Survival stories: well-being of older widowed Greek migrants in rural South Australia

Georgia Panagiotopoulos1, Fran Baum1, Lareen Newman1, Ruth Walker2
1Southgate Institute for Health Society and Equity, Flinders University, 2SA Community Health Research Unit, Flinders University

Worldwide, widowhood affects many older adults and is associated with diminished mental health and well-being. Australia’s ageing population (individuals aged 65+) includes 55,000 first-generation Greek migrants who arrived mainly in the 1950s and 1960s, and who have aged ‘in place’ in a ‘foreign land’. This presentation drew on the presenter’s PhD research exploring the social dimensions of health and well-being in widowhood for older Greek widows and widowers in both urban and rural South Australia. Specifically, determinants including ethnicity, residential location, gender, socioeconomic status, employment and work conditions, and social support and exclusion were investigated to ascertain the ways in which they had shaped interviewee’s life histories and experiences of widowhood in older age.

The majority of widowhood studies have been conducted on white, Anglo samples, and mostly on women rather than men. Few studies have been conducted with Greek samples in Australia on any health-related topic, especially in rural areas. Thus, this project sought to fill a dearth in existing knowledge about the widowhood experiences of rural older Australians from a culturally and linguistically diverse background, and the implications of this knowledge for service delivery and policy. The rapidly ageing nature of this cohort rendered the research timely. Older Greek migrants are particularly likely to experience multiple disadvantages, especially in older age, and generally have lower service use compared to the mainstream Anglo-Australian population, coupled with limited English proficiency and often low proficiency in written Greek. Subsequently, individuals rely on family for support provision, with children acting as informal translators and navigators of the wider, English-speaking society. These factors have implications for well-being.

The study employed a qualitative methodology to capture the distinct and nuanced ‘voices’ of older Greek widows and widowers from rural areas in their native language, by a researcher who shared their cultural and linguistic background. A mutual understanding and consideration of relevant socio-historic, cultural and contextual information undoubtedly enabled a deeper understanding of the widowhood experience and well-being for this group. Specifically, in-depth interviews were used, and unravelled rich accounts of the lived experience of widowhood and factors relating to well-being, as presented by individuals who are routinely excluded from mainstream research due to linguistic difficulties and rural locale. Interviews were influenced by a life-course perspective allowing for the consideration of socio-historic and cultural context, whereby post-widowhood well-being is influenced by, or the ultimate product of, one’s prior life history. Interviews were also informed by a critical feminist approach emphasising the establishment of reciprocal and personal relations between researchers and interviewees. Throughout the project, the researcher was actively reflexive by considering the influence of her own personal history, ethnicity, social positionality and historical location on her thoughts and insights. Her ‘insider’ status enhanced the degree to which she understood interviewee’s symbolic meanings and realities. Interviews took place in participants’ homes, lasted around 1.5 hours, and were audio-recorded. All data were simultaneously translated and transcribed from Greek to English by the researcher.

Over 40 first generation male and female Greek migrants were interviewed, including 20 widows and widowers from Adelaide and the Riverland region to be inclusive of both urban and rural locales. Most individuals were aged in their late 70s and 80s. A snowball sampling technique was employed to recruit participants.

Findings focused on the following aspects of widowhood: participants’ perceptions of their health and well-being; the lived and cultural experience of widowhood in a rural area; gender differences in
bereavement/widowhood ‘roles’, and the impact of socioeconomic status and social support (including the importance of family) in daily life.

The importance of good as opposed to ill health was acknowledged by all. In general, health in older age was viewed in negative terms, with the ageing process typically associated with lessened capabilities and a barrier to working and being independent. ‘Stenohoria’, a Greek concept which does not possess an English equivalent, was central to all interviews, denoting feelings of worry, stress and anxiety. Interviewees stressed a lack of health services in the Riverland, with the vast majority relying on their children or others for transport and informal translating at appointments. Most interviewees alluded to feeling satisfied with their lives, though almost always with specific reference their children, reinforcing the importance of immediate family to their well-being in older age. It was clear that factors such as age and health intersected and resulted in differential experiences of widowhood.

All interviewees regardless of gender had worked rural jobs in the Riverland, typically on vineyards or citrus farms. Owning one’s own property was coupled with unique advantages (language, independence, flexibility) and disadvantages (income, manual labour). Difficult and repetitive work conditions over the years influenced current perceptions of health and well-being.

The vast majority of interviewees were of poor, rural and often large families in prior to migrating to Australia. Some indicated their situation had improved in Australia after many years of hard work, whilst others lamented that they remained subject to poverty in Australia. Most received the pension, which for some was enough to make ends meet, but for others was synonymous with a life of sacrifice and frugality. All interviewees owned their own homes.

Gender differences in daily life were most evident across the following domains: housework, cooking, home maintenance, gardening, finances, driving, and social and community involvement. Men outlined more difficulties pertaining to housework and cooking, whereas some women reported difficulties with respect to outdoor maintenance and gardening, finances and driving. Many felt that their houses had closed or shut off in widowhood. For men, this stemmed from the fact that their wives usually organised social contact or dinners, and the perceived acceptability of socialising post-widowhood, especially with other women. Social involvement post-widowhood appeared differentially restrained for women and men. Most interviewees concluded widowhood is ‘bad’ regardless of gender. Gender was a key social determinant affecting the experience of widowhood differentially for males and females, its influence perhaps enhanced among this particular cohort of Greeks, the vast majority of whom possess and retain the traditional gender norms and role expectations of the home country despite years of residence in Australia.

Interviewees discussed the benefits of living in a rural area, highlighting the notion of being outdoors, and having fresh air, peace and quiet, knowing others, and possessing flexible and independent working conditions. Conversely, negatives of rural life included possessing limited access to health and health care services, and being forced to travel to larger cities to access doctors, specialists, or medical treatments. Limited public transport in the area led to an increased reliance on children, relatives, friends or neighbours. Most respondents expressed the notion that attempts to learn English were hindered by the necessity of securing paid work, no or limited schooling options, and often no opportunities for interaction with English speakers.

Despite the negatives, many interviewees conveyed the notion they were coping, or at the very least, trying to cope with daily life. Faith was a theme central to remaining positive or surviving, with individuals often highlighting the importance of prayer, or outwardly attributing events to fate or God’s will. Gardening or busying oneself with housework were strategies employed to temporarily distract individuals from their lived reality. Many interviewees held the belief that keeping busy helped them pass the time or avoid negative thoughts.

Widowhood was viewed by interviewees as central to one’s life, affecting all other aspects. It was perceived as a difficult period, not only initially, but for the rest of the life-course (i.e. detrimental to
well-being regardless of years widowed). Not surprisingly, loneliness and the notion of feeling alone despite having family were repeatedly mentioned across individuals. Specific references were made to missing the company of one’s spouse. Profoundly, hopes for the future were almost non-existent, due to a combination of age and the widowhood experience. Important here is the notion that any remaining hopes were tied to that of their children. No interviewees in this sample had remarried. Remarriage was typically referred to as an inappropriate alternative to being alone, with most interviewees morally opposed to remarriage at all age groups, but particularly in older age.

Support and family were two themes which were closely intertwined. Support was given and received across different domains, for example, instrumental help such as housework, shopping, transport, translating, and cooking, and emotional support. Support was received from different providers, most notably children and immediate family, who were integral to the lives of all interviewees. Indeed, support from children was preferred and for most, wholly expected. However, degree of support expectations differed across individuals. For example, some suggested they would live either with or next door to their children in the future, who would look after them; others wished to maintain separate residences if possible. Responsibilities of children including caring for and showing an interest in their parents, calling and visiting, and providing instrumental assistance with shopping, doctors, transport and finances. The reciprocal nature of support was stressed—despite the researcher not directly enquiring about this—with most participants expressing the belief that Greek parents help and make sacrifices for their children, who in turn help their parents in old age. Familial closeness and the role of food and cooking was integral to daily life and social interaction. However, one major disadvantage was the fact families were often fragmented and geographically distant due to adult children and grandchildren moving to bigger cities for occupational or educational pursuits. This often led to the sense that they were more isolated compared to their city counterparts. God was also referred to as a great support by interviewees, providing strength and courage.

Data analysis in this PhD was informed by Bourdieu’s conceptions of capital, including social, cultural, and economic, which were used to explore factors shaping the widowhood experiences. At the most basic level, Bourdieu describes economic capital as socioeconomic or monetary wealth, cultural capital as reflecting one’s education, and social capital as the extent of one’s social ties and networks, support, and experiences of inclusion and exclusion. For this cohort of Greek migrants, economic capital was often limited upon arrival to Australia, though many worked exceedingly hard to better their situation over time. Similarly, cultural capital was often low, with limited educational attainment in Greece. Existing literature alludes to Greek migrants possessing much social capital, branding the family unit as close and cohesive. However, this may be an oversight of Greeks who reside in the country, as one or more of their children and grandchildren, or in some cases, all of their immediate family, have relocated to larger cities for educational or occupational pursuits. Consequently, many interviewees were not benefiting from the potential advantages of instrumental support provision from their immediate family. Similarly, interviewees often described a shrinking of social networks due to older age and death of loved ones. Although feelings of inclusion and exclusion to mainstream society differed across individuals, most interviewees in rural areas did not appear to have ties to mainstream Anglo groups or individuals, conceivably enhancing feelings of isolation or exclusion. In short, Bourdieu’s theories were useful in informing analysis, and were compatible with the study’s methodology and life-course perspective.

Clearly, a multitude of social determinants of health, like ethnicity and social connection impact the widowhood experience for older Greek migrants. Though the scope of this research is large, perhaps the key finding is that for both Greek men and women of this cohort, the widowhood experience is not something which may be easily forgotten. It is pervasive in all aspects of their lives. In addition, although there exist commonalities in widowhood across gender, the overall experience of widowhood differs in many respects for men and women.

Regarding policy and service provision, key concerns for those residing in the Riverland region included limited public transport, decreased access to health care and health-related services, low English
proficiency, isolation stemming from fragmented immediate families, social exclusion, and a lack of neighbours, especially for those living on larger, more isolated properties. Most interviewees were receiving assistance with housework, however infrequent and quality of these services varied.

Cultural background shapes the way individuals experience ageing and widowhood.

This study, at the most basic level, highlights the dire need to consult with, and listen to, the voices of older individuals from diverse cultural backgrounds in rural areas in a manner which is truly culturally and linguistically sensitive (i.e., in their native language), in order to determine what is important to them as older adults who are ‘ageing in a foreign land’. It is a travesty that their voices are so often discounted due to difficulties conducting, or expenses associated with, the development and execution of culturally diverse research. This study represents one small step in contributing to this neglected research area. Only by listening to their voices may we begin to understand their lived reality from their own subjective vantage points, and appreciate that experiences not only vary across cultural groups, but also within groups. Only then may we start to inform policy and service such population groups.