants and I signed the letter of consent (see Appendix B). In order to receive further information about the participants' context, I asked them to fill out a demographic questionnaire (see Appendix C) which was distributed in paper and collected by me shortly before the beginning of the interview at the first session. It took about five minutes to complete. After confirming that the participants understood the process of the study and interview, I turned on the audio-recording device, introduced myself and the study risks again for the record, and asked the introductory open-ended question. The purpose of the first interview was to collect the participants' stories of living in their community and with their family. By asking the broad open-ended question, I let the participants take the lead in telling their initial narrative.

During the interviews, I asked short follow-up questions in order to advance the flow of storytelling and encourage participants to share more in-depth information, such as: “Could you please tell me more about [topic identified by participant]?” Each first interview session was around one hour in total. After the stories reached their natural end, I turned off the audio-recording, thanked the participants, and set the date for the second session. I took reflexive notes on the interviews and transcribed the recording. Then, I began analysis, discussing the findings with my thesis supervisor and committee. Based on initial ideas in the first interviews, I created the interview guides for each second interview.

Questioning/Follow-up Phase. The second interview sessions were conducted at the same locations. Before turning on the audio-recording, I reminded the participants of their rights to either pause or stop the interviews whenever they desire. The purpose of the second interview was to specifically talk about themes/topics in relation to immigration and contribution that participants mentioned in the first interview. I also aimed to complete their stories and fill in gaps or clarify unclear parts of the first interview. For this session, semi-structured interview guides (see Appendix D) were used that included more direct questions such as: “In your first interview, you mentioned that you are a social person. Can you tell me more about your social life in this neighbourhood?” Each interview guide was created individually for each participant, however, some of the questions were similar across the participants because of their common background and experiences. The second interview sessions were between one to two hours. After I asked all the questions and the participants signaled that they had no more information to share, I turned off the audio-recording device, thanked the participants, and let them know that I would re-write and construct stories based on their previous interviews. I would present the re-written stories in the last interview session. I took reflexive notes about the second interview sessions and transcribed the interviews prior to composing the re-written narratives, again after having discussed them with my thesis supervisor and committee.

Concluding Talk/Collaborative Approach. The last interview sessions were conducted via telephone with each participant. Prior to the third interview, I created the participants’ narratives based on the information shared during the first two sessions. I sent each participant a copy of their personal re-written narratives by mail, called to see if they received it, and arranged our last interview session three days later to allow the participant time to read the narrative. The purpose of this last session was to review and discuss the content of the re-written stories and provide participants with the chance to validate, change, or erase certain parts of their narratives. The phone calls were around fifteen minutes each, as the participants recommended none or only little changes for better clarification. In addition, I gave the

participants the option to choose their own pseudonym. All participants expressed how pleased they are with their re-written stories and that they were content about having contributed to the study.

It is important to note that I conducted interviews in English and in Romanian. With two participants I only spoke English to. With the other two, I spoke Romanian, as in these cases the participants were able to understand but did not speak English fluently. Also, since “it is essential that researchers recognize their role in the transformation of stories, first in listening to them being told, and then as they write their own narrative, the finishing research report” (Gilbert, 2002, p. 229), I took reflexive notes before, during, and after the interview process, as mentioned before. In those reflexive notes, I included information I observed outside of the procedure of story-telling. Before conducting the interviews, I was able to gain a first impression of the participants when they contacted me on the phone. I focused on their tone of voice (did they sound excited or nervous?), on how many questions they asked about the study process (did they trust me or were they suspicious?), or on how much they were eager to share about themselves already (were they open about themselves or trying to share selected information?). When arriving at the interview locations, I observed the context, such as the neighbourhood, the weather, and the first encounter with the participants. For instance, some participants were open and inviting at the beginning, whereas some were more closed and careful about what information to share at first. During the interviews, besides focusing on the participants’ stories, I paid attention to their mood, body language, their tone of voice, or noises/distractions in the surrounding. After the interviews, I noted additional information that was shared by the participants off record. The reflexive notes were then included in the data analysis, to promote reflexivity and transparency, as they disclose biases and influences on the participants and on my interpretation. For example, I noticed that participants shared more information about winter being a barrier, when the streets were snowy, than when the weather was warmer on the day of the interviews.

3.3 **Data Analysis in Narrative Inquiry**

Qualitative researchers use inductive analysis which is grounded in the participant data and built up by the researcher. Inductive analysis refers to a bottom-up process which requires the researcher to organize abstract units of information into themes by collaborating with participants and data interactively (Creswell, 2007). Therefore, qualitative research integrates the participants’ voices, the researcher’s reflexivity, and the description and interpretation of

the problem (Creswell, 2007). “The analysis process provides a structured, staged approach to the separate analysis of the ‘lived life’ and the ‘told story’” (Campbell-Breen & Poland, 2006, p. 162). In narrative inquiry, stories are the primary source of data of which the content, structure, performance, and context are examined as a whole in a non-linear and iterative manner (Campbell-Breen & Poland, 2006; Holloway, 2017; Lieblich, Tuval-Mashiach, & Zilber, 1998; Wells, 2011). Narrative analysis is useful in order to explain how and why the story is constructed, what it achieves, and how it can be interpreted (Riessman, 2008; Wells, 2011). There are three main stages of data analysis: (1) Examining raw data from transcripts; (2) organizing and reducing them to themes through coding and categorising; and (3) representing the data in narratives (Creswell, 2007; Holloway, 2017). In this thesis, I applied holistic-content analysis using three main stages of data analysis (Lieblich et al., 1998).

3.3.1 Stage One: Transcription of the Interviews

In order to obtain a narrative suitable for holistic-content analysis, the researcher needs to audio-record the responses from interview sessions and then transcribe them verbatim (Wells, 2011). Producing verbatim transcription means including all the storyteller’s words, ungrammatical or colloquial speech, ‘affective expressions’ (i.e. sighing, laughing), and distinctive background noises (i.e. phone ringing) in order to ensure an accurate recording and reproduction of the interviews (Poland, 2002; Riessman, 2008; Wells, 2011).

After each interview I conducted, I listened to, and transcribed the audio-recording shortly after. There are two reasons why I did not want to let too much time pass between the interviews and the transcribing process: first, the interview (including the setting and the participants’ body language) were still fresh in my mind; and second, I needed the transcripts in order to create the second interview guide and re-write the narratives. Besides the words which were spoken during the interviews, I added non-verbal information (pauses by “...”, laughing), non-speech utterances (i.e. “umm”, “ah”), and background noises (i.e. “enters room”) in order to capture certain emotions. As the participants and I have accents due to our immigrant background, I left out pronunciation mistakes and used standard English to maintain clarity and understanding. With the two participants whose interviews I conducted in Romanian, I first transcribed and analyzed them in their original language and then translated them to English, mostly word by word and including my understanding and interpretation of certain expressions. By this, I aimed to maintain the true meaning of what was said in their language and would have been lost in a direct, verbatim translation. The English transcripts were reviewed by the thesis supervisor in order to discuss interpretations and meanings of the

interview content. During the transcribing process, I also took reflexive notes which I used for stage two of the data analysis.

3.3.2 Stage Two: Holistic-Content Mode – Creating Themes

As mentioned before, the holistic-content approach uses the narrative as a whole and focuses on the content presented from the standpoint of the storyteller. Lieblich and colleagues (1998) explain that: “The holistic-content mode of reading uses the complete life story of an individual and focuses on the content presented by it. When using separate sections of the story, such as the opening or closing sentences of the narrative, the researcher analyzes the meaning of the part in light of content that emerges from the rest of the narrative or in the context of the story in its entirety” (p. 13). Therefore, the researcher is required to listen to and read each transcript several times and concentrate on major themes as manifested in many areas of the told story (Lieblich et al. 1998). In order to find these key themes, researchers analyze the data in the following steps. First, narrative researchers need to identify concepts from the transcripts, through coding processes, which are then linked to create categories (Creswell, 2007). Repeated units of these categories present themselves as a pattern (Creswell, 2007; Wells, 2011). Similar patterns are then summarized to key storylines and themes (Wells, 2011; Lieblich et al. 1998). Narrative researchers go through this data analysis process several times by engaging in detailed description of what was discovered from the analysis and provide an interpretation of the findings (Creswell, 2007).

During the data analysis process, I concentrated on the participants’ contributions, as manifested in many areas of their narratives. For the qualitative analysis of text data, I used the software *Quirkos*. Because the study included four participants who were each interviewed two times, I had eight transcripts in total. I started the analysis by focusing on and repeatedly going through each audio-recording and transcript individually. First, I generated codes in each transcript individually by marking and assigning quotes to them. The codes referred to, for example, the participants’ experiences contributing in a variety of ways (e.g. childcare, volunteering, self-care). After this initial code generation, I examined the two interviews from each participant and identified storylines by arranging the participants’ stories in chronological order (i.e. life before immigration, current life). Then, I compared the codes from the participants with each other and created a list of all the codes I collected throughout all interviews. Some transcripts had similar codes; some were different. I merged and re-arranged codes, as well. With the list of codes, I read through each transcript again and assigned additional quotes to those codes which I had not included in the previous code generation. I

then summarized the codes and created categories (i.e. contributions for family, for self). Lastly, I compared and contrasted ideas, codes, and categories from each participants' story in order to find similar patterns and identified broader themes (i.e., receiving and giving back, staying in the background, contributing as expressing identity).

3.3.3 Stage Three: Re-Writing and Interpreting Narratives

Lieblich and colleagues. (1998) emphasize that the research interview is only a “snapshot of an evolving story that changes throughout the life course” (p. 45). In accordance with this idea, the life course approach and the holistic-content analysis approach allow researchers to analyze the participants' stories in the context of their whole lives. Narrative researchers analyze the stories by re-writing them into an appropriate framework, such as a chronological order (Clandinin, 2006). This means that the participants' past experiences might help explain how the participant developed their current personality and situation. Analyzing narrative material requires the researcher to engage in dialogical listening to three voices: the voice of the narrator; the theoretical framework; and reflexivity (Lieblich et al., 1998). Dialogic listening refers to the act of actively engaging in a conversation, the researchers being aware of their own view, and finding shared meanings (Stewart & Milt, 1995). Therefore, the listener or reader of a story “enters an interactive process with the narrative and becomes sensitive to its narrator's voice and meaning” (Lieblich et al. 1998, p. 10). Data analysis involves the researcher's interpretation which affects how meaning is understood and how stories are represented (Kim, 2016). Researchers do not have access to the participants' meaning, however, it can be found in the narratives when using interpretative reasoning (Kim, 2016). Meaning is difficult to grasp, but can present itself as perception, remembrance, and imagination (Kim, 2016).

After transcribing all interviews, coding the interview data, and organizing codes into categories, I started re-writing the participants' narrative. I chose to order the stories according to the life course perspective in a chronological order as a way to emphasize the participants' development over time. All narratives followed the structure of the participants' life before leaving their home country, the adaptation phase in Canada, and their current life situation. In those life stages, I described the foci of content which the participants highlighted during the interviews. While re-writing the stories, I aimed to reflect the participants' narratives and meanings as accurately as possible, while also incorporating my reflexives notes. In order to promote trustworthiness of the stories, I asked participants to engage in the re-writing process by evaluating, validating, and changing their re-written stories. After each narrative was re-told, I examined how the participants' stories relate to each other by analyzing similarities and

differences. I focused again on the categories I had created in the previous stage, and aimed to find meanings within those categories by including what the participants said, what I understood, and what the literature suggests. First, I considered merging the categories into themes which represent a timeline (i.e. past contributions, current contributions) of the participants' experiences with contributing in accordance with the life course approach. However, the meaning participants gave those contribution activities was not conveyed through these themes. Therefore, I concentrated on the meaning and motivation the participants assigned to contributing, which resulted in three main themes. The goal of my interpretation process was to explain the experiences of recent older immigrants following their immigration to Canada and contributing to their communities by considering the realities and meanings I created with the participants' narratives.

3.4 **Quality Criteria for Narrative Inquiry**

The researcher's goal is not only to explain what the study is about, but also why it is worth paying attention to it. Narrative inquirers are often accused of being too subjective and specific, and therefore, not relating to a wider audience (Wells, 2011). However, by demonstrating the quality of the research, a study can receive wider recognition and acceptability (Finlay & Ballinger, 2006; Lincoln, Lynham, & Guba, 2018; Tracy, 2010). Hammarberg and colleagues (2016) state that qualitative researchers with a social constructivist lens can defend the integrity of their study by explaining how they fulfill the evaluating criteria of trustworthiness, authenticity, applicability, and rich rigour (Guba & Lincoln, 2005; Hammarberg et al., 2016; Leininger, 1994; Morrow, 2005; Wells, 2011). By discussing how I applied these key quality markers in the study, I aim to refute the criticism of narrative inquiry and demonstrate this study's quality.

3.4.1 **Trustworthiness and Authenticity**

One risk that narrative researchers face is "co-optation of voice" (Clandinin & Connelly, 2000, p.74). This means that the researcher's own voice drowns out the participants' voice, and therefore, presents a simple linguistic form of story record. However, narrative researchers following a social constructivist paradigm are expected to be honest about their biases, weaknesses, goals, roles, methods, and challenges of the research, and reach authenticity and trustworthiness through self-reflexivity, transparency, and subjectivity (Ballinger, 2006; Lincoln, Lynham, & Guba, 2011; Morrow, 2005; Patton, 2002; Tracy, 2010). Furthermore, constructivist narrative inquirers co-construct narratives through dialogues in which

participants contribute openly to the data interpretation and analysis (Denzin & Lincoln, 1998). Narrative inquiry is more than just listening and re-telling stories. It is a form of living and creating new realities in which the researcher's voice can sometimes be silent (Clandinin & Connelly, 2000). If narrative researchers adequately describe, justify, and explain how the study was conducted and acknowledge the participants' voice as equal to theirs, trustworthiness and authenticity of the study can be reached.

In order to demonstrate these evaluative criteria, I positioned myself in the research at the beginning of the thesis in order to give the reader a better understanding of where I come from and what my motivation was to conduct this study. By this, I gave the reader the possibility to analyze where my understanding and meaning for my reality originated from and how it could have influenced my interpretation of the findings. Furthermore, by engaging in reflexivity, justifying the methodology used, and presenting the limitations of the study, I aimed to openly demonstrate 'where I came from' before and 'where I ended up' after the study. By being as transparent as possible, I provided an honest and clear delineation about my context, my level of participation and immersion. In order to avoid co-opting the participants stories, I chose to include the participants in the process of validating their own narratives. By combining their storytelling and my interpretation, we constructed new realities and ways of being while respecting the criteria of the social constructivist paradigm. Furthermore, I aimed to strike a balance between the use of participants' quotes and my interpretation in order to mitigate the risk of voice co-optation.

3.4.2 Applicability and Rich Rigour

Lack of 'representativeness' is another issue narrative inquirers often face when conducting a study with a minimal number of participants. Because they recruit a small sample with individual life stories which differ from one another, narrative researchers often find themselves in a position of needing to explain how these specific stories are applicable and transferable to others (Wells, 2011). Qualitative study samples depend on the nature of data and the availableness of participants (Hammarberg et al., 2016). Therefore, narrative inquirers aim for transferability, which refers to the readers connecting their own experience and life story with the stories told in the study (Finlay & Ballinger, 2006; (Lincoln, Lynham, & Guba, 2011; Tracy, 2010). Transferability can be promoted through rigorous study procedures. Rigorous qualitative researchers aim to collect abundant, rich, and unique data by choosing the appropriate samples, contexts, and methods (Golafshani, 2003; Tracy, 2010; Winter, 2000). Tracy (2010) asked four key questions in order to ensure that a study fulfilled the criteria of

rich rigour: “Are there enough data to support significant claims? Did the researcher spend enough time to gather interesting and significant data? Is the context or sample appropriate given the goals of the study? Did the researcher use appropriate procedures in terms of field note style, interviewing practices, and analysis procedures?” (p. 841).

To answer Tracy’s first question, I asked myself if I was able to find enough data to give the readers a clear picture of how recent older immigrants experience contributing. I was able to find strong results, which are supported by existing literature. I started the interviews with a clear and understandable question, that led to a lot of complexity in answers by letting the participants take the lead and asking follow-up questions. The data I generated from the interviews is rich and detailed from which I used lots of quotes that support my findings. To answer Tracy’s second question, if there was enough time spent to gather interesting data, I spent at least one hour with the participants at each interview session. Some of the meetings lasted up to three hours, in which I and the participant talked about their lives and experiences being an immigrant in Canada and living with their families. To refer to Tracy’s third question, I asked myself if the context and sample was appropriate for the goal of the study. The goal of the study was to examine recent older immigrants’ experiences contributing to Canadian society, which I reached by presenting four stories in which study participants elaborated on their contributions. I conducted the study in a setting that is very relevant to the topics of late life immigration and contributing to society. The demography of Ontario, and specifically of London, contains a big proportion of a variety of recent older immigrants. I advertised widely for study participants and found four participants who had lots of stories to tell and were open to share those with me. These were good participants to get, whereas some can be quite brief. To answer Tracy’s last question, I asked myself if I used appropriate procedures. I consistently took reflexive notes when engaging with the data and around each interview session. Furthermore, by starting the interviews with an open-ended question and asking only follow-up questions, I let the participants lead the discussion, and therefore, gave them space to unfold their stories. By collecting the participants’ stories about their experiences of immigrating and contributing to Canada, I accumulated a large quantity of unique, rich, in-depth data with detailed information by interviewing a small number of participants. Each narrative provided insights into “what is possible and intelligible within a specific social context” (Chase, 2005, p. 667). Which means, that each story was presented as detailed and truthfully as possible in order to give the reader the possibility of getting a full picture about the participants’ experiences and meanings. In addition, I complemented collected data with detailed information about the

interview process (i.e., number, length, types of questions, level of transcription detail) and the data analysis process (i.e., stages, reflexive notes). Through these strategies, I aimed to create rigorous results and create transferability of the study findings.

3.5 **Ethical Considerations**

It is imperative for the researcher to consider potential ethical threats and risks of the study which might harm people involved in the research (Smythe & Murray, 2000). Furthermore, qualitative research which involves humans requires ethical approval from a research ethics committee (Guillemin & Gillam, 2004). For this study, ethics approval was obtained from the *Non-Medical Research Ethics Board* (NMREB) of Western University. The goal of the ethics board is to ensure that researchers follow the core ethical principles of respect of persons, concern for welfare, and justice. Furthermore, researchers are required to follow the latest *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans* (TCPS 2, 2014) of *The Interagency Advisory Panel on Research Ethics* (PRE) when conducting their study.

One of the principal requirements of the TCPS 2 is to obtain “free, informed and ongoing consent” from the participants (PRE, 2014). In order to make sure that people participate in a study based on their own will, participant consent must be given voluntarily, with the option to be withdrawn at any time and after having been informed about the risks and potential benefits of the study (Smythe & Murray, 2000). Furthermore, participants must be free to ask for deletion of their data in retrospect. In addition, participants have the right to receive proper debriefing of their own data (Nunkoosing, 2005; Smythe & Murray, 2000).

In order to ensure that participants took part in this study of their own free will, I considered only participants who contacted me directly via phone, expressing their interest in participation. Furthermore, I distributed and discussed the content of the letter of information and consent with the participant before each participant’s first interview to fully inform participants about the study including risks, potential threats, and benefits and obtain their written consent. Telling and reliving a life story and sharing experiences about certain events can trigger positive as well as negative emotions in participants (Smythe & Murray, 2000) and I aimed to supportively manage this process if it occurred. At the start of each interview, I provided participants with a list of resources in case they felt emotionally distressed (Guillemin & Gillam, 2004). Furthermore, I asked for permission to audio-record the interviews and reassured participants that they were free to stop the interview at any time, refuse to answer

questions they did not feel comfortable answering, and were free to ask for deletion of their data at any point. Through this letter of information and consent, and discussion, a base of common understanding and agreement between the participants and me was created. After the interviews were conducted, I sent the re-written narratives to the participants for debriefing purposes. Participants were given the opportunity to determine which information about them could be included in the study. Through these strategies I aimed to minimize the risk of misunderstandings, inaccuracy, or emotional distress.

Other core elements of the TCPS 2 are the respect of participants' privacy, the confidentiality of correspondence, and the security of the study records (PRE, 2014). In order to guard these elements, researchers need to ensure participants' anonymity and the inaccessibility of their identifiable information (Smythe & Murray, 2000). Confidentiality can be reached by locking the information in a secure location, using passwords for entering the data, and giving the participant ID numbers or pseudonyms when referring to them.

The records of this study were stored in paper and electronic formats in a secure location and will be retained for a minimum of seven years. Identifiable information, such as full names, telephone numbers, and audio recording of the interviews, can only be accessed by the principal investigator and myself as they are protected with passwords and locks and are kept separate from the transcribed files. Furthermore, participants were identified in the study record by using pseudonyms and with de-identified descriptors, such as stating 'participant's daughter' instead of her name, in order to guarantee full anonymity.

Chapter Four: Constructing the Stories

In this chapter, the participants' re-written narratives are presented, along with an introduction to each of them that includes demographic and contextual information.

4.1 Samantha's Story

Samantha was a 67-year-old woman from Cuba. She considered herself a Latina and spoke Spanish and English. In Cuba, she completed a university degree and worked in the agronomical field for many years. After Samantha retired and her husband died, she immigrated to Canada, almost ten years prior to the study. At the beginning of her immigration, she lived together with her son, daughter-in-law, and three-year-old grandson. A few years later, her granddaughter was born, and Samantha's family moved to a different neighbourhood into a bigger house. At the time of the study, her grandchildren were pre-schoolers, and she took care of their daily routine. Samantha described her overall health as good, with some limitations.

Samantha's story

On a warm fall day, I walked up the drive way to Samantha's house. Samantha was the first participant I interviewed. All I knew about her was that she was from Cuba and lived together with her son's family. When I arrived at the front porch, I took a deep breath to shake off my nervousness; then I rang the door bell. A smiling woman opened the door and welcomed me into her house. It was Samantha. She led me to the living room where we sat on the couch and started talking. Before setting up my recording device and preparing the research documents, I stressed again how grateful I was that she had volunteered to participate in my study. Samantha answered that she was happy about being able to help me with my research and having some company. Her outgoing character and friendly nature stood out to me right away, and I was excited about listening to her life experiences and diving into her story.

Immigrating to Canada

Earlier in her life, Samantha lived together with her husband and son in Cuba. She worked for many years as a successful phytopathologist, which she labeled as a "doctor for plants." After she retired from her work, she still felt connected to her passion and spent her time updating herself about new research in the field of phytopathology. Samantha continued to use her expert lens to analyze the plants in her current neighbourhood and help her former colleagues with research:

“I was happy. Absolutely happy with my job. [...] I’ve seen I fulfilled something good for them. [...] I loved being an agronomist, a plant protection specialist. [...] Even now, when I go around the pond, I’m looking at some plants with... special spots. [...] I was very happy because I was useful.”

Samantha described her living conditions in Cuba as good and financially stable. She and her family lived in their own house, with their own car, and had nothing to worry about. However, in the same year her husband passed away, her son decided to emigrate to Canada. In her voice, I could hear sadness and pain when she spoke about this time of her life:

“When my son came to Canada, I lost my husband. It was very, very hard for me.”

But Samantha was sure her son had made the right decision to immigrate to Canada. She explained that in communist Cuba people need to keep a low profile and are not allowed to freely do anything; whereas in Canada, liberty and democracy ensure a safe and happy way of living. After her son left, Samantha stayed in Cuba to continue her job for three more years. Only after she retired, she and her son decided for her to join his family. Five years after her immigration, Samantha became a Canadian permanent resident.

Living in Canada: The South of the City

In the first years of Samantha’s immigration, her family lived in the south part of the city. She explained that she liked the neighbourhood they were living in. A Catholic church, mall, and nice parks were all within walking distance from their house. Samantha mainly spent her weekdays taking care of her grandson. She felt happy and socially connected in the neighbourhood, mainly through her church:

“And... I had more friends [...]. So, I was going with them to church. My church was just two blocks from the house. [...] It was very nice. Certainly, I am missing that.”

I started noticing that being surrounded by people and being socially engaged was an important aspect of Samantha’s life and contributed to her happiness. Not only does she like to meet new people in her surroundings, but she also kept close contact with friends from all over the world on Facebook. She described herself as:

“[...] a very social person [...]. I like to talk with some other people.”

Although Samantha seemed to be comfortable walking around with her grandchildren in the neighbourhood, she told me that back then she was afraid of doing activities which required her to speak English to strangers:

“I was afraid that the people are not going to understand me.”

Besides socializing with people, religion played a major role in Samantha’s life. She regularly attended mass at the nearby Catholic church and lit a candle each Thursday to honour her departed loved ones.

Living in Canada: The North of the City

After her granddaughter was born, the house became too small for all of them. Also, her grandson was about to start his first day at school, and considering the low ratings of the nearby schools, staying in the south was not an option for Samantha’s family anymore. Samantha’s family decided then to move to a different neighbourhood surrounded by schools which would offer her grandchildren a better education. They found luck in a new region in the north of the city:

“Yes, the choice to come here was very good for the family. The house is bigger [...]. The situation for the kids is better. The schools are very, very nice.”

Samantha said she liked the new neighbourhood. Her neighbours were mainly couples with young children who all have a different ethnic background. What Samantha enjoyed most about her current living situation were the countless children from the neighbourhood who visited her house almost every day to play with her grandchildren. During those visits, Samantha usually watched the little ones and made sure that nobody got hurt or picked a fight:

“[Laughs]. Sometimes it’s a big mess. But I like them, because they can play together. [...] I am always with them or just taking a look. [...] It’s good for me.”

Samantha said that not only did the children appreciate this kind of caring attitude towards them, but also their parents were happy about having such a thoughtful grandmother in their neighbourhood. Laughingly, she explained that everybody called her “abuela”, which means “grandmother” in Spanish:

“And when they all call me like ‘abuela’, I am feeling like I am their ‘abuela’, too.”

With the new neighbourhood, there came a new task that Samantha took over to help her family. Because her son and his wife started their workday early in the morning and finished late in the afternoon, she offered to bring and pick up the grandchildren to and from school. Even though she called taking care of her grandchildren a “job” or “duty”, Samantha assured me that she loves being a grandmother and that the role brings happiness to her life.

“At the beginning, they [grandchildren] were in the before and after school. [...] I think, it was... not necessary, because I was here at home [...]. So, we changed. And I am happy because I am helping them, and I have a good time with my kids. They love me [...]. They are my duty. [...] and I am happy that I am with them.”

Samantha’s daily routine revolved around her grandchildren. Every morning, she got them ready for school and, depending on the weather conditions, walked them to the elementary school. In the afternoons, she picked them up and helped them with homework. This, she explained, was very special to her because she did not only teach her grandchildren the school material, but they taught her new things, as well. In the evenings, Samantha sometimes accompanied her grandchildren to their after-school activities.

Although Samantha dedicated most of her day to her grandchildren, she was still left with a lot of free time, especially when her grandchildren were at school. During that time, she sometimes took over some light household tasks and followed her pleasure by reading or writing poems, staying in touch with her friends on Facebook, or taking a walk around the neighbourhood. However, considering herself a very social person, Samantha said that she preferred spending her time surrounded by people and helping them:

“I have a lot of free time. Too much. Too much free time. So, I think I can be useful.”

Unfortunately, the location of her current neighbourhood did not allow Samantha to reach churches, libraries, or community centres by foot. She did not have a driver’s license and depended on busses to reach destinations further away from her house. Therefore, in order for her to participate in diverse activities, she was required to overcome her initial fear of communicating with strangers and taking the bus.

When trying to find a suitable activity for herself, which she would enjoy participating in, Samantha encountered several barriers. She looked for activities at a nearby library, her grandchildren’s school, and diverse volunteering organizations. However, she either experienced a conflict of schedule or was confronted with complicated bureaucracy.

“They [organizations] have a lot of special... requirements. It was too complicated because it was too much of recruitment [...]. You have to pay for special information courses [...]. And then, we are living in this neighbourhood. We’re far from everything.”

I sensed Samantha’s frustration when she talked about the obstacles put in her way. This made me curious to ask why volunteering was important to her. She answered:

“Company. [...] And you can be useful [...]. And maybe contribute to something.”

Samantha described having the biggest struggle during winter. She said that when the sidewalks were snowy and icy, she was too afraid to leave the house. On the one side, Samantha worried about becoming a burden to her family by hurting herself and the family having to take care of her. On the other side, she was not happy about making them drive her around. But being stuck in the house frustrated her:

“Winter is hard for me. I must stay inside the house. And I cannot go outside. [...] I even stopped taking the kids to school. [...] I live almost every day just at home. Just at home. And it’s very boring.”

Another factor which had an influence on Samantha’s ability to participate in activities was her health. In order to minimize this limitation, Samantha made sure she contributed to her health by eating healthy and exercising regularly. However, she explained that she missed her church which she needed in order to retain her health:

“I need to go to my church. But now, I cannot go because it’s very far. Catholic churches are not near [...]. I cannot change my religion. I cannot do anything about that.”

I noticed that Samantha compared her life in the old neighbourhood with her life in the new neighbourhood. She expressed her sadness about having left her church and her friends from the south behind. Although she liked her current neighbours, she said that she has difficulties finding friends among them:

“[...] most of the people here are young people with kids. And my relationship with them is just through the kids. [...] But in the other neighbourhood, I had a lot of friends [...]. I think I was maybe having a better life because [...] there were many things nearer.”

Overall, my perception of Samantha was an outstandingly caring person and a dedicated grandmother, who believed that there is positivity in every situation. Despite challenges in finding meaningful activities for herself, she refused to give up:

“I came here because I wanted to enjoy my grandkids. And just now I am enjoying them. So... I am happy with that. [...] life is not perfect. You cannot have everything.”

“I want to tell you this: I am always trying.”

4.2 **Elena’s Story**

Elena was 75 years old and came from Colombia. She explained that her cultural background is Latino, and she spoke English and Spanish fluently. In Colombia, Elena completed her high school degree and helped her father in his real estate business. She was

married with two children but divorced eleven years later. Elena immigrated to Canada more than ten years prior to the study, after her father's death. At the beginning of her immigration, Elena moved into her daughter's and son-in-law's house where she helped out with the daily childcare routine of her two grandsons. One of Elena's grandsons was an elementary student whereas the other one was still too young for kindergarten. At the time of the study, they were teenagers, and Elena started dedicating most of her time to activities which she enjoyed. She described her overall current health as excellent, considering her age.

Elena's story

I was told that there was a large and vibrant Colombian community in the city and I was delighted when Elena contacted me and agreed to participate in my study. For the interviews, we agreed to meet at her home. When I arrived at her house, Elena, a petite and amiable woman with a friendly dog next to her, opened the door. Chatting, we sat down on the couch in the living room, where I set up the recording device and prepared the documents. After Elena filled out the questionnaire and signed the papers, I was ready and eager to listen to her story.

Childhood and life in Colombia

Elena was born in Colombia as the youngest child in her family. She loved talking about and remembering her childhood and life in Colombia. She told me that after she graduated from high school and her father retired, the family decided to travel to Europe, United States, and Mexico for two years. Elena explained that those trips made her open-minded towards unknown things and taught her to adapt to new places quickly. Also, during this time, her passion for travelling was sparked which she kept till today:

"I like to travel right now. The person I prefer to travel [with] is my daughter."

After she and her family returned to Colombia, Elena decided against a student life and started helping her father in his real estate business. She explained that back in the time, people held the prejudice that women only went to university to find a husband, which she did not want anybody to think about her. Later, Elena regretted having chosen against a student life because of her pride, but still enjoyed her alternative life path. She got married to one of her brother's friends and had two children, a son and a daughter, with him. After eleven years, they ended their marriage with her family's support. Elena explained that she remained good friends with her children's father and appreciated the peaceful and loving relationship. That is one reason why she never got remarried or involved with somebody else:

"I never went out with anybody else after I got divorced. [...] I wanted a peaceful life with my two children [...]. And I had the family. My parents and my sister were enough for me."

When Elena's daughter left to study in the United States, and later moved to Canada, Elena stayed with her son in Colombia. She took care of her parents and sister until their death. Elena explained that especially when her sister passed away, she experienced a difficult time because her sister was one of her biggest supports. But she said that with her ambition and God's help, she overcame her grief and regained control over her life:

"When she [sister] died, it was terrible for me. [...] She meant everything to me. [...] Everybody said that I was going to collapse because I didn't know how to do anything. But god, he helped me and I could do it."

After immigrating to Canada, Elena was still connected with her home country as she traveled to Colombia once a year, where she visited her son and other relatives. She explained that her family members had a long life expectancy, as her aunt was over 100 years old, but Elena worried that:

"I will get too old and I won't be useful. [...] Because I know I will be a burden."

Adapting to a new home

After her son moved into his own apartment and Elena was left alone, she and her daughter decided for Elena to join her daughter's family in Canada and help them take care of her grandsons. Elena described her immigration as a win-win situation because:

"I was alone in Colombia and I thought they [daughter's family] will need me and I need them, both ways."

At the beginning of her residency, one of Elena's grandsons was already at school whereas the other one stayed at home with her. Throughout the day, she usually went with him to the park or to the library. Elena sometimes prepared lunch for both grandsons and watched them until their parents came home from work. From time to time, she also stayed at home with her grandchildren when her daughter and her husband had to run some errands or went out. She assured that she loved taking over these tasks because:

"It was nice. I felt useful. That's, I think, very important for a person."

Elena said that she adapted to her new home in Canada quickly, mostly because of her family. She explained she felt cared for like an additional daughter in the household and she was happy about her grandsons having their grandmother close by. Also, Elena enjoyed

experiencing change and getting accustomed to new lifestyles as she also travelled with pleasure in the past:

"When I decided to come, I put that in my head: I have to be here, happy here. And I am happy."

Although Elena was busy with her role as a grandmother, she still felt that she was not doing enough. She considered volunteering at a hospital as she was interested in biology and medicine. However, she dropped this idea quickly after her daughter assured her that she was much more needed at home and did not need to work somewhere else:

"She [daughter] told me: 'Mom, you should be happy minding this. You're doing the right thing. You are helping us a lot.' [...] And that has really helped me."

Peace and Calmness

Now that her grandsons are teenagers, Elena said that her life has changed. She explained that at the beginning of her life in Canada, she was busy taking care of her family; now she was focusing more on herself. Each day, Elena made sure to engage in activities that maintain her well-being. For her body, she kept herself physically active by working out at home or going for a walk around the neighbourhood. For her mental state, Elena listened to news from around the world in order to be informed and to keep her mind off from daily problems. Lastly, she spent as much time as possible with her family and friends, however, she also enjoyed some time by herself. It seemed important to Elena to invest a lot in her health as she strongly related it to happiness.

"The most important thing is to see that everybody is good and healthy. [...] I see happiness in the family, that's what gives me peace."

"Because without that, life is not good. [...] Without health, life will be miserable."

The main reason why Elena tried to stay as healthy as possible was her fear of becoming a burden to her family if she were to become sick. She described herself as a practical person who either tried to be "useful" for her family or not bother them. Elena did not want to intrude in her children's daily routine and preferred to stay in the background in order to maintain peace, especially in her family. She also explained that this respectful and caring behaviour was the key to a happy and joyful coexistence of everybody.

“I think we [family and Elena] are really, really happy because we know how to live with each other. Because we respect each other. They do things, that don’t bother me and I try to do things that don’t bother them.”

Elena cherished her current life, mostly because she experienced peace all around her: in Canada; in her family; and in herself. This peace allowed her to develop a positive outlook in every situation she encountered. For example, instead of seeing the winter as a barrier to not be able to go outside and feel cold, she was happy to have a reason to stay in the house and comfortably work out in the basement while watching Netflix.

“I like life as it is and I take it as it is, because sometimes I don’t feel so good, but it’s normal. But I know it’s going to be over some day. So, it’s good.”

While interviewing Elena, her optimism and positive outlook on circumstances consistently stood out to me. I would describe Elena as a woman who is always trying to see the good in something by maintaining a humble and appreciative attitude.

“I’m so happy the way I am right now. The day is just perfect.”

4.3 **Gizella’s Story**

Gizella was an 87-years-old woman from Romania with a Romanian-Hungarian background. She spoke Hungarian and Romanian fluently, understood English, and had learned some German and French in school. Gizella completed her high school degree and worked for many years as a photographer. After her husband died, she immigrated to Canada almost 15 years prior to this study, where she cared for her toddler grandson and infant granddaughter. At the time of the study, Gizella lived together with her daughter, her son-in-law, and her two teenage grandchildren. She still completed household tasks, but to a lesser extent. Gizella described her health as very good.

Gizella’s story

When I thought about Romania, I remembered my grandparents who lived on a farm in a small village. Unfortunately, they passed away a few years ago. But the memories of them continue giving me a warm and pleasant feeling which rose every time I visited or heard something about Romania. Therefore, I was hoping to find Romanian participants who I might be able to relate and connect to on a more personal level. Gizella, a Hungarian descendant who has lived in Romania until her immigration, agreed to join my study. I have been to Gizella’s hometown in Romania quite a few times and I was familiar with the Romanian way of living. I

was eager to hear her story about immigrating to Canada and I was curious about how much I might be able to relate to her experience.

The Romanian life

Gizella considered herself as a Hungarian woman, who guarded her Hungarian culture and language, but was born and raised in Romania. Like many Europeans, she learned multiple languages besides her mother tongue, such as Romanian and German; however, English was not among those. Only after her children immigrated to Canada, Gizella started taking English courses and gaining some language skills which she advanced while living in Canada. Gizella got married to an artistic photographer with whom she had her only child. She explained that she is very grateful of being blessed with her daughter and shared a few anecdotes about her daughter's life, which demonstrated to me her proudness as a mother.

"Well, I was very happy. Because I had only one child, my daughter, and I was happy."

After Gizella's daughter has graduated from university, she left Romania in order to find a better prospect in Canada. Gizella was very sad about her daughter having left, but after her first visit to Canada, she knew right away that it was the right choice her daughter had made.

"Because when I came here with my husband for the first time, as soon as I saw the winter trees, when I smelled the fresh air, when I saw the cleanliness, oh... I fell in love right away. And I was happy to know that my children live here, especially when I saw that they made it here."

After retirement, Gizella and her husband spent their days together with household tasks, handcrafts, and travelling through Romania, until Gizella's husband got sick. She took care of him until his death and described that time as:

"It was really hard, and I suffered a lot."

Gizella was sad and heartbroken after she lost her husband. She still misses the times and trips she took with him and remembered him every time she closes her eyes. Mostly because Gizella felt lonely after her husband passed away, she and her daughter decided shortly after for Gizella to move to Canada and live with her family there.

Arriving in the new home

Gizella said that everybody benefited from her immigration. On the one side, she was not alone anymore and was surrounded by her loved ones, on the other side she was able to help her family with the household and childcare. Before receiving her residency status, Gizella was

required to leave Canada every six months. During this time, she travelled back and forth between Canada and Romania. In Romania, Gizella took care of her house and did some handcrafts for herself and her family. She explained that she experienced a big difference between those two countries, mainly the distances between her house and supermarkets and the social contact.

“Not like in my hometown. There we got out of the house and we took some steps and arrived. Or the market was only two or three streets away.”

“The people here are very reserved. They aren’t like us in [hometown]. Because our neighbours walk into your house and opens up the pot and looks at your food [laughs].”

In her Canadian home, Gizella mainly took care of her grandchildren and the household. She explained that she brought the children to kindergarten (later to elementary school), prepared lunch and dinner, washed, ironed, sewed, and much more. Jokingly, Gizella referred to herself as a maid but assured that she enjoyed doing those tasks for her family.

“So, right away I found a useful work I was able to do for my children. I was very happy. I felt really good.”

Besides taking care of the household, Gizella said that she loved to educate herself. She enjoyed readings books and had an extensive book collection. Although Gizella was required to learn many new things in Canada, such as adapting to the new way of living or using the modern household appliances, she regretted the most not having learned to speak English fluently. She explained that she was able to understand light conversations and to get along in everyday situations. However, she would have loved to be able to read English literature. When I asked Gizella the reason why she did not learn English, she answered that mainly due to her advanced age, she was not able to memorize new words anymore. Also, she added that she was not required to know English as she spent most of her days in the house where she preferred speaking Romanian to her grandchildren:

“This is also why I didn’t learn English and German, because I didn’t have anybody to talk to, and then you forget. So, at home we don’t want the children to forget the language with which they were raised. They should know their mother tongue and English at school.”

Life as it is

As Gizella’s grandchildren grew older, she did not take care of them to the same extent she did a few years back. However, at the time of her interviews, she still took care of the household in order to help her daughter and her husband, who worked late hours during the day

and were busy with after school activities in the evening. Gizella complained about her age becoming a bigger barrier. She was not able to leave the house often anymore, and therefore did not join her family in certain activities. In addition, Gizella had sold her house in Romania and stopped travelling to her home country. She explained that:

“This was tiring for me because I’m old.”

“Lately I already gave up on everything, because I can’t anymore.”

In Gizella’s life her family played the most important part. Therefore, she was eager to keep it peaceful in the house and not become a burden to anybody around her. For example, she did not involve herself in family discussions and stayed in the background when certain decisions were made. However, Gizella was very worried about herself potentially becoming a burden to her family if her health continued to decline. She said that if she got sick, her concerns were that on the one side she will not be able to fulfill her household tasks anymore, and on the other side she will worry her family. Either way, her family members will be impacted according to her health status.

“Well, who wants to be sick, no? Because if you are sick, then the worries are bigger. So, the sickness is something that is disturbing the normal life.”

Gizella tried to stay optimistic. She explained that she appreciated the opportunity to spend her life in Canada because she felt she was cared for by her family as well as the Canadian government. Not only was Gizella offered a more comfortable way of living but being close to her family brought joy and calmness to her life. Overall, Gizella was a funny and witty woman who played the role of a hardworking and caring grandmother. She dedicated her life to her loved ones and appreciated everything she received from them in return:

“I have everything. Everything that I need.”

4.4 **Oana’s Story**

At the time of the interviews, Oana was 74 years old. When she was younger, she lived in Romania where she worked as a medical assistant after she completed her college degree. She was married to her husband until his death and had one daughter with him. Oana spoke Romanian and understood English, but had some difficulties speaking it. Almost ten years ago, she immigrated to Canada after she retired and took care of her infant and toddler grandchildren. Oana still lived together with her daughter and her grown-up grandchildren in their house where

she kept on taking over the household. She explained that her health has drastically declined in the past two years, and therefore, described it as fair to almost poor.

Oana's story

In 1989, a revolution in Romania changed its system from a communist dictatorship to a democracy. Until today, the country struggles with economic inequality and political corruption. Not least because of these factors, Romania experienced a high emigration rate, especially among young highly educated people who were hoping to find better employment opportunities abroad. My parents immigrated to Germany for this reason. They saw no prospect in Romania and left it a few months after I was born. Oana's daughter emigrated from Romania for the same reason, however, chose Canada as her new home. Oana was the fourth and last participant I interviewed for my study. As I am familiar with the experience made by immigrants who move to another country because of economic reasons, like my parents and Oana's daughter, I was eager to find out what motivated Oana to come to Canada and how she managed her daily routine in her new home.

Romanian nostalgia

As a young woman, Oana found her passion to help and care for others in the medical field. In Romania, she worked in different health sectors and companies and gained a lot of medical knowledge over the years. Her family, friends, and even neighbours came to Oana to ask for medical advice which she gladly shared. She explained that the reason why she enjoyed working in the medical field was because she considered herself a very social and helpful person. Oana always tried to help everybody who was in need of her support.

"I think I was born for that, to help people. That's how I am. [...] I like making people happy, to make them smile."

Through her social and open personality, Oana collected many friends throughout her life time. She said that she still keeps close contact with a group of female friends who she knew from high school. Not only because of them, Oana enjoyed her life in Romania. She loved her job, her trips, and her apartment.

"I lived my whole life there, and all my memories and everything I did during my youth, I did it in Romania."

After Oana's daughter graduated from university and was not able to find a suitable job, she decided to immigrate to Canada. In the same year she left, Oana's husband passed away. To help Oana not feel alone, her mother moved into her apartment and lived there until she

passed away. In the meantime, Oana immigrated to Canada to help her daughter with child care and household duties. Oana tried to visit her home country as often as possible because she sometimes felt homesick and missed her friends and the Romanian way of living:

“I like the atmosphere, because we [Romanian people] are united and help each other. [...] Here [Canada] it is different. Everybody stays in their families; they are more individualistic.”

Goodbye and Welcome

As Oana was helped by her mother and grandmother with caring for her own daughter, Oana saw it as matter of course to return the favour towards her own children. Therefore, she visited Canada for the first time when her grandson was born in order to help his parents with him.

“Well, it’s normal for a mother to help her child. [...] I received help from my mother with my children. And my grandmother came to me when I needed help, they always came.”

After immigrating to Canada, Oana took care of her grandchildren as well as the household. She enjoyed cooking Romanian meals and baking traditional pastries for her family and friends. She explained that she has always tried to be “useful” to her surrounding, and therefore, enjoyed doing things for people.

“Well, to have work to do so that I don’t get bored. That I contribute to something, to be useful for somebody. And I certainly felt useful.”

“Because I know they [pastries] are appreciated by everybody.”

Once in Canada, Oana travelled back and fourth between Romania and Canada many times. She explained that there were many differences between these countries, and both have positive as well as negative aspects. On the one side, Oana explained that she liked the warm and united atmosphere among Romanian people and the fresh food from the farm market, which she could not find in Canada. However, on the other side, she acknowledged that Canada offers her more beneficial living conditions and better health care:

“Here [Canada] the living conditions are way better, because you earn more money. And there are different opportunities. Over there [Romania], no.”

Oana explained that also her attitude towards life changed since she emigrated from Romania. She was eager to keep a peaceful and respectful relationship towards her daughter and grandchildren, and therefore, enjoyed helping them out but did not intrude in their lives.

“I helped out a lot with cooking, ironing, absolutely everything. When I was done with that, my daughter came home, and I went down to the basement. I didn’t have any problems then.”

The wheel has turned

Once her grandchildren grew older, Oana did not need to take care of them to the extent she did at the time of her immigration. She explained that she has become quieter and calmer and spent most of her day watching TV and filling out crosswords. Additionally, Oana’s health has declined drastically in the past few years, which did not allow her to stand or walk around much. She described her health condition as one of the biggest barriers she encountered in coping with her everyday life.

“I am watching TV all day long, especially because I can’t move anymore. I cannot do anything anymore, and it’s upsetting.”

Oana’s health also did not allow her to visit Romania. She missed her friends from Romania the most and explained that the public transportation system in her current neighbourhood was insufficient in order for her to make and visit friends in Canada. Not having a driver’s license, nor a car, made it difficult for her to get around the city independently.

“Here, it is very difficult to have friends, because it is impossible to reach them. I don’t have a driver’s license and I depend on my daughter to drive me.”

“It takes me more than an hour to get to the first bus station. And there, if I go, I have to change the bus. [...] If I go somewhere, it would take me the whole day.”

Oana explained that she tried to learn English, however, she had trouble remembering new vocabulary due to her age. Nevertheless, she was able to understand easy conversations or find a way to solve problems in situations when her English was not sufficient by asking her daughter or her grandchildren for help. Oana explained her biggest help to overcome all of her burdens was her family. As much as she helped them back then, her grandchildren and her daughter were trying to help her as much as possible in recent years. Oana said:

“Back then, I helped them. Now, they are helping me. It is beautiful. [...] The wheel has turned. And of course, you are happy when you see that they come and ask you if you need something.”

Oana was a strong and caring mother and grandmother who loved to guard her Romanian roots but dedicated her life to her new home in Canada. She appreciated having her grandchildren around and enjoyed every minute they were spending together.

“Even now, the same with me and my grandchildren. Every time they need this or that, the grandmother will do it. And I don’t feel bad about it. Not even once.”

The four narratives describe the experiences of the participants living in and contributing to Canadian society. Many similarities and differences can be noted across their stories, and themes that I identified within these stories are described in the next chapter.

Chapter Five: Results

Three larger themes with corresponding subthemes emerged from thematic analysis of the narrative data. The first theme relates to *Receiving and Giving Back*, where participants reported experiencing reciprocity regarding contributions they made to and received from their family. Two subthemes are embedded in this theme. The subtheme *Seeking Reciprocity* refers to general reciprocity which is found in the participants' relationship with their immediate family members. The second subtheme, *Getting to Zero*, relates to balanced reciprocity in which the participants try to give back to Canadian society in appreciation of what they have received. The second theme, *Staying in the Background*, focuses on the idea of the participants trying to be invisible, not be a bother, and avoiding negatively impact their surroundings by disrupting routines. This theme includes two subthemes: *Taking Care of oneself as Contribution* and *Creating Peace*. The first subtheme relates to the participants engaging in self-care activities as a result of not wanting to bother their family members, not being able to leave the house, and wanting to contribute to their own health. The second subtheme refers to the idea of the participants adapting to the family's needs and contributing to the home environment to create a peaceful way of being together. The last theme is called *Contributing as Expressing Identity* and relates to the idea of the participants considering themselves acting mainly in the role of grandmother and following their perceived responsibilities and expectations associated with that role.

Table 1: Demographic Table of Participants

Participant Pseudonym	Samantha	Elena	Gizella	Oana
Country of birth	Cuba	Colombia	Romania	Romania
Age	67	75	87	74
First visit to Canada	< 10 years	> 10 years	> 15 years	> 15 years
Gender	Female	Female	Female	Female
Highest level of education	University	High school	High school	College
Household income per year (approx.)	\$100,000	\$120,000	\$120,000	\$65,000
Marital status	Widowed	Divorced	Widowed	Widowed
Subjective Health	Good	Excellent	Very good	Fair
Ethnic/cultural background	Latina	Latina	Hungarian	Romanian
Former occupation	Agronomist	Family business (Real estate)	Photographer	Medical Assistant
Languages spoken at home	English, Spanish	English, Spanish	English, Romanian, Hungarian	Romanian

Years living in Canada	5	10	11	15
People living in home	Son, daughter-in-law, grandchildren	Daughter, son-in-law, grandchildren	Daughter, son-in-law, grandchildren	Daughter, grandchildren
Number of people living in home	5	5	5	4

In order to ensure anonymity, each participant picked a pseudonym for themselves which were used instead of their real names. As indicated in Table 1, all recruited participants were female, immigrated to Canada at least five years ago through the (grand-) parents sponsorship by themselves, lived together with their adult child, his/her spouse, and two grandchildren, and were part of a middle to high income household. They came from three different countries. Samantha was from Cuba and Elena was from Colombia; both considered themselves Latinas and spoke English and Spanish with their children and grandchildren. Gizella and Oana were from Romania, however, Gizella's cultural background was Hungarian. Both communicated mainly in Romanian and some English with their family members. The participants' self-reported health varied from excellent to fair. All women retired in their home country before they came to Canada.

5.1 Receiving and Giving Back

“If somebody does something good for me, I like to do something good for that person.” (Elena) – All participants pointed out contributing to the family and receiving contributions from them as an important component in order to live successfully together with their families. As this idea came out of the data, I related it to the concept of reciprocity. In the field of sociology and anthropology, reciprocity follows the logic of giving and taking of non-market goods or labour either directly or delayed as a natural need of people (Kirk, 2007). Sahlins (1972) described two types of reciprocity: general reciprocity and balanced reciprocity (Kirk, 2007). The first subtheme, *Seeking Reciprocity*, relates to general reciprocity which is embedded in the participants' close (intimate) relationships between family members. The second subtheme, *Getting to Zero*, relates to balanced reciprocity which occurs between the participants and further distant relationships, such as between the participants and their community or Canadian society (Kirk, 2007).

5.1.1 Seeking Reciprocity

“I came here so that I can take care of them and that they can take care of me.” (Oana) - All participants described their immigration to Canada as a win-win situation for them and their family. On the one side, the participants were able to contribute to the family’s well-being by doing certain activities, and on the other side, they had company and felt they had found a meaningful occupation by acting as an informal caregiver. However, over time, the participants’ contributing activities changed due to factors such as health decline and advancing age.

“Every time they need this and that, the grandmother will do it.” (Oana) – Samantha, Elena, Gizella, and Oana provided informal support and contributed to the family socially and culturally rather than economically. They helped their children by taking care of the grandchildren and the household and taught the grandchildren about their family culture and language. Samantha’s daily routine revolved around the grandchildren. Her main duty was to walk them to and from school in order to help her son and his wife who left the house early in the morning. While the grandchildren were at school, Samantha took over some light household tasks. She explained:

“I am here taking care of them [grandchildren] before they [son and daughter-in-law] go, because my son and his wife are going to their job very early. [...] I prepare the breakfast. I take them [grandchildren] to school. [...] In the afternoon I go and bring my grandchildren with me. And they are having homework with me. [...] My kids, they are my duty.”

“I have to cook for the family. [...] Sometimes I am just dusting and putting things into place when the kids go to school [...] and sometimes I make the beds.”

Elena, Gizella, and Oana had similar routines when their grandchildren were younger. Elena took care of her grandsons by walking with them to the park or playing in the house. When the boys grew older, Elena still remained in the role of a caring grandmother by being at home when her teenage grandsons brought over friends or driving them to different places. Occasionally, Elena took care of some light household tasks. She said:

“Usually go with them to the park, and to the library, and have fun with them. Looking at them, when they were playing. Cooking for them sometimes.”

“I clean a little bit. [...] I do the laundry because I like doing the laundry.”

For Gizella and Oana, taking care of the household was an additional part of their daily routine. Besides taking care of the grandchildren, they washed and ironed clothes and cleaned

the house in order to support their children who were busy at work. Also, Gizella and Oana insisted in speaking Romanian to the grandchildren in order to preserve their origin and maternal tongue. Gizella explained:

“When I came [to Canada], my children [daughter and son-in-law] had my grandchild who was three and a half years old. I had to bring him to kindergarten every morning at nine. And after lunch, at four, I brought him home. [...] When my second grandchild was born, I had to take her to kindergarten and pick her up, too. [...] Well, I changed their clothes, I changed their diapers, I fed them, like a mother. [...] Well, that was my duty.”

“I wash, I cook, I clean, I take care of the backyard. I do everything they need help with around the house, [...] like a maid.”

“I don’t want to speak English with them because then they won’t learn Romanian and Hungarian. And it is necessary. So, if they don’t have anybody to speak to them in Hungarian or Romanian, how will they learn?!”

Oana described her daily routine similar to Gizella’s. After she immigrated to Canada, she helped to take care of her toddler grandson and infant granddaughter in order for her daughter to be able to go to work. Later, Oana enjoyed sharing her experience and knowledge with her teenage grandchildren regarding Romanian dishes. Oana described:

“Well, at first my daughter stayed at home with my grandchild because the little one was only one year old. So, I woke up and did more around the house. [...] Then, I took care of the granddaughter. [...] I helped my daughter. She was able to go to work then.”

“When they [grandchildren] came home [from school], the food was already ready. Meanwhile, I washed, I ironed, I cleaned up. Well, I was like a housewife here.”

“I noticed that my granddaughter likes very much to bake. And I sit on a chair and I explain her the recipe.”

Although all participants called these contributions their duty or work, their motivation seemed to be to help and support their family and contribute to the family’s overall well-being. The participants described the importance of contributing each in their own way:

“Oh, it’s wonderful. Everyday I help them.” (Samantha)

“Well, trying to make their life good.” (Elena)

“I am very happy that I left [Romania] because I can help my family, I take care of the house, I help them with raising the children.” (Gizella)

“Well, it is normal for a mother to help her child, to support her.” (Oana)

As all participants prioritized their duty as a childcare provider over any other activity, the constrained time schedule did not allow them to engage in formal volunteering or other activities which were not connected to their family. Samantha and Elena expressed how they would like to volunteer at an organization as they felt that they did not contribute enough to their surroundings, neither as informal caregivers. However, both were unable to engage in formal volunteering activities as these activities took part when they were needed at home to take care of the grandchildren.

“But the problem is the schedule. The schedule is not good for me. Because I have to bring the kids to the school and I have to prepare everything for them when they come back. I need to go to the school to bring them home.” (Samantha)

“But I realized that if I become a volunteer in some place else, I won’t be here [at home]. And I need to be here. I feel good when I’m with the children.” (Elena)

Gizella and Oana did not consider doing any formal volunteering at an organization. Both explained that they were busy enough at home with taking care of the grandchildren and the household and that they felt they did enough.

“No, no. I didn’t have time. I was busy with the children. From the beginning, I was first with one child and then with two all the time. And then with the household. I wasn’t able to do any other activities. Not even volunteering.” (Gizella)

“Well, I don’t think that I would have wished to do that [to volunteer] because after my husband died, I worked a lot because I was the only one with a salary.” (Oana)

“I did it for them, now they are doing it for me: the wheel has turned.” (Oana) – All participants expressed how their contributions might be or were already changing over time. With their grandchildren’s and their own age and life stage advancing, the participants were aware of not being able to contribute in the same ways or to the same extent as they did at the beginning of their stay in Canada. Besides not being able to contribute as much, the participants said that they required more help with self-care from the family which they appreciated. As the participants gave at the beginning of their stay in Canada, now they are getting it back from their families

Among the participants, Samantha was the youngest and newest to Canada. Her grandchildren were still in elementary school and required more care than the other participants’ grandchildren who were already teenagers. Samantha explained that she considered herself able to contribute more to society, and therefore, was interested in participating in additional

activities outside of her home, such as formal volunteering. However, Samantha and Elena were aware of the fact, that their ability to engage in more activities might decrease with their age advancing and health declining.

“To do something good for other people. And I still can do that. Maybe in ten years or more, I cannot do that, if I am still alive. But just now I can do some other things.”

“I consider myself still young because I’m healthy. I can do things. [...] I’m worried that I will get too old and I won’t be useful. That’s the problem with me [...] because I know I will be a burden. That’s not useful.” (Elena)

What Samantha and Elena were worried about happening in their lives, was described by Gizella and Oana as their reality. Gizella and Oana contributed actively to their family but named their age and health decline as the main barriers to continue their contributions. Some activities they had to scale back, others they had to discontinue altogether.

“I still take care of them. But slowly by slowly less. With the years, I am aging. [...] Lately I already gave up on everything because I can’t anymore. [...] I cannot walk that well. My feet are hurting.” (Gizella)

“Now, since two years, I’m not able to do that anymore. [...] I cannot move anymore” (Oana)

Besides the participants getting older, Elena, Gizella, and Oana explained that their daily routine changed because their grandchildren became older. The teenage grandchildren did not require the same care as they needed when they were younger. Therefore, their duties as childcare providers reduced drastically. Elena decided to engage in more activities by herself, such as exercising, and only occasionally helped out her grandchildren. Gizella kept up with the household, however, had to scale down due to her age. And Oana had to stop all her duties due to her current drastic decline in health.

“Now, the one [younger grandson] is sixteen. I go with him when he has to drive because he cannot go by himself. [...] Well, I was very busy with the children. Right now, I am busy with my things [laughs] That’s the change, that I can do for myself.” (Elena)

“Well, what relationship should I have with them [grandchildren], because they are barely at home. [...] I cook for them, I wash, I keep things clean, tidy up... That was my relationship with them.” (Gizella)

“What did I do? I did a lot. [...] Well, with them [grandchildren] not really, because in their age, everyone has their interest in their own things. [...] I cannot do anything anymore. [...] When I was healthy, I did it for them.” (Oana)

“They take care of me, so that I have everything I need.” (Gizella) – Due to the participants’ advancing age and health decline, they started to require more help from the family for self-care. Particularly in Oana’s case, her health decline as she aged caused her to be in need of her family’s support. At the time of the interviews, she was not able to walk or stand for a long time, and therefore, Oana could not fulfill many of her previous duties. But she was touched by her grandchildren’s caring and supporting attitude towards her:

“Since I am sick, they come to me before they leave and ask if they can bring me something. They always bring me water for my medication and for my kidneys.”

The participants gave several other examples of when they felt they received a lot from their families. For instance, they appreciated that their families paid the bills, gave them a home, and spent time with them. Particularly in Samantha’s case, her grandchildren helped her improve her English and adapt to the Canadian way of living. Samantha explained:

“Well, the little one is always telling me [how] to pronounce better. And they are trying to teach me to sing the national anthem because I am going to be a citizen very soon.”

Elena appreciated, in particular the time she spent together with her family. She was happy about being able to enjoy her late life with her family accommodating her. Elena said:

“I need them [family] because I need company! And to see that people love me and that people take care of me. They gave me a room that I like, the place that I like, so I have all the good things that I can have in life. [...] They are always thinking what I like, and they want to please me. [...] I feel support by my family here.”

Gizella explained that her family gave her everything that she needs and asked for. Her family drove her to places and bought her things that made her life more enjoyable, such as Hungarian books and magazines:

“When I wanted to go somewhere then my children drove me with the car. [...] So that I have everything; everything that I need.”

It seemed that it was very important to all participants to establish a balance between giving to and receiving from their families. They took it as a matter of fact to help their children and grandchildren in their daily life and at the same time appreciated receiving from the family

affective support by not being alone and spending quality time together. The participants considered this giving and receiving within the family as the key to a successful living together.

5.1.2 Getting to Zero

“I agree that it is better for me to stay in Canada.” (Samantha) – All participants discussed receiving benefits from, and contributing to, their neighbourhoods, communities, and more broadly, Canada. These findings relate to the concept of balanced reciprocity, in which actors in the economic market or people with distant relationships give only as much as they expect to receive back and vice versa, and at the end reach zero (Kirk, 2007). In the case of the study participants, they expressed feeling guilty of receiving benefits from Canada and not being able to ‘pay it back’. This subtheme focuses on the relationship between the participants and their surroundings beyond their immediate families and is divided into two parts: receiving from Canada and giving back to Canada.

“The state is taking care of me.” (Gizella) – The participants expressed how they appreciated being treated well in Canada by the community. They were eligible and obtained the Ontario Drug benefit program and Old Age Security, in addition to their pension money from their home country (Government of Canada, 2019c, 2019d; Ontario, 2019c). These services brought them financial advantages and relief to their lives.

“After I was 65 years old, the [Canadian] government is giving me all the prescription for free. That’s good. And so now, I am less worried about that.” (Samantha)

“They [children] asked for the pension [Old Age Security] for me. [...]. I feel really happy and really proud to be Canadian, too. [...] Now, I can travel without a visa, I travel with the Canadian passport.” (Elena)

“I am very thankful that the state is taking care of me with the medicine, like of everybody who immigrates. The medication is for free. [...] I received the Canadian citizenship which made me really happy.” (Gizella)

“After ten years, I was able to apply for the Old Age Pension in Canada.” (Oana)

Besides these services, the participants spoke enthusiastically about how Canadian residents treated them respectfully and they enjoyed the Canadian environment, such as the landscape and security. Mostly, they appreciated Canada for giving their family a safe home and ensuring better living conditions than in their home countries.

“But here in Canada, normally, people are very polite. [...] They are taking care of what you need and trying to understand you. [...] Canada is a free country. [...] It’s democracy,

real democracy. The difference [between Canada and Cuba] is very, very big. [...] It's very good to live here. And I am happy for my grandkids." (Samantha)

"Well, I have a very good experience here. I think, people are so nice. I feel secure. I love the way they [Canadians] treat my children and my grandchildren. [...] My grandchildren, I think they live so happy here. [...] Because in my country it is difficult for children to be out without an older person. Here, they have such a security and good things for them. [...] They are really happy here, and I am happy to see them happy." (Elena)

"As soon as I saw the winter trees, when I smelled the fresh air, when I saw the cleanliness, oh... I fell in love right away. And I was happy to know that my children live here, especially after I saw that they made it here." (Gizella)

"Here, the living conditions are way better because you earn more money. And there are different opportunities. Over there [in Romania] not." (Oana)

"You must respect the country." (Samantha) – The participants expressed their awareness of receiving many benefits from Canada and not being able to directly "pay it back". For this reason, the participants seemed to value contributing to their communities beyond their immediate families as a form of compensation. They occasionally helped out family friends and seemed to express a desire to be, and be seen as, hard-working, appreciative immigrants. Samantha explained how she took care of the children in the neighbourhood. It was important to her to create a safe and fun space for the children to play with her grandchildren. Her neighbours called her grandmother and appreciated her efforts towards the children. Elena also helped out family friends by watching their children when they could not go to school. Gizella was convinced that immigrants would only be happy in Canada if they worked hard and tried to make a living. This is why she helped taking care of her grandchildren in order for her children to focus on their jobs. Oana baked and cooked for her family friends at get-togethers and for special occasions in order to give them pleasure.

"And when they call me 'abuela' [grandmother], I am feeling like I am their 'abuela', too. [...] The Canadian neighbour told us one day: 'Since you came here, the block is always full of kids playing, running. So, I think that you are [...] attracting all these kids.'" (Samantha)

"I took care of [friend's daughter's name] when she was little. [...] Because they [parents] couldn't take care of her, because she was sick, and she couldn't go to school. [...] And I stayed with her." (Elena)

"I see that there are others [immigrants] who aren't happy here. But when I take a closer look at them, I see that those are not that hard working." (Gizella)

“I like baking cakes. [...] Because I know they are appreciated by everybody because they know that I make them of good quality.” (Oana)

I realized that the participants hesitated at first when talking about what they receive from Canada. Some of them did not even want to mention while recording that they get the medication paid and receive Old Age Security additional to their pension from their home country. I interpreted this as feelings of guilt for receiving a lot from Canada but knowing that they might not be able to give it back. Furthermore, all participants seemed to be hesitant in the first interview to complain about their situation in Canada. They seemed to want to avoid appearing ungrateful towards their families and towards Canada. Only in the second interview, after the participants gained more trust in me, they were more open to address barriers they encounter with contributing and engaging in their surroundings outside of their immediate families.

For instance, all four participants reported having trouble finding and connecting with people in Canada due to a perception of Canadian society as individualistic and reserved, as well as the physical distances between neighbourhoods.

“I know some people from London. Even Cuban people. But they don’t live really, very near of me, so... it’s not easy for me to visit them.” (Samantha)

“What should I say... the people here [in Canada] are very reserved. They aren’t like us. [...] We don’t visit our neighbours [in Canada]. [...] I don’t have any contact with strangers.” (Gizella)

“Here it is very difficult to have friends because it is impossible to reach them. [...] Here [in Canada], everybody stays in their family. They [Canadians] are more individualistic.” (Oana)

The only social contact they had outside of their family were with people who they connected with through their family. However, often they did not consider these friendships to be particularly meaningful.

“Not very great social relations. Because [...] most of the people here [in the neighbourhood] are young people with kids, and my relation with them is just through the kids.” (Samantha)

“But those friends are very young. They are like my daughter’s age.” (Elena)

“My children were colleagues at school and now they are all here [in Canada]. They are very close to each other. It’s a Romanian group, about ten families, and we visit each other all the time.” (Gizella)

“I have friends here [in Canada]; all my daughter’s friends’ parents, I know and they know me. I met them through my daughter.” (Oana)

Overall, all participants attempted to give back to their communities and to Canada generally as a way of reciprocating for what they had received. However, they seemed to be aware of the fact that they could not give back to the same extent as they received. Therefore, they seemed to feel guilty about this imbalance and tried to give back by engaging in contributing activities towards their immediate surroundings.

5.2 Staying in the Background

“I prefer to be quiet and that’s why I don’t cause any trouble.” (Gizella) – As described in the first theme, the participants invested as much resources and time as possible to contributing to their families. Aside from these more tangible contributions, the participants contributed to family life and supported their families in more hidden ways, such as taking care of themselves and not bothering them. The second theme *Staying in the Background* refers to the idea of the participants trying to be invisible to their families and their surroundings by not being indebted or a burden to them. The first subtheme, *Taking care of oneself as Contribution*, relates to the idea of the participants engaging in activities which contribute to their health and well-being. By staying healthy, the participants were hoping to keep on contributing to their families and not requiring care from them. The second subtheme, *Creating Peace*, refers to the participants’ efforts to create a peaceful and successful life together within their families in their Canadian homes. The participants adapted to the family’s need and considered their role in the background instead of an active, assertive member of the family.

5.2.1 Taking Care of oneself as Contribution

“I don’t want to be a burden. That’s not useful” (Elena) – The participants main goal was to not become a burden to their families, however, several factors acted as barriers for them to contribute in certain ways or to the same extent as they desired. For example, a lack of public transportation, precarious weather, and a decline in health constrained the participants’ ability to leave the house. Therefore, the participants spent more time on activities in their homes that benefited their well-being and health, such as exercising and leisure, such as reading.

They experienced these self-care activities as a direct contribution to their well-being and an indirect contribution to their family, as a way to avoid burdening them.

“I don’t want to take a bus.” (Elena) – The participants’ desire to avoid burdening their family seemed to constrain the places they could go and the activities they could engage in. An issue that all participants encountered was the location of their home and insufficient public transportation. Their houses were each embedded in large neighbourhoods that were distant from the city centres, malls, libraries, and other facilities. Only Elena had a driver’s license, but she did not own a car, so none of the participants were able to drive to their desired destinations by themselves. Furthermore, the participants did not live close to public transport hubs which required them to change bus lines several times. Each of them reported that taking a trip somewhere by bus was time consuming, and therefore, they avoided it. In addition, Samantha, Elena, Gizella, and Oana said that they did not want to bother their families by asking them to drive them around, and therefore, came to terms with staying in the house.

“I don’t have a car, I don’t drive. So, I must take the bus [...]. They [children] cannot drive me to all these activities. That’s why I am here [at home]. [...] In my opinion, the bus has not very good service. So, it’s difficult for me, but what can I do?!” (Samantha)

“If you do something out of the house, you are going to stay out of the house the whole day. And you need a car. You need means of transportation. That in my age is difficult at some point. [...] But I don’t like to take their car because they need their car, and I don’t like to bother them.” (Elena)

“I don’t own a car. [...] We don’t use it [bus]. [...] I didn’t have the need to [leave the house by myself].” (Gizella)

“I don’t have a driver’s license, and I depend on my daughter. And when she comes home from work at 6 PM, how can I tell her: ‘Bring me to my friend’s house!’ [...] I just think after she spent so many hours at work, she returns home tired, and then I would also give her my problems on addition.” (Oana)

“Winter is hard for me.” (Samantha) – The seasons in Canada, in particular the winter, also placed constraints on the participants’ ability to leave the house. All four participants were scared about falling on icy pathways, getting hurt, and then becoming a greater burden to their families. Therefore, they spent their days in their homes. Especially Samantha was frustrated about this situation, as being outside allowed her to socialize with people and being locked in the house made her feel isolated. Elena saw the winter as an opportunity to focus more on her self-care and exercise in the house rather than go outside to

take walks or drive the car to pick up her grandchildren. For Oana, walking outside in the winter became a bigger issue after she was not able to stand and walk properly anymore after her health declined.

“I must stay inside the house and I cannot go outside. [...] Because I can’t at that time. I’m afraid I will have a fall and break a bone or something like that. [...] I live almost every day just at home, just at home... and it’s very boring.” (Samantha)

“But when there is snow, I don’t like to go out because I don’t want to fall down. [...] I walk more on the treadmill.” (Elena)

“We caught some winters which were very difficult. Now I have problems going outside in the winter.” (Oana)

“Well, who wants to be sick?!” (Gizella) – As mentioned earlier, because the participants’ decline in health did not allow them to fulfill their duties of childcare and household responsibilities to the same extent as they did before, Samantha, Elena, Gizella, and Oana expanded their repertoire of activities by focusing on themselves. The participants regularly engaged in activities that kept them physically, mentally, and socially healthy. They took walks or exercised, read books or watched TV, and spent time with their family or kept contact with their friends from their home country. The participants reported feeling happy about contributing to their own health, aiming to become less of a burden on their families.

“I try to take a walk because it’s healthy for me.” (Samantha)

“Because I need it [daily exercise]. [...] Because I know I get rusty. [...] Otherwise I won’t be able to move or walk in five years. So, it’s very important for my health. [...] Because I will be a burden.” (Elena)

“If you are sick, then the worries are bigger. So, the sickness is something that is disturbing the normal life.” (Gizella)

“I do things for my health. [...] I go to the chiropractor. The other time, I did physiotherapy. I got to my doctor to get vaccinated. [...] When I was able to walk, I used to walk around every day.” (Oana)

5.2.2 Creating Peace

“I wanted a peaceful life.” (Elena) – After asking the participants about their motive to immigrate to Canada, they answered that they did it for their families. Not only did the participants anticipate supporting their children and grandchildren in their daily life, but they wanted their family not to worry about them being alone in a different country. For the

participants, a respectful way of treating each other was crucial in order to allow a peaceful and successful life together. They contributed to their families by helping to create peace in the household.

“I don’t intrude.” (Oana) – Samantha, Elena, Gizella, and Oana contributed to this peace by adapting to the family’s needs and not imposing any of their own wishes and opinions to avoid intruding in the daily routine. Furthermore, the participants saw their roles as in the background, and let the family take the lead over their lives. In doing so, they believed they were fulfilling the appropriate role of the grandmother who likes to enjoy a life close to their grandchildren and contributes to their children’s peace of mind. After asking Samantha, Elena, Gizella, and Oana for the recipe of their successful life together in their family’s home, they answered that it is crucial for them to not intervene in their family’s daily life. In cases of discussion between their child and their child’s spouse, the participants preferred withdrawing from the situation and adapting to the family’s decisions and needs. Although Samantha expressed having felt more socially connected and happier in her old neighbourhood, she was willing to move away from there in order to support her children and grandchildren in finding better opportunities in the new neighbourhood. Elena described how she liked to spend time with her family doing whatever they did, even if she did not like the activity. Gizella explained that she did not take part in family decisions and discussions in order to avoid fights and arguments. Oana physically removed herself and went into her basement living area to give her daughter room and time to relax after she came home from work.

“It was a better time for me [in the old neighbourhood], but not for the kids. [...] The choice to come here [to new neighbourhood] was very good for the family. So... I am happy with that. You know, life is not perfect. You cannot have everything.” (Samantha)

“When they like to do something, I always say: ‘Well, let’s go!’ Sometimes, they want to go to the movies, and I don’t even care for the movie. But I don’t want to do something to the programme that they want to do. So, I say: ‘Well, let’s go!’ [...] I think that this is a very peaceful house.” (Elena)

“I don’t get involved in their discussions. I don’t intend to do anything bad between the two [daughter and son-in-law]. [...] My goal is to keep the family together in peace.” (Gizella)

“I don’t want to bother anybody. [...] I don’t intrude into my daughter’s life. [...] My daughter came home, and I went down to the basement. I didn’t have any problems then.” (Oana)

Furthermore, the participants expressed how important it was to respect each other's personal space in order to ensure a successful time living together. With their activities, they tried to create a peaceful home in which they do not bother their family members. In order to give the family space, the participants engaged in activities by themselves. Samantha wrote poems, Elena listened to the radio or watched Netflix using her headphones, Gizella read Hungarian books, and Oana filled out crosswords to train her mind. The participants enjoyed these activities and used this time alone to contribute to their own well-being.

“Some gray days, I remember my husband and all life. [...] And I keep them [poems], nothing for publication or something like that, just for me. Just for me.” (Samantha)

“Well, I think we are really, really happy because we know how to live with each other. [...] For example, when I watch TV, I know how, I know that I have to hear with the earphones, otherwise [...] the noise will bother them.” (Elena)

“To read. Because I like to read. [...] So, I read all the time something in Hungarian and Romanian.” (Gizella)

“And I went into my room, I slept, I did some crosswords. [...] I like doing them because it makes me remember things: poems, literature, nature, absolutely everything.” (Oana)

5.3 Contributing as Expressing Identity

“I am so happy to be a grandmother now.” (Samantha) – The last theme refers to the participants considering their contributions as part of their role as a grandmother. The participants all seemed to value family and had certain expectations about roles within families. In the interviews, each participant shared experiences about economic and social contributions they made before immigration. Furthermore, all participants saw it as a matter of course to continue to contribute through activities related to their previous paid employment despite their change in role. All participants went from workforce to retirement and from living alone to becoming a caring grandmother.

“I loved my job.” (Samantha) – Samantha and Oana identified themselves through their work role and spoke passionately about their past employment. Not only did they enjoy their jobs, they also continued to use their expertise from their respective fields to contribute to their surroundings in Canada. Up to the time of her interviews, Samantha, who was a phytopathologist, analyzed the plants in her neighbourhood and reported contaminated trees to the authorities. Furthermore, she collected bibliographies about agronomy and translated abstracts in order to help her former Cuban colleagues.

“In Cuba, it was with tropical plants, but there are so many things that are almost the same. [...] Even now, when I go around the pond, I am looking at some plants with special spots. [...] Sometimes I even call them [authorities].”

“Sometimes I help them [colleagues] because in Cuba they don’t have many possibilities about bibliography. [...] I even translate some of the abstracts. [...] I even wrote with some friends two books about diagnoses and diseases.”

Oana worked for many years in the medical field. She considered this work her passion and used her knowledge to help her family members and neighbours when they needed medical advice. Furthermore, Oana explained that her caring personality grew stronger through her job which she showed towards her family members each day.

“I didn’t need to go with my daughter to the doctor. Or even my neighbours always came to me, and I solved it for them, so they didn’t have to go to the doctor anymore.”

“I was very happy that I worked there [in the medical field]. I think that I was born for that, to help people. That’s how I am. Even now, me with my grandchildren, every time they need this and that, and the grandmother will do it.”

“I always have been feeling that I’ve been useful.” (Elena) – All participants showed a strong work ethic which they developed in their jobs and at home and transferred it to their new role in Canada. It was important to Samantha, Elena, Gizella, and Oana to feel needed and “useful”. They considered contributing and being useful as a necessity to reach a balance, become a “good” immigrant, and be happy in their new home country. Furthermore, being useful was seen as part of their identity as they perceived it as expected in the roles that they took on. Samantha saw in contributing a way to connect to other people outside of her family and socialize with others in her surroundings. Elena and Gizella connected the feeling of being useful with well-being. And Oana considered “doing nothing” boring. All four participants did not expect any praise for their actions and described them often times as “normal” and a matter of course.

“I would like to volunteer. [...] Mainly [for] company. And having people for talking and [...] sharing. And you can be useful.” (Samantha)

“I wanted to help some, to be a volunteer or something like that. [...] [So] that I’m useful. [...] And doing something good. When I help someone, it makes me feel good.” (Elena)

“To have work to do, so that I don’t get bored, that I contribute to something, to be useful for somebody.” (Oana)

The participants connected not feeling useful and not reaching balance to feelings of frustration and the need to do more. Since Samantha immigrated to Canada, she had tried to engage in formal volunteering but was confronted with recruitment processes which made her feel as though she was not needed. For a short time, Elena considered volunteering as she did not feel like she was doing or contributing enough. And Gizella and Oana were frustrated about their health not letting them be useful and contribute anymore.

“It was very difficult. I was hoping to do something, like taking care of the forest or something like that. But I needed, they told me, I needed special instruction. I had to pay for that. And they had so many conditions. So, okay. They don’t need me.” (Samantha)

“Because sometimes I think, I don’t do enough. [...] Enough for people. To be useful for something.” (Elena)

“Every time I think about that happening to me. To not be able to go to the bathroom by yourself, to wash yourself, to brush your hair, do your nails. [...] I don’t want to imagine not being able to do all of these things anymore. The thought is horrible for me.” (Gizella)

“Since two years, I cannot do anything anymore and it’s upsetting.” (Oana)

“I have a good time with my kids. They love me.” (Samantha) – When asked why they actively supported their children with childcare, the participants answered that it is a “normal” part of the grandmother’s role. They did not consider their contributions as anything extraordinary, but rather as something that is expected of a grandmother. This understanding of the role of grandmother was something that the participants developed during their youth and young parenthood when receiving help from their own parents and grandparents. Furthermore, all participants cared for other family members or people who needed their help before they immigrated. Therefore, it was a matter of course to the participants to continue their care giving activities for their family in Canada.

“They know that I am always helping them [...] and I think that that’s okay. That’s normal in my country.” (Samantha)

“I felt useful. That’s, I think, very important for a person. Especially, when you get older and you have been helping your family. My parents and my sister, I helped them until they died.” (Elena)

“He [husband] wasn’t able to speak anymore. I had to learn how to feed him. It was really hard, and I suffered a lot.” (Gizella)

“Usually if you’re not a good grandmother then you don’t help your children. [...] Like I received help from my mother with my children [...] and my grandmothers came to me when I needed help.” (Oana)

Nevertheless, Samantha, Elena, Gizella, and Oana assured me that they enjoyed their situation and their life together with their family. They came to Canada to fulfill the role as a grandmother and considered it a precious time that they would not want to change. Furthermore, each participant expressed how happy the role of grandmother made them and how it fills their lives with meaning and happiness.

“I came here because I wanted to enjoy my grandkids. And just now I am enjoying them. So, I am happy with that. You know, life is not perfect. You cannot have everything. [laughs] [...] For people like me to have their grandkids, it’s so precious. [...] You feel that you have something to give them and they have a lot to give to you.” (Samantha)

“So, it was so nice for me to come here and I could help [daughter] with the children. So, it was just wonderful to feel that I was useful, very useful. [...] I have so much peace in my life here. [...] I see happiness in the family, that gives me peace.” (Elena)

“I was able to do something for my children. I was very happy. I felt really good. [...] I was alone in Romania. [...]. I still take care of them [...], and now they take care of me.” (Gizella)

“Well, first of all I didn’t have anything to do in Romania anymore, and then I said that I want to come and help my daughter. [...] I am supported by them because I know I’m not completely alone here. [...] I love it! Back then, I helped them, now they are helping me. It is beautiful.” (Oana)

The three themes, *Receiving and Giving Back*, *Staying in the Background*, and *Contributing as Expressing Identity*, and their respective subthemes demonstrate the variety of ways of how older recent immigrants contribute to their Canadian surroundings. Whereas the majority of their contributions were directed towards their immediate families and themselves, their activities indirectly benefited a wide range of their community. Notably, the participants’ main motivation to contribute was to appear invisible and not become a burden rather than receive acknowledgement and recognition for their actions.

Chapter Six: Discussion

In this last chapter, I discuss the results and provide a conclusion to the study. First, I discuss the findings in relation to previous research about recent older immigrants and their contribution to society. Then, I present how the life course approach relates to the themes and which unexpected findings I discovered in the course of the study. Following, I critically examine the study process by discussing limitations and then provide implications of the findings and recommendation for further research. Lastly, I conclude the study by summarizing and highlighting the main points.

6.1 Relating Study Findings to Previous Research

Previous research on older Canadian adults suggests that in the last life stage, an individual's contributing activities do not cease but rather continue. They either continue in a different context, to a lesser extent, or in a different way. However, most of the research about older adults' productivity in late life has been focused on people who have spent most of their lives in Canada. This study adds to the literature by presenting and analyzing stories about recent older immigrants and their experiences contributing to Canadian society. The participants' stories present specific cases which may be transferable to other settings and which readers may relate to their own experiences and lives.

6.1.1 Contributions based on Reciprocity

The concept of reciprocity, which refers to the individual's urge to give and take non-market goods (Kirk, 2007), was found to be one of the main study findings. The type of reciprocity depends on the relationship between individuals, which is determined by love, trust, and altruism (Kirk, 2007). Within their immediate families in Canada, study participants helped with taking care of the grandchildren and household. These findings relate to the concept of general reciprocity, defined by Kirk (2007) as generous sharing, gratitude and an open-ended, diffuse obligation to return favours. In families, the members typically follow the logic of general reciprocity and solidarity in which they give unconditionally without expecting the same amount back in order to contribute to the well-being of the family (Kirk, 2007). For example, parents provide care for their children without asking for the same care. Furthermore, favours do not have to be returned right away which allows for a time shift. Family members who experience generosity from another member tend to either return the favour to the same person right away, delayed or even to another family member (Kirk, 2007).

As outlined in previous literature, recent older immigrants, like study participants, engage in informal activities that are in the best interests of their family (Turcotte & Schellenberg, 2010; VanderPlaat et al., 2012). Study participants reported contributing to the family by providing instrumental support, and in return, received affective and emotional support from their family members, reflecting types of informal support described by Bigby (2004) and Berkman and colleagues (2000). In the current study, the main instrumental support provided by participants was caring for the grandchildren and helping with household tasks. They described these contributions as their duty which they prioritized over other daily activities. In return, the participants received affective support by spending time with their family members, sharing activities, and not being alone (Berkman et al., 2000; Bigby, 2004; Dalley, 1988). With both study participants' and their grandchildren's age advancing, their contributions changed. In accordance with the literature, the participants followed more retirement and leisure activities and no longer performed many childcare tasks, the older they became (VanderPlaat et al., 2012). Although general reciprocity continued to be present between the participants and their family members, the original pattern of participants providing and family members receiving instrumental support switched over time. Due to declines in health, the participants started to need their families to provide them with instrumental support, in addition to the other types of support they received, such as affective support. The findings of the current study add to the literature by identifying that the participants were aware of transforming from being giver to receiver of instrumental support and seemed content about this change. They described it as an inevitable course of life which they deserved after having contributed during their earlier years.

The participants' stories regarding their contributions to the neighbourhood, community, and Canadian government relate to a further form of reciprocity, balanced reciprocity, which occurs in the economic market and in further distant relationships (Kirk, 2007). It is based on the idea that individuals give and expect to receive back and vice versa (Kirk, 2007). On the one side, Canadian society provided the participants with benefits and services in order to maintain and enhance their settlement and integration (Government of Canada, 2017). On the other side, the participants attempted to return the favour directly by actively contributing to their communities and being a "good" immigrant. For instance, they took care of neighbour children and were always friendly and respectful towards people they met. Specifically, the participants received Canadian Old Age Security additional to their pensions from their home countries and they were covered by the Ontario Drug Benefit

program. The participants reported that these programs unburdened them financially and improved their health, as they were able to visit doctors regularly and receive medication. Similar to the literature, the participants were not motivated to be involved in integration programs or organizations (Peace, Holland, & Kellaber, 2006; Turcotte & Schellenberg, 2010). For instance, none of the participants took free English language training classes which are often part of the integration process for new immigrants and associated with the maintenance of health (Ng, Pottie, & Spitzer, 2015). Two participants were not able to communicate fluently in English; however, they did not consider this as a barrier or disadvantage to integrate themselves into the community. Furthermore, the participants expressed never having been discriminated against for being an immigrant, but rather experienced support and open-mindedness by Canadians. Reasons for the lack of perceived discrimination could be that none of the participants were visible minorities and they were not often in contact with people outside of their social networks.

In order to give back to their communities, the participants contributed to their communities directly by taking care of friends' children or children from the neighbourhood or friends. This finding supports previous research that recent older immigrants are more likely involved in informal volunteering, such as care giving of individuals from their close social networks, and less likely involved in voluntary organizations (Turcotte & Schellenberg, 2010; VanderPlaat et al., 2012). Two participants expressed how much they appreciated being able to live in Canada, and therefore, were acting as good immigrants who respect the law and work hard in order to not become a burden to Canadian society. Besides contributing directly to the community, the participants brought a benefit to Canadian society in an indirect way. Supporters of the family class program argue that family reunification leads to a better well-being and productivity of younger economic immigrants which means that recent older immigrants benefit Canadian society in an indirect way (Deshaw, 2006; KAIROS, 2005; Khoo; 2003; Kofman, 2004; Li, 2003; OCASI, 2005). Study participants stated that they took care of the grandchildren for their children to be able to go to work and advance their careers. Consequently, in this way the participants felt that they contributed economically to the Canadian market. This finding is in accordance with literature which suggests that family sponsored older immigrants live together with their families in order to give care, which allows the middle generation to work (McDonald et al., 2001). This study expands on previous research, describing how recent older immigrants actively seek to reciprocate the benefits they have received in Canada.

6.1.2 Hidden Contributions to their Families

The study also revealed ways in which participants contributed to their families and communities in more hidden ways. Besides the indirect economic contributions indicated previously, study participants expressed how they tried to create a peaceful home for their families by staying in the background and engaging in activities that prevents the participants from becoming a burden. For instance, the participants aimed to reduce the children's distress by living together with them, and therefore, worry them less about living in their home countries alone. Furthermore, contributing to the families' hominess and peace was named as one of the most important goals by the participants. The participants explained that they did not want to be involved in family discussions and decision-making. They preferred to adapt to the family's wishes and needs by not interfering in the daily routine or plans. With this they aimed to create a peaceful life together in which everybody respects each other. These types of contributions were invisible to their surroundings, as they were not visible goods or services, however, they benefited the recent older immigrants' and their families' well-being and life satisfaction. This finding represents a new contribution to literature in this area.

The participants also exercised regularly, read books, and stayed in contact with their friends and extended family online to maintain a healthy physical, mental, and social state. By investing time in their self-care, they aimed to prevent their health from declining, to continue to be an active contributor to their families and to avoid becoming a burden to their immediate families. These findings are in line with research showing that leisure activities during retirement which are meaningful to the older people and contribute to their health have a positive impact on the older people's well-being (Earl, Gerrans, & Halim, 2015; Mannell, 2007). They also resonate with previous research with Canadian-born older adults who take up positive ageing discourses in their everyday lives and to intensive work to avoid dependency and decline (Pack, Hand, Laliberte Rudman, & Huot, 2018).

The participants also tried to avoid adding to their children's work by engaging in activities in or close to their homes, thus avoiding the need for the adult children to provide transportation. Study participants were not able to leave their house or neighbourhood independently and comfortably because of the location and, at times, season. Each of the participants' neighbourhood was located outside of the city centres and far away from public transportation hubs; the participants also did not like to venture out in cold and snowy weather. As the participants did not want to bother their family members with asking them to drive them to places, they preferred focusing on activities which were accessible to them around their

homes. This finding highlights a new type of invisible contribution by recent older immigrants towards their families to the literature. These contributions may be driven by typical gender roles played by women, and particularly older women, in the participants' home country and in Canada; older women may be more likely to avoid dominant roles within families and keep their opinions to themselves.

6.1.3 Contributions according to Identity

Individuals develop different identities, roles, and responsibilities over their life course. Identity theory refers to individuals categorizing themselves as occupants of a role or position whose meanings and expectations are set and recognized by social structures (Stets & Burke, 2000). Study participants reported identifying themselves primarily as grandmothers. They valued and took up this role and identity in specific ways based on their own and others' expectations of what being a grandmother entails and what contributing activities are involved. Literature has shown that recent older immigrants go through identity changes and transformations in their behaviours, values, and contributions because of major life transitions, such as retirement and immigration (Berry, 1997; Holland & Peace, 2010). By fulfilling the expectations of their roles, the participants considered their contributions as a matter of fact and a key part of their roles as grandmothers; at the same time they felt useful to their surroundings.

In Western culture, the work and economic world has a significant influence on shaping the individuals' lives (Kohli, 1986; Riley, Kahn, & Finer, 1994). Individuals tend to identify themselves by their employment and experience a change in identity when they enter retirement. As indicated in the literature, retirement impacts the older individual's quality of life, well-being, and life expectancy (Bauger & Bongaardt, 2016; Hendricks, 2012). In accordance with continuity theory, older adults may continue activities from before retirement for comfort and higher life satisfaction in their new life stage (Nimrod, 2007). Two participants, who considered their previous work role as an important part of their lives, were motivated to continue this role in a non-economic setting. They used their expertise to contribute to their surroundings, and consequently, reported feeling useful. The other two participants, who did not seem to identify themselves through their work role, seemed content about dropping this role after retirement. In both cases, the contributions that the participants made seemed to be key ways of expressing their identity.

All participants reported having successfully overcome their life transitions, retirement, 'empty nest', and immigration, which might relate to the fact that they seemed to strongly value

their newly gained identity as a “full-time” grandmother. Previous research supports this interpretation, for example, Kesavayuth and colleagues (2016) stated that older individuals who find a compensating role following a life transition report better physical and mental well-being. Study participants reported that being a grandmother helped them find a meaningful occupation which brings meaning, happiness, and satisfaction to their lives. Furthermore, they considered their grandmother duties, such as caring for the grandchildren and taking over household tasks, as essential for their lives. The participants’ stories corresponded with literature stating that people need an occupation which satisfies and challenges them and provides a daily routine (Christiansen et al., 1999; Jonsson et al., 1999). For an occupation to have a positive impact on an individual, the individual’s skills must be up to meeting their challenges (Csikszentmihalyi, 2014). However, if the occupations are perceived as overwhelming or cannot be fulfilled, this can have a negative impact on well-being (Law, 2002; Moneta & Csikszentmihalyi, 2014). Furthermore, as participants’ advancing age and health decline reduced their physical abilities to fulfill their grandmother duties, they reported feeling frustrated about not being able to perform their role as grandmothers. Over time they, the study participants changed their way they performed their roles by either reducing their involvement in childcare or household tasks or engaging in more leisure activities. Similar to hidden contributions, the roles that the participants played in their families seemed very driven by typical roles that older women play in Canada and in the participants’ home countries.

6.1.4 Unexpected Findings

Based on previous research and my personal beliefs as an immigrant, I had certain assumptions about results that I might find through this study before conducting it. First, I believed that not being able to speak English would be named by the participants as a barrier to fulfill certain contributing activities. Secondly, I assumed that recent older immigrants are interested in volunteering formally in order to integrate into society and appear busy to the public. Lastly, I thought that recent older immigrants would encounter barriers to leaving their houses, and consequently, feel isolated and unhappy about their situations. These assumptions were not fully supported and at times challenged by my study findings.

In this study, two participants reported not being able to communicate fluently in English. However, they did not consider their lack of English skills as a barrier to feel connected and to contribute to their surroundings. These participants considered caring for their families as their main duties for which their mother tongues were sufficient. Furthermore, they valued

speaking their mother tongue to their grandchildren in order to transfer their family culture to them. One reason for this disinterest in learning English might be a low sense of belonging to Canada (Peace et al., 2006; Turcotte & Schellenberg, 2010). The participants seemed to consider themselves as a part of their families, in which they contributed in their mother tongue, rather than as part of Canadian society, in which English or French would have been required for integration. Furthermore, study participants expressed they had immigrated to Canada for their families and not because they wanted to live in a different country. Therefore, the participants focused all their resources and energy towards contributing and supporting their families rather than obtaining other further skills that could have helped them integrate to Canadian society.

None of the participants were involved in volunteering organizations, and three of the four were not interested in volunteering formally. These three participants expressed having felt completely occupied by their duties at home, and therefore, did not have the time to participate in formal volunteering. This focus on household rather than community may be related to the fact that formal volunteering is not common in their home countries, but rather part of the North American culture. For instance, in Canada 47% of Canadians, over the age of 15, are engaged in formal volunteering, with the volunteer rate for seniors being 36.5% (Cook & Speevak Sladowski, 2014). In comparison, in Romania only 20% of the citizens participate in formal volunteering in which the majority are under the age of 35 (Volum, 2011). Thus, cultural and personal expectations regarding formal volunteering may have deterred participants from this role.

Assuming that recent older immigrants might encounter barriers to being socially engaged outside of their families, I expected study participants to spend most of their time in the house. Furthermore, I assumed that being tied to their homes would lead to frustration, unhappiness, and the feeling of social exclusion. In fact, participants reported encountering several barriers, such as lack of public transportation or winter, which did not allow them to leave the house comfortably. However, except for one participant, they did not complain about these challenges, as they valued the time and contributions they were engaged in at home. The reason for this attitude might be again the strong sense of belonging to their homes and families (McDondald, 2011). Another reason might be that the participants came to terms with the barriers they faced, and in turn adjusted their expectations of the roles they could play within their families and communities. Study participants found pleasure in spending as much time as possible in the house. Another reason might be the participants' age when they immigrated to

Canada, as research suggests the age at arrival and early socialization experiences of recent older immigrants might have an influence on how immigration and the sense of belonging towards Canada is experienced (Vang & Chang, 2018). The younger recent older immigrants are at time of arrival the more likely they develop a sense of belonging towards the community beyond their families; older recent immigrants tend to express a lower sense of belonging towards Canada (Vang & Chang, 2018; Turcotte & Schellenberg, 2010). The participant who was not happy about being “stuck in the house”, was the youngest among the participants, and she immigrated to Canada at an earlier age than the other participants. In addition, literature suggests that the older recent immigrants are, the more likely they are to engage in leisure and retirement activities in their homes (VanderPlaat et al., 2012). Therefore, age might have had an influence on why the older participants were content about spending most of their time in their homes.

6.2 **Study Findings in Light of the Life Course Approach**

All four participants' contributions were influenced by time and life stage in different ways. Three concepts within life course theory are particularly useful in interpreting the study findings: participants' last life stages and appropriate expectations and roles; overcoming life transitions; past experiences influencing participants' present and future.

The life course approach divides the individual's life span in different life stages which are determined by chronological age, sociocultural norms, and the individual's functional status (Frost & Pratt, 2017; Baird et al., 2017). The life stages refer to the developmental aging process and order of social roles along an individual's life span (Bengtson et al., 2005). Furthermore, families are age-differentiated and age-integrated. *Age-differentiation* follows the idea that the generational position defines an individual's place in the family structure and shapes their identities, roles, and responsibilities (Settersten, 2003). *Age-integrated* means that individuals of varying ages and cohorts are joined, and specific roles and responsibilities shift up the generational ladder over time (Settersten, 2003). Study participants considered themselves to be in the last life stage of their lives. Their roles and responsibilities were determined by their position as a grandmother in the family. The participants' as well as the adult children's expectations about the role of grandmother involved primarily active caretaking of the grandchildren and the household, and at the same time being a member of the family who acts in the background rather than taking the lead in family planning. These findings add to the limited literature of the life course approach in connection with immigrants and explain how

expectations determined by the life stage have an influence on what contributions recent older immigrants engage in.

Within the life course approach, the transition from one life stage to another can be experienced differently by different people. During the life stage of older adulthood, many individuals experience 'empty nest' and retirement (Holland & Peace, 2010). In the cases of participants, these life transitions seemed to be precursors to immigration and taking up the role of 'full-time' grandmothers. Study participants reported having immigrated to Canada because they entered retirement, and by this, lost their employment as a meaningful activity in their home country. Furthermore, they experienced the 'empty nest', due to their children having immigrated to Canada, and wanted to live closer to their immediate family again. The life events of immigration and retirement changed the participants' lives as they needed to adapt to a new surrounding and restructure their daily routines. Life transitions can be overcome successfully through finding compensating roles and relationships in new life stages (Moen, 1996), which the participants found in the role as grandmothers. Contributing to their families gave them new meaning in life after having given up their work and daily life in their home countries.

In addition, the participants' motivation to contribute in certain ways was influenced by their experiences from the past and their goals for the future. The life course perspective served as a timeline for the participants' stories in which past experiences influenced the participants' present state and plans. In accordance with continuity theory, the participants continued certain contributing activities, such as caring for others or using their work expertise, from earlier in their lives (Bass & Caro, 2001; Nimrod, 2007). Furthermore, the *life course approach to health* can be used to explain how past behaviours influence one's current health status as well as how current behaviours will influence one's future health status (Bustreo et al., 2018). The current study participants emphasized these links, as well. They reported engaging in physical and mental activities, such as exercise or reading books, which they believed would help to maintain their health and avoid potential health decline in the future. The participants invested time and resources to contribute to their current health with the goal not become a burden to their families.

A few researchers have applied the life course approach to immigrants with the focus on their health, income security, and non-local moves (i.e. Cornman et al., 2004; Longino et al., 2008; Wilmoth & Chen, 2003). However, the main difficulties in applying the life course approach to immigrants are their diverse cultures, beliefs, and understandings about chronological time (Fry, 2003). How cultures define life stages and expectations can differ from

recent older immigrant to recent older immigrant. An apparent paradox of the findings was that all participants seemed to follow Western ideas about life stages, in which late life follows working life and is considered as the last life stage. Their expectations of what the role of a grandmother entails, however, seemed to be culturally defined in a non-Western way. For instance, the participants explained that their contributions, such as active childcare, are expected from grandmothers in their own culture, and they noticed that it was not expected from Canadian grandmothers to be interested or involved in caring for the grandchildren to the same extent.

6.3 **Limitations and Future Research**

This study adds to existing research on recent older immigrants by presenting their experiences contributing to Canadian society. The narrative methodology allowed me to examine four stories of a population that have not been extensively studied in prior research on late life contributions. The study includes some constraints that may have influenced the results, nevertheless, the study findings have implications for future studies and practice. In the following sections, the study limitations and implications are presented.

The study findings are bounded by the specific individuals that participated in the study. There was little diversity among the participants. They were all female, lived in middle to high income neighbourhoods, were widowed or divorced, and each had two grandchildren. These demographics are, however, in accordance with the majority of sponsored parents or grandparents who immigrate to Canada (VanderPlaat et al., 2012). In addition, the participants' cultural background, their country of origin, and gender were significant factors which shaped their stories and expectations about contributing to Canadian society. The study participants were all from low economic, non-Western countries, shared similar values and even languages, and were female. None of the participants were from Asia or Africa, which represent the majority of recent older immigrants in Canada (IRCC, 2017; Statistics Canada, 2017). Furthermore, the participants' gender might have determined why they chose activities that focus on caring for others and staying in the background rather than taking the lead, as these are common characteristics for older women in Western culture and in their home countries.

In addition, the study participants all came from countries in which there is economic and political instability. The participants reported how their life quality improved in Canada and considered their immigration as a better alternative than staying in their countries. Therefore, they might have invested all their resources and contributions towards a life in

Canada. In contrast, the perspectives of recent older immigrants who reported having had a good life in their home countries, might have shared different experiences regarding contributing and integrating themselves to Canadian society. Another limitation of the study is that only recent older immigrants were interviewed whose lives together with their families were successful and peaceful. Therefore, more positive experiences with immigration and contributing to the society were shared, and fewer barriers or issues were mentioned by the participants. In contrast, there are older immigrants who experience their immigration and life together with their families as troublesome, and therefore, leave Canada. Recruiting and interviewing such individuals likely would have provided different perspectives and made the study findings richer and more diverse.

Another potential limitation regarding the participants is the fact that the study was about their life together with loved ones. They might have positioned themselves as doing well because they did not want to speak badly about their family members or share negative stories about living together with them. Therefore, the participants might not have fully explained and described their experiences. Nevertheless, I recognized a development of trust between the participants and me after I spent more time talking to them. Comparing the first with the second interview, the participants were more open to sharing detailed private information after I met them for the second time. Potentially, interviewing the participants more than two times might have allowed me to collect more in-depth information and gain more complex stories about the participants' experiences contributing to Canadian society.

A limitation as well as a strength of the study was the similarity between my and the participants' background as immigrants. Considering myself as an insider, I had a determined lens on how to examine the participants' stories and certain assumptions about what experiences the participants might share before conducting the interview. This might have led me to prioritize my own views when re-writing the stories and analyzing the data. To address this, I applied reflexivity to continually question my assumptions and allowed the data to guide me using the position of social constructivism. Furthermore, being an insider allowed me to connect more easily with the participants and build trust which led to in-depth stories with rich shared meanings and values. Therefore, I argue that sharing the same background led to co-constructed stories which conveyed the participants' messages and experiences of contributing to Canadian society.

This study contributes to a dialogue on recent older immigrants' experiences contributing to their families and communities directly, and indirectly to society. It provides a

starting point for developing practice implications and future research. Most notably, the participants were motivated to contribute to their surroundings and be a 'useful' member of society. Within this study one specific barrier kept the participants from extending their repertoire of contributing activities outside of the house: lack of sufficient public transportation. The participants did not engage in integration programs offered by the Canadian government, they did not go to the supermarket by themselves, and they did not visit friends or other social groups, because of insufficient transportation services. Investing in public transportation systems, which will benefit all Canadian residents who depend on busses, might give recent older immigrants the possibility to integrate themselves better into Canadian society and develop a stronger sense of belonging within it. In the cases of study participants, they expressed having found alternative ways of passing their time at home. However, the situation and feelings of the one participant who was frustrated about being tied to the house and neighbourhood might be applicable to other recent immigrants. Not connecting recent older immigrants to social networks outside of their families might create a strong dependence within the family and might increase the risk of social exclusion and isolation.

Assumptions that recent older immigrants might receive more benefits than they would be able to give back, and therefore, become a drain to resources, can be argued with the four participants' stories. The participants acknowledged receiving benefits from the Canadian state, however, attempted to either give back directly or stayed in the background to not bother anybody around them. This study challenges discourses on older immigrants that position them as a drain on resources (Beiser, 2005; Frances, 2002; Gunter, 2011; Stoffman, 2002) by presenting real cases of recent older immigrants who aim to give more than to receive.

Integration programs offered by the Canadian government typically target young, economic adult immigrants. Developing programs that address recent older immigrants and their interests and needs, might lead to a stronger sense of belonging to Canada and a better social integration outside of the family. For instance, the participants were less interested in participating in English classes to learn the language, and more interested in programs that focus on social networks and connect them with other older immigrants and Canadians. In addition, special attention should be given to policies and programs that help recent older immigrants share their contributions with other residents who might benefit from them. The goal should be to create a win-win situation not only within the recent older immigrants' families but also between them and Canadian society.

Future studies can further examine how recent older immigrants define and experience contributing to Canadian society. Involving a variety of different cultures and groups (e.g. men)

within such research will help to create a full picture of how recent older immigrants live in Canada. The current study demonstrated how many contributions by recent older immigrants are invisible, thus, more research is needed to adequately understand contributing activities outside of the dominant economic and human capital constructions of integration to focus on valuing hidden, social and cultural contributions.

6.4 **Conclusion**

This thesis explored how recent older immigrants experience contributing to Canadian society using narrative methodology. Through the holistic-content approach, four different stories were analyzed and resulted in three main themes: Receiving and Giving Back; Staying in the Background; Contributing as Expressing Identity.

Recent older immigrants value contributing to their surroundings – especially towards their families and themselves. The results from this study align with prior research, in that the participants reported being engaged in contributing activities in their last life stage. However, this study adds to the literature by highlighting and acknowledging recent older immigrants' informal and hidden contributions. As the study showed, family class immigration is connected to strong family and cultural rather than economic values. Both Canadian society and younger immigrants may benefit from older family members' immigration to Canada by utilizing their informal and hidden contributions in meaningful ways. For instance, a grandmother who stays at home and takes care of the grandchildren allows the middle generation to go to work and pursue their careers. Society does not appear to be aware of these contributions and limits recent older immigrants' value to economic benefits. Using this new understanding, the discrimination and misconception about recent older immigrants draining the Canadian system might be reduced. Furthermore, giving older immigrants the opportunity and resources to share their contributions outside of their families, might lead to greater benefits for society as a whole. This study demonstrated how valuable recent older immigrants are to their families, which in turn, enables their family members to more fully contribute to Canadian society, and what potential there is to gain from their contributions.

Epilogue

Having an immigrant background and certain assumptions and values of how to act accordingly as an immigrant, I was astonished that my point of view has been broadened and changed after conducting this study. I considered “good immigrants” as people who invest most of their energy in integrating themselves into the new society. I considered factors, such as knowing the language, receiving a good education, being hard-working, and having only natives as friends as indispensable in order to live happily as an immigrant. Furthermore, I assumed that those criteria were expected of me by the natives, and therefore, I concentrated on pleasing the receiving society. However, the participants taught me that immigration is shaped by the individuals themselves rather than by society. Just because an immigrant does not contribute economically and visibly to the receiving country does not mean that their immigration status is unjustified. Each immigrant can experience immigration differently and contribute in ways which are valued by others and themselves. With this new understanding, my previous guilt of not being able to give back to Canada has shifted to a more positive outlook because I gave credit to contribution I might have made socially and culturally to my surroundings.

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Appendices

Appendix A: Recruitment Flyer



**DID YOU IMMIGRATE TO CANADA?
ARE YOU 60 YEARS OF AGE OR OLDER?**

RESEARCH PARTICIPANTS WANTED

Immigrants have long been a fundamental part of the Canadian society. In this study, we would like to find out more about the roles that older immigrants play in their communities and families.

This study includes up to **three one-on-one interviews**. The time and place of the interviews will be determined by your convenience. The interviews will be audio-recorded.

- ❖ Did you immigrate to Canada after the age of 55 years?
- ❖ Have you lived in Canada for at least five years?
- ❖ Are you currently not working / Are you retired?
- ❖ Are you able to converse in English?
- ❖ Do you live together with your family?

If you answered **YES** to these questions and are interested in participating in this study, please contact:

Appendix B: Letter of Consent



Exploring Older Immigrants' Lives in their Communities

Letter of Information and Consent

Principal Investigator:	
Student Investigator:	

Study Information:

You are being invited to participate in a research project about your experiences of living in and contributing to Canadian society. We would like to find out about the ways that older immigrants contribute to their families and communities, and the barriers and supports that they face.

What are the study procedures?

If you join the study, you will be involved for up to two months. Within that timeframe, you will be interviewed by a researcher three times at a time and place that is convenient to you. The lengths of the interviews will vary from person to person and from session to session, but would last approximately 1 to 2 hours. These interviews will be audio-recorded.

During the first two interviews, you will be asked to share your story about your life in Canada. For the third interview, we will give you a document which summarizes the content of the prior interviews. You and the researcher will discuss this document, which will give you the chance to give some feedback and suggest changes you think are needed.

What are the risks and harms?

There are no known or anticipated risks or discomforts associated with participating in this study. However, re-telling a life story and reviving certain memories might lead to a certain discomfort and distress. If you experience any negative emotions during the interviews, you are free to take breaks or end the interview. Furthermore, please consider accessing the resources provided at the end of this letter. You may skip any question you do not wish to answer during the interview. In addition, you have the right

to withdraw from the study at any time and ask for complete deletion of your data. Leaving the study will not result in any penalty.

What are the benefits of participating in this study?

The study results will give us a deeper insight into the experiences made of older immigrants and discover potential threats, challenges, or benefits older immigrants are experiencing in Canada in relation to contributing to society.

How will participants' information be kept confidential?

Your data will not be shared with anyone except with your consent or as required by law. Your name and other personal information will be removed from the data and replaced with a number. A list linking the number with your name, telephone number and address will be kept in a secure place, separate from your file. The data, with identifying information removed, will be securely stored in a locked office in a locked cabinet or on a password-protected computer server at Western University. Representatives of The University of Western Ontario Non-Medical Research Ethics Board may require access to your study records to monitor the conduct of the research. While we do our best to protect your information there is no guarantee that we will be able to do so. The inclusion of your name on the consent form may allow someone to link the data and identify you. We will follow Western University guidelines and retain study data for seven years, after which any data that could identify you will be securely shredded and erased electronically. If the results of the study are published, your name will not be used and no information that discloses your identity will be released or published. We may use personal quotes obtained during study interviews in future publications.

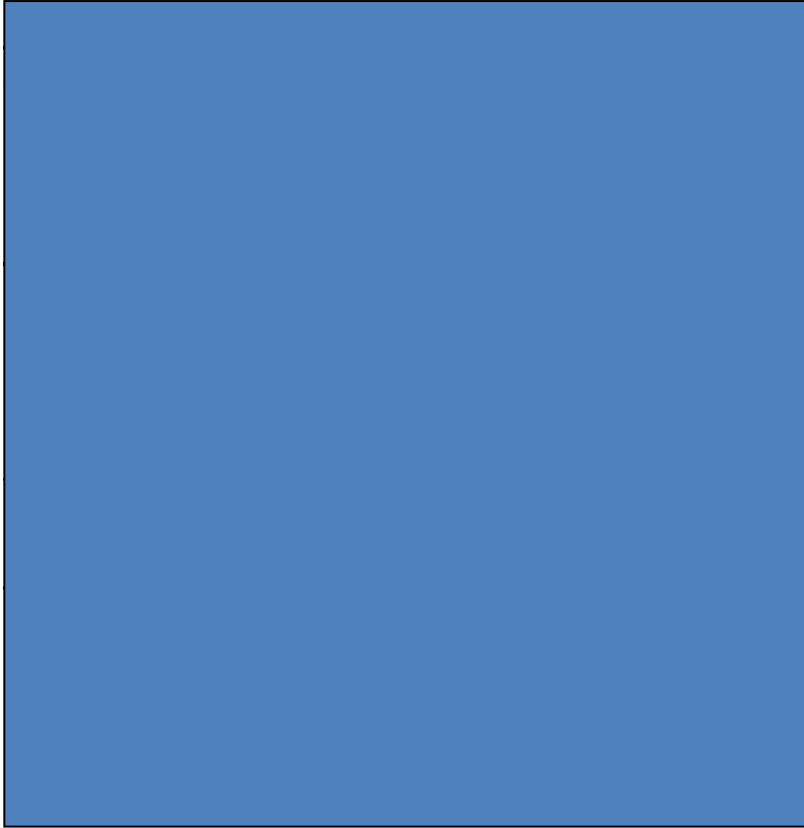
Other information about this study:

Participating in this study is entirely voluntary; and you may leave the study at any time. You do not waive any legal right by signing this consent form. If you have any questions about the research, please contact Alexandra Schuster or Carri Hand (see contact info above).

If you have any questions about your rights as a research participant or the conduct of this study, you may contact The Office of Human Research Ethics [REDACTED]

This letter is yours to keep for future reference.

List of Social and Health Service Providers:





Exploring Older Immigrants' Lives in their Communities

Consent Statement – Participant Copy

Participant Signature:

I have read the Letter of Information, have had the study explained to me and I agree to participate in the research. All questions have been answered to my satisfaction.

_____ Print Name of Study Participant (YYYY)	_____ Signature	_____ Date (DD-MMM-
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Witness Signature:

My signature means that I have explained the study to the participant named above. I have answered all questions.

_____ Name of Person Obtaining Consent (YYYY)	_____ Signature	_____ Date (DD-MMM-
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Exploring Older Immigrants' Lives in their Communities

Consent Statement – Copy for Study Records

Participant Signature:

I have read the Letter of Information, have had the study explained to me and I agree to participate in the research. All questions have been answered to my satisfaction.

<hr style="width: 100%;"/> Print Name of Study Participant (YYYY)	<hr style="width: 100%;"/> Signature	<hr style="width: 100%;"/> Date (DD-MMM-
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Witness Signature:

My signature means that I have explained the study to the participant named above. I have answered all questions.

<hr style="width: 100%;"/> Name of Person Obtaining Consent (YYYY)	<hr style="width: 100%;"/> Signature	<hr style="width: 100%;"/> Date (DD-MMM-
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Appendix C: Demographic Questionnaire

Demographic Questionnaire	
1. In what year were you born?	_____
2. What country were you born in?	_____
3. In what year did you first come to Canada to live?	_____
4. What is your gender?	<input type="checkbox"/> Male <input type="checkbox"/> Female
5. What is the highest level of education you have achieved? (check one answer)	<input type="checkbox"/> Less than grade school completed <input type="checkbox"/> Grade school completed <input type="checkbox"/> Some highschool <input type="checkbox"/> Completed highschool <input type="checkbox"/> Some college/university or trade school <input type="checkbox"/> Completed trade school/college/university
6. What category does your yearly household income fall into? (check one answer)	<input type="checkbox"/> Less than \$20,000 per year. <input type="checkbox"/> \$20,000 to 39,000 per year. <input type="checkbox"/> \$40,000 to 59,000 per year. <input type="checkbox"/> \$60,000 to 79,000 per year. <input type="checkbox"/> \$80,000 or more per year.
7. What is your current marital status? (check one answer)	<input type="checkbox"/> Married / common law <input type="checkbox"/> Separated/ divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Single

1. How would you describe your health

(check one answer)

- Excellent
- Very good
- Good
- Fair
- Poor

2. What is your ethnic or cultural background?

3. What was your occupation before you came to Canada?

4. What languages do you speak at home?

5. How long have you been living in your current home?

6. How long have you been living in your current neighbourhood

7. Who lives with you in your home?

(check one or more answers)

- Partner
- Son/Daughter
- Son's/Daughter's partner
- Grandchild(ren)
- Friends
- Other: _____

8. Including yourself, how many people usually live in your home?

Appendix D: Semi-Structured Interview Guides

Samantha:

General question about contributing

In the last interview, you mentioned several activities which you do over the day. Can you tell me about a time when you felt your activities helped others, or contributed to your community in some way? [Who do you think benefited from these contributions?]

Questions about contributing to family

You touched upon the role you play in your family. Can you tell me more about the role you play in your family? You talked about your role as a caring grandmother. How does this role make you feel? [How has your experience with taking care of your grandchildren changed over time?]

One of the activities, you mentioned in regard to your grandchildren was walking them to school and picking them up. Could you tell me more about how this affects you, and how it affects your family?

You also mentioned that your grandchildren help you learn by doing the homework with them. How do they help you? [What is it like for you?]

You talked about your grandchildren often having friends over. Could you tell me more about what it is like when all the children are at your home? [What do you do when the other children are there?] You mentioned the other children calling you “abuela”. Can you tell me more about the role you play in your neighbourhood?

You have talked about your activities during the day. What is it like in the evenings, when you have your family around? [You mentioned that you are having a good time, what do you mean by that?]

You mentioned that you cook for your family after you come home from dropping off the grandchildren. Are there other activities you would like to do, to help your family? [what stops you from doing them?]

Questions about contributing to friends/neighbourhood/community

Could you tell me more about your old neighbourhood in the south with your family there? You mentioned that you were afraid to volunteer in the old neighbourhood. What did you mean you were afraid to?

You said that you still have some friends in London who live in the south. Could you tell me more about them? [You also mentioned that you rarely visit them. What keeps you from visiting them often?]

Could you tell me more about your neighbours in this neighbourhood?

You mentioned that you loved your job.? What did your job mean to you?. You also talked about helping your former colleagues with certain tasks (e.g. bibliography). Was helping colleagues important to you? Why?

Questions about self-care/contributing to self

You mentioned that you usually take walks, because they are healthy for you. Could you tell me more what you do for your health?

You talked about writing poems and reading. Could you tell me more about these activities? [What do you enjoy most about them? What do they mean to you?]

You talked about how religion is important to you. What does your religion mean to you?

Questions about barriers to contributing

In your first interview, you mentioned that you are a social person. Can you tell me more about your social life in this neighbourhood? What do you like about it, and what would you like to change? What holds you back?

You said that when you immigrated to Canada, you were first scared about going outside. What did you mean by that?

[How did you adapt to the new country?]

You talked about “not having a simple life” in Cuba. How did you feel towards Canada before immigrating here?

[How do you feel about living in Canada now?]

You mentioned your diabetes and said it is a little bit more complicated for you. Could you tell me what you mean by “more complicated”? [Does it affect your activities? How?]

You mentioned the winter time being more difficult for you. Could you elaborate on that? [How does it affect your activities?]

You talked about the situation in your family “being complicated” in regard to driving you around. Could you tell me more about that? [What do you mean by “complicated”?]

You talked about wanting to improve your English, especially speaking. Did you ever have the feeling that you couldn't do something because of the language?

You mentioned that there are no volunteering opportunities in your neighbourhood and that you encountered other difficulties with volunteering. Could you elaborate more on it? [What personally would you like to gain from volunteering?] [What would volunteering mean to you?]. In your first interview, you mentioned some of the challenges you have had in trying to volunteer, like your grandchildren's school says they don't need help, and that you had looked online for opportunities. Could you tell me more about the challenges you have had in trying to volunteer?

Elena

General question about contributing

You said that it is important for an older person to be useful. Could you explain to me what “being useful” means to you? [Could you give me some examples? Could you tell me about a time when you did not feel useful?]

Questions about contributing to family

You mentioned that you are happy in Canada, because your family is happy here. Could you tell me more about how your happiness and their happiness are related? What do you mean by happy? [What exactly makes you and them happy?]

You said that when you came to Canada in the first years you stayed home with your younger grandchild. Could you tell me about how you spent your time together? [What activities did you do with him?]

You mentioned that you give your daughter and her husband a peaceful mind by helping out with the children. What exactly did you mean by that?

You mentioned you are preparing the dinner for the family. Are there other household tasks you do for the family?

In the first interview you said that you like to be “present” when the boys are home alone. Can you tell me more about that? [What exactly do you mean by “being present”? How do you think the situation at home would be if you weren’t present?]

You said you don’t like to bother the family and they don’t bother you. How do you think you would bother them?

How do you think they could bother you? Can you give me some examples?

You said you came to Canada because you thought your family could need your help. What did you mean by that? [Did it turn out the way you thought it would?]

You said that taking care of your grandchildren makes you feel like you’re doing the “correct thing”. [What do you mean by “correct thing”? What do you think would be wrong to do?]

You mentioned in the first interview that your family pays for everything for you and you have the need to “pay” them back in some way. Could you give me some examples of how you are trying to give back to your family?

You touched upon going to the movies with your family even if you’re not interested in the movie they want to see.

Could you tell me more about that? [Is it important to you to do things as a family? Can you tell me about a time when you wanted to do something else, or see something else, and told your family?]

Questions about contributing to friends/neighbourhood/community

What is it like living in your current neighbourhood? [Can you tell me about your neighbours?]

You mentioned in the first interview that you wanted to volunteer, but your daughter thought the best volunteering you could do was here at home. How important was it for you to volunteer outside of the home?

Why did you want to do as a type of volunteering? [What convinced you to change your mind about volunteering?]

You touched upon a story about a friend who came to Canada from Columbia and who you helped find an apartment. What does it mean to you to help your friends? [How do you help other friends?]

Questions about self-care/contributing to self

You mentioned you listen to the news from Columbia. Is this something that is important to you? [Why?]

You said that you exercise daily. Why is it important for you to keep up your daily exercises? [What would it mean to you to get “rusty”?]

You mentioned that your family helps you by giving you company and taking care of you. How does your family take care of you?

In your first interview you mentioned your aunt who is very old. You said that you are scared of living as long as she does. What would it be like for you to live too long? [What makes you not want to live that long?]

You mentioned that you are in peace right now. What gives you peace? [Why is it important to you to have peace?]

You talked about your father wanting to “do something good for the family” by traveling around. How was this time for you? [How do you feel about traveling now?]

You said you are not passionate about anything. Why would you say that about yourself? [How would you describe a passionate person?]

Questions about barriers to contributing

You mentioned that you don’t want to be a burden for anybody. What does this mean exactly? [How do you think you could be a burden? For who do you think you could be a burden?]

Questions about contributing/life changing over time

How did your life change from when you first arrived in Canada to now?

You told me that you lived together with your son for a while. Could you tell me more about this time? [What did you do during this time? How was it different to now?]

You mentioned that when your son moved away, you felt very lonely in Columbia. Could you tell me more about moving from your home in Columbia to your daughter’s home? [What was the change like?]

Diverse question

You said that older people complain too much and that is why you like to spend time with younger people. What do those people complain about?

You mentioned that you don’t know if you would be eligible to receive pension. Is there a reason why you never followed up on this? [Why wouldn’t you want to receive any pension?]

Gizella

General question about contributing

In the last interview you mentioned that you don't like to live off people. Could you tell me more about that? [Why wouldn't you want that? Are there certain people you wouldn't want to live off of, and others that it is OK for?]

Have you ever wished to be able to do other activities outside of the house (besides caregiving)?

If yes, which ones? [What do you think you would have gained from them?] If not, why not?

You mentioned that you were too 'lazy' to learn English, although it sounds like you have done very well to learn 3 languages. Could you tell me more about what being lazy means to you? [Are there times when you have felt you are being lazy? Or when other have thought you are being lazy?]

Questions about contributing to family

You mentioned that you are very grateful for your grandchildren and you love spending time with them. Could you tell me more about your relationship? [What do you usually do together?]

You mentioned in the first interview that you get along with your son-in-law and this is an unusual thing. Could you tell me more about that? [What do you think works well in your relationship?]

Questions about contributing to friends/neighbourhood/community

What is it like living in your current neighbourhood? [do you know any of your neighbours? Can you tell me about them?]

Questions about self-care/contributing to self

You said in the last interview that you regret not having learned English properly. What would your life be like now if you did know English?

Questions about barriers to contributing

You mentioned that you don't want your health to get worse and lay in bed all day. What does this mean exactly? [How do you think it would influence your loved ones' life?]

Questions about life in home country

You mentioned that you've already been retired before you came to Canada. How was the transition from work to retirement?

What did you do during the day when you were retired?

You said that you haven't been in Romania for almost four years. Is there something you miss about your life in Romania?

You mentioned in the last interview that you usually went back to Romania for 1-2 months. Could you please tell me what you did during this time?

In the last interview you said that it is more complicated now to take the plane. Could you explain me why it is complicated? [How did it change to before?]

Diverse question

You said that you spend a lot of time on Facebook and YouTube. What are you mainly using them for?

Oana

General question about contributing

In the last interview you said that the main motive for you to come to Canada was to not sit at home in Romania doing nothing. In your opinion, what does it mean to do nothing? [What does “doing something” mean?] Or how about: “Can you tell me about a time when you did nothing? What was that like for you?”

Questions about contributing to family

You mentioned that you came to Canada for the first time to take care of your grandson. What made you decide to stay with your daughter and her grandson for six months?

You used the word “normal” for explaining why you did all the things for your family. Everyone has a slightly different definition of what ‘normal’ is, so could you tell me more about what a “normal” grandmother is supposed to do in your opinion?

You mentioned your daughter wanted you to come to Canada. Why do you think she wanted that?

You mentioned that the children are older now, they can do things for themselves. Do you still spend time you’re your granddaughter? What do you do together? Is there anything you do for her now?

Questions about contributing to friends/neighbourhood/community

What is it like living in your current neighbourhood? [do you know any of your neighbours? Can you tell me about them?]

You mentioned your friends in Romania. Could you tell me more about your friends in Romania? [How do you spend time with them? What activities do you do together?]

Questions about self-care/contributing to self

You mentioned that you often times baked for your visitors. What did you enjoy about baking?

[Are there other activities that you enjoy doing over the day?]

In the last interview, we talked about your health condition. Are there activities that you cannot do anymore because of your health? [What does it mean to you not being able to do those tasks?]

Questions about barriers to contributing

You mentioned in the last interview that you don’t want to bother your daughter by asking her after she comes home from work to drive you somewhere. What makes you think it would bother her?

[How would you feel if she drove you?]

Questions about immigration

You said that you sensed a difference between the Romanian and Canadian way of living. Could you please elaborate on this more? [How is your Canadian life different from your Romanian life? How did immigrating to Canada change your life?]

You touched about your English skills in the last interview. How do you think your situation would be different in Canada if you were fluent in English? [Would there be activities which you would love to do then?]

When you went back to Romania, what activities did you do over the day? [Why did you go back to Romania? What did you enjoy about being in Romania?]

Diverse question

You told me that you worked in the health field. What did your job mean to you? [What did you (not) enjoy about your job?]

You mentioned that you haven't sold the apartment, yet, because you go back to Romania a lot of times. Why do you go back to Romania often?

Curriculum Vitae

SECTION I

Personal Information

NAME: Alexandra Schuster

SECTION II

Education, Degrees

2017 - 2019 M.A., Health and Rehabilitation Sciences
Western University

2014 - 2017 B.Sc., Social Sciences
Faculty of Management, Economics, and Social Sciences
University of Cologne/Universität zu Köln (Germany)

2016 Exchange Semester / Departement des Science Politiques, Université Paris
1 Panthéon-Sorbonne, Paris, France

ACADEMIC HONOURS AND AWARDS

2016 ERASMUS Scholarship
University of Cologne

SECTION III

Dissertation

THESES

Schuster, A. (2017). *Das Burnout-Syndrom bei Pflegekräften aus stationären Pflegeeinrichtungen*.
B.Sc. Thesis, University of Cologne, Köln, Germany.

SECTION IV

Conferences

May 2019 **Schuster, A., Hand, C., McGarth, C., & Kloseck, M.** (2019). *Examining Canadian Older Immigrants' Lives in their Communities and their Experiences with Contributing to Society*, Trent Aging Conference 2019

SECTION V

Academic Work Experience

RESEARCH EXPERIENCE

Research Assistant Position at Western University

Winter 2019 Faculty of Health & Rehabilitation Sciences

UNDERGRADUATE TEACHING EXPERIENCE

Teaching Assistant Position at Western University

Fall 2018	Health Sciences 1001a - Personal Determinants of Health
Winter 2018	Health Sciences 2711b – Health Issues in Aging

SECTION VI

Committees, Services, & Societies

SERVICE AT WESTERN UNIVERSITY

a) Western University

- Councillor of the Society of Graduate Students Council (October 2017 – October 2018)

SERVICE AT UNIVERSITY OF COLOGNE

a) Faculty of Management, Economics, and Social Sciences

- Active Member of the Student Association of the Faculty of Management, Economics, and Social Sciences (April 2014 – August 2017)
- Active Member of the Club for Scripts and Notes (April 2014 – August 2017)
- Mentor of the Mentor-Program for Freshmen Students (April 2014 – August 2017)

SOCIETY AT NORTHERN VIRGINIA COMMUNITY COLLEGE

a) Northern Virginia Community College

- Member Of the National Society of Collegiate Scholars (Since 2013)

SECTION VII

Related Work Experience

PROFESSIONAL DEVELOPMENT

January 2019	Teaching Assistant Training Program (TATP); 2,5-days seminar series for teaching assistants at the Western University
October 2017	Teaching in the Canadian Classroom; 20-hour seminar series for international graduate students at the Western University

WORK EXPERIENCE

June 2018 – Sept 2018	Intern at the <i>Schön Klinik Roseneck</i> , Prien am Chiemsee
2014 - 2017	Student Trainee at the Institute for Training and Development of the German Association of General Practitioners (<i>Institut für hausärztliche Fortbildungen e.V. im Deutschen Hausärzteverband</i>)