The Family in Question

Immigrant and Ethnic Minorities in Multicultural Europe

edited by
Ralph Grillo

Cover photo: © Meghann Ormond (Agacan Kebab House, Dundee, Scotland)

Cover design: Studio Jan de Boer BNO, Amsterdam
Layout: The DocWorkers, Almere

© Ralph Grillo / Amsterdam University Press, 2008

8 Who Cares? 'External', 'Internal' and 'Mediator' Debates about South Asian Elders' Needs

Kanwal Mand

Introduction

> People are living longer and that doesn't mean that if people are living longer they are happy and healthy, they are not. That's the main thing ... Care ... is it the family's responsibility, or the land, or should the country take responsibility? (An outreach worker for Ekta, a voluntary group, London, 19 March 2004)

> I don't think that the Asian community like us to be involved. They're very independent people and look after their own people. They usually have some family and feel reluctant to accept services from outside the family. (Social worker, quoted in Department of Health publication 1998: 31)

This chapter explores how 'external' debates, notably in the public sphere which, as Grillo *supra* notes, often reflect migrants' imagined cultural practices, interact with 'internal' debates that occur within migrant families. Several authors draw attention to the impact of external debates in the form of policies on South Asian families in Britain in the arena of care and service provision (Boneham 1989; Forbat 2004; Katbamna et al. 2004). South Asian families are often positioned in public discourses as 'looking after their own', and this, it is argued, contributes to the low take-up of services by Asian elders and the misrecognition of their actual care needs (Forbat 2004; Harper & Levin 2003). Such assumptions about families fail to recognise that they are undergoing change arising from a variety of factors related to the migration process and the development cycle of households (Mand 2004), and it is in these contexts that internal discussions and negotiations about who cares, and for whom, occur. Through a focus on the elderly, this chapter illustrates how external discourses in the form of policies construct South Asian families in a guise that marginalises the experiences of the elderly who may need care beyond the family. At the same time debates within families concerning who should care for the elderly are apparent and, more often than not, stress idealised situa-

tions based on gender models which denote specific family members to care for the elderly (Gardner 2002).

Alongside public discourses and internal debates within South Asian families there is a third voice, that of voluntary organisations, and this chapter will draw attention to the role of such organisations working in the 'community'. In particular this chapter explores the role played by the Ekta project, an assisted charity, which caters for the needs of elderly South Asian men and women and their carers in East London. Ekta stands for 'oneness', and members of the Ekta project are drawn from different South Asian groups.[1] Although such organisations play an important role in the welfare of elderly migrants and their carers, their significance for migrant families has been largely ignored. This chapter shows that such organisations go beyond providing practical support (Mand 2006), and that they mediate debates and discourses occurring in the public sphere and internally in migrant families.

While this chapter draws attention to three sets of voices – those within public discourse, notably in national policies, those among members of minority ethnic families, and those in Ekta – it is important to bear in mind that these are not homogenous. For example, family members can maintain different positions, which may vary according to generation and gender, and as we shall see public discourses can be contradictory (Forbat 2004). Furthermore, although an element of ethnic division exists, for example, between a 'white' public sphere and minority ethnic families, this is not always the case: staff working in the local authority, for instance, are drawn from minority groups. The ethnic makeup of Ekta does not necessarily correspond with a South Asian background, although the majority of staff and volunteers are of South Asian heritage. The position Ekta occupies also testifies to the complexity of differing agendas within these three sets of voices: Ekta acts on behalf of families and the public sphere while at the same time maintaining an agenda that is necessary for the organisation to be recognised by the local authority and funding bodies.

Changes in the Composition of South Asian Migrant Families

The 2001 census revealed an increase in the number of elderly British residents of South Asian origin in the UK (Burholt 2004). The growth in numbers of the elderly reflects a wider trend of an ageing population in Europe and has obvious ramifications for the provision of state welfare in countries like Britain. In this context, representations of South Asian families as self-sufficient units and culturally bound to look after their own, which figure in public debates, are undoubtedly

of concern, as they fail to account for the changes occurring within such families.

It is the first generation of South Asian migrants who arrived in Britain in response to labour shortages during the 1960s who make up the category, predominantly, of elderly Asians. However, a great deal of variety exists within and between South Asian families both in terms of age profile and composition of families. For example, 33 per cent of Pakistani families and 42 per cent of Bangladeshi families are likely to have four or more children (Beishon et al. 1998: 88). The composition of migrant families is also influenced by a variety of factors including their migration histories and the extent to which transnational links are maintained. These in turn are affected by policies regulating migration in different geographic places and in some cases older links between sending and receiving contexts such as those established under colonialism (Mand 2004). Furthermore, we cannot speak of the composition of South Asian families in any general sense as migrants' movements between and across places are intimately related to state policies. State policies such as immigration regulations and legislation have played a profound role in defining families and thus the entry and subsequent residence of migrants in the UK.

It is important to bear in mind that immigration policies target and affect entry and residence at a variety of levels. A key illustration of this process was the Primary Purpose Rule, installed during the 1980s by the Conservative Government, that challenged the legitimacy of arranged marriages and implied that male spouses or fiancés seeking to join partners were 'bogus' and simply attempting to gain entry into the UK. However, this particular rule came under attack from the European Court as it discriminated on 'the basis of sex ... [by] stricter immigration controls for men than for women' (Sachdeva 1993: 93, Menski 1999). Significantly for the elderly, entry into Britain is subject to demonstrating that there are no carers at the point of departure. Furthermore, immigration rules stipulate that entry into Britain to join families is feasible only if the potential entree can demonstrate that their stay would not entail recourse to public funds. The sponsorship forms that migrant families have to provide contain stipulations that there are sufficient material resources as well as accommodation. Gardner's work on Bangladeshi elders in London, and their carers who are often women, draws attention to immigration policies as re-inscribing gender roles and creating hierarchical relations between people and places. In doing so she argues that cultural norms about gender roles are 'exacerbated by the British state. Immigration procedures mean that women's entry into the UK is dependent upon whether they are wives or mothers' (Gardner 2000: 131). At the same time, there is an internally held ideal, within Bangladeshi families, that women are

carers and therefore being a carer is central to Bangladeshi women's self-perception of being good women (Gardner 2000: 130-131).

'They Look after Their Own' versus 'We Look after Our Own'

Research indicates that elderly ethnic minority migrants are less likely to use the social services on offer from the local council and other non-profit organisations 'because social work has operated in exclusionary ways ... [and] since South Asians families are expected to look after old-er persons themselves, they are unlikely to approach social services (Bowes & Dar 2000: 306). In her 1989 study of Sikh elders, Boneham points to several prevailing myths surrounding the experiences of being an elderly member of an ethnic minority living in Britain. For in-stance, she highlights the perception that all elderly South Asian mi-grants seek to return to their homelands. Whilst there existed a 'myth of return' (Anwar 1979), recent research on transnational ties has illu-strated that migrant families utilise a variety of ways of maintaining re-lations with their point of origin, which may or may not involve literal returns, and that this process engages family members differently not least due to gender and generational norms (Gardner 1995; Mand 2004).

Although the literature on change within South Asian families in Britain is growing, this has tended to focus on intergenerational nego-tiations in the context of marriages (Prinja 1999, Shaw 2000), while changes in family organisation arising from marital or geographic se-paration and/or divorce are rarely taken into account significantly in public discourses (Mand 2005). Hence, certain aspects of change be-come incorporated in the public discourse on South Asian families at the expense of others. For example, the myth relating to South Asian families as caring for their elders and less likely to require the services of the state in terms of care continues in spite of changes. However, there is a need for services and care homes for elderly Asians. In the London borough of Newham, and in other areas beyond London, state-sponsored residential care homes do exist that house within them spe-cific ethnically aligned units, for example the Green Gate residential home in East London has an Asian unit, where the elderly can reside on a permanent and/or on short-term basis. Short-term residence can be appropriate if an elder is in a 'crisis' and vulnerable or if family members have gone on holiday. Such residential homes are in addition to gender-specific assisted care homes in the area where women and men reside with a day warden in attendance. One home I studied housed twelve elderly women ranging in age from their mid-50s to 80s, and the longest period that one resident had been there was for

thirteen years. In some cases women, returned 'home' to their families for weekends while in others, no contact was maintained.

In the sub-continent too, Palriwala (1994) notes anxieties existing with regards to care for the elderly, notably in urban contexts and she draws attention to these being related to new economic and demographic pressures affecting families. In addition migration plays a key role for the experiences of the elderly who are left behind or who travel in order to be cared for by relatives living abroad (Mand 2004). Meanwhile, there are ideals and norms about becoming older in South Asia and these are often referred to elderly migrants in the UK. For example, elderly South Asian women are said to take on fewer domestic responsibilities in their old age, although my observations in the UK highlighted that being part of a migrant household meant that elderly women are active in the household, for example, caring for the grandchildren, doing housework and cooking. Nonetheless, the elderly can and often are constructed within families as a 'burden' or 'backward' with regards to the familial life and expectations in the UK. At the same time, immigration policies construct elderly migrants seeking to join family in the UK as simply needing care and hence a drain on the state's resources rather than as providers of care to British families.

As mentioned earlier, public discourses about migrant families are not homogenous, as was illustrated in two policy statements issued by the Department of Health in the late 1990s. The *National Strategy for Carers* (Department of Health 1999) attempted to provide an 'inclusive approach' whereby carers of and within families are also supported by statutory services. Forbat's analysis (2004) draws attention to a general underlying assumption in the policy 'that caring is a voluntary component of family life' and argues that it 'position[s] people from minoritized ethnic backgrounds, ... stereotypically ... to care out of culturally determined norms of family obligations' (Forbat 2004: 315). However, the ways in which policy positions minority families are not fixed; an earlier policy had expressly sought to question stereotypical understandings of ethnic minorities. *They Look After Their Own Don't They?* (Department of Health 1998: 3-5) drew attention to the 'significant disadvantage' experienced by ethnic minorities in spite of some good practice owing to the 'ethnocentric nature of service provision'. Particular issues are raised in this publication relating to staff assumptions of 'they look after their own', and the document is critical of staff for not taking into account the 'complex nature of care giving, gender and employment changes affecting the first and second generation families' (Department of Health 1998: 31). Some of the discussion on language further illuminates the ways in which public discourse is not in itself homogeneous. For example, the document highlights that staff may take 'shortcuts' by using relatives as interpreters, and this it found to

be unsatisfactory. Whereas one social worker is quoted as finding the use of relatives to be time saving since family members know the situation and they are known to the elderly person, another is quoted as finding the practice of using interpreters from the family a potential impediment (Department of Health 1998: 28-29).

Some writers have criticised assumptions such as 'they look after their own' as a form, albeit unconscious and unwitting, of 'cultural racism'. Cultural racism implies that ideas about cultural practices are essentialised and seen to be deterministic of behaviour. The recognition of cultural racism draws attention to the changing ways in which racism is expressed and experienced which has been to move away from a biological and physiological signifiers towards practices and values based on 'culture' (Forbat 2004; Song 2003). While the significance of race in understanding public discourse and debate for the experiences of minority ethnic elders remains pivotal (Bowes & Dar 2000), discourses about the family are often framed around essentialised ideas about the culture of a particular migrant group. However, Song (2003) shows that distinctions are made between migrant groups: for example, Asians may be represented along the lines of ethnicity, where the emphasis is on cultural practice, while other migrant groups (she gives the example of African Americans) may be represented along racial lines. Hence, looking at how public discourse frames South Asian families necessitates a comparison with other migrant groups present within the nation-state. For example, as Reynolds (2004) notes, Asians are constructed through such cultural practices as arranged marriages and multi-generational households, whilst Afro-Caribbeans tend to be associated with 'problems' of criminality and familial breakdown. Additionally, Reynolds has highlighted the way in which the Black (Afro-Caribbean) family in Britain is stereotyped as being female headed, despite there being variations within Caribbean cultures, and that this (mis)represents them as being against the norm of two-parent families (Reynolds 2002).

Meanwhile, a more general criticism of the British welfare policy of 'care in the community'[2] is that it fails to take into account the politics of community care and the allocation of resources within and between different community groups. Nonetheless, an underlying premise of the 1990 National Health Service and Community Care Act was a move away from institutional provision towards communal care, without accounting for the diversity of familial and communal relationships and how these link with norms and practices involving care and the ways in which these alter over the life course and over time (Horden & Smith 1998).

Despite the existence of public discourses and the shape these take in terms of policies that affect families, we cannot assume these dis-

courses set the agenda for the ways in which migrant families live their lives in Britain. For example, Baumann (1996) illustrates how, in a multi-ethnic suburb in West London (Southall), dominant discourses, notably those of the state, do indeed have a strong impact on 'demotic' (everyday) discourses present within migrant communities and voiced by individuals. At the same time, he shows that these dominant discourses are only partially incorporated by ethnic communities. Following Baumann, it is worth exploring how public discourses and internal debates construct the family and how these overlap, before moving on to the role of intermediary organisations like Ekta.

Who should care for the elderly, why, and how are common questions linking public discourses and debates within migrant families. From an external perspective 'caring for their own' relates to the perception of South Asians having a different morality from the 'Western' family in which the focus is less on the individual and more on the collectivity (see Ballard *supra*). The debates within families are similar to those occurring in the public sphere, in so far as they too are framed in cultural norms and traditions that are imagined or idealised. This is particularly the case with families of North Indian origin who traditionally stress obligations and reciprocity, though these vary according to a member's stage in life and gender. An idealised scenario is for elderly parents to be cared for by sons and their wives in the context of multi-generational households (Vatuk 1990). The absence of such care can result in 'shame' for the elderly family member and the wider kin group. However, it is worth noting that there are many elderly family members who are not cared for by their children and in many cases it is others or extended kin who take on this role. During fieldwork in Goa, I found that nuns in convents are looking after many elderly Catholic Goans whilst their children were working in Middle-Eastern countries or had settled in the West. Furthermore, it is important to stress gender in the context of care, whereby although ideals state that it is sons who care for their elderly parents, research indicates that in fact it is daughters who play a key role (Chen 2001). Significantly in the British context these ideals are being remembered and/or imagined by elders as most of them had migrated prior to their parents becoming elderly. At the same time a critical appraisal of the relationship between gender and the provision of care either on a voluntary basis or through more formal means is often marginal in both internal and public debates (see McKie et al. 2004).

Furthermore, with respect to the morality of care and its provision both internal debates and public discourses present an image of the family as a solid unit, unaffected by processes of social change. As such the family is simply seen as a site of support. Feminist scholars, however, have drawn attention to the family as being a site of support and

oppression and one that inherently makes demands on members on the basis of gender ideals and generational norms (Moore 1988; Palriwala 1994). This leads us to another similarity between external and internal debates. South Asian elders are constructed as being in need, and unable to engage with the modern lifestyles that characterise British society. The elderly are seen as the maintainers of tradition and as refusing to let go of 'homeland' practices, which in turn negates the active role that they play in maintaining families (Gardner 2002; Mand 2004).

Caring for Asian Elders and Their Carers: Ekta, a Community-Based Organisation

Formed in 1987, Ekta was initially established because of the 'unmet needs' of South Asian migrant families particularly the elderly and their carers. Previously, it was the Ethnic Minority Unit, made up of several organisations, which was responsible for the 'needs' of *all* migrants in the London borough of Newham. A survey, commissioned by the unit and entitled 'The unmet needs of ethnic elders'[3] established that there was a severe lack of services and that take-up of available services was noticeably low in the case of ethnic minorities. The survey into the 'unmet needs of ethnic elders' identified the needs of all ethnic minorities living in Newham regardless of race, religion, age and gender. The key conclusion, according to Ramesh Verma (the founder and current Chief Executive Officer of Ekta), who undertook the original survey, 'very clearly [stated] that they [ethnic minorities] needed services. The question was not that they did *not* need services but they needed them *badly*' (interview with Ramesh Verma, CEO Ekta, 22 June 2004).

This initial report drew attention to the general ways in which the needs of the ethnic minorities were being ignored. There were difficulties, as Verma explained, in providing a uniform service for all ethnic minorities regardless of gender, generation and culture. The perceived limitations in providing a general service resulted in Ekta forming a distinctive organisation and becoming an assisted charity concerned specifically with South Asian elders and their carers. Interviews and discussions with Verma about her original survey drew attention to specific issues that hindered South Asian elders taking up services on offer from local council welfare services. In the main these related to poor training in cultural awareness, including the assumption that South Asian families take care of their own, the lack of interpreters and/or staff who could speak to the elderly, and the vulnerability of elderly men and women to mental and financial abuse from within the

family. Research conducted in Canada on elder abuse similarly shows that migrant elders are less likely to point out that they are being neglected or abused owing to generational attitudes, particularly the notion that the family is an appropriate source for help and care, as well as the notion that the elderly drain resources from the country owing to their perceived 'neediness' (Harbison & Morrow 1998).

The move towards catering specifically for Asian elderly migrants and their carers is significant given the multicultural context within which families are located in London. It aligns the community group along a pan-ethnic basis denoting migrants from the sub-continent. The splintering of groups such as Ekta is significant owing to the ethnic diversity in this borough of London (Newham), where alongside South Asians there are sizeable Somali, Turkish and Afro-Caribbean populations and, more recently, a growing number of Eastern European migrants. At the same time, the establishment of Ekta along the lines of difference from other minority groups with specific cultural 'needs' reflects a broader tendency to celebrate diversity and illustrates the initiatives taken on at local and national levels in the bid to promote multiculturalism.

Tables 8.1, 8.2, and 8.3 give information regarding the ethnic and religious composition of the borough and indicate the place of birth of residents. It is worth remembering that the census data from 2001 do not capture the recent arrival of Eastern Europeans into the area.

Currently, Ekta is made up of approximately 30 volunteers and five paid staff including outreach workers. At the last count there were over a hundred elderly members registered with Ekta and these include elderly men and women drawn from different South Asian groups such as Pakistani and Bangladeshi Muslims, Gujaratis, Sikhs and Indian Christians. Despite a long waiting list of members, translatable as a need for the organisation, funds are in short supply, resulting in the loss of paid staff and the rejection of members. Funding is sought through various means including national and local government grants as well as individual initiatives. Ekta was shortlisted for a charity award in 2006 and it was stated by Ramesh Verma that 'service provision for Asian elders in Newham was not religiously and culturally appropriate

Table 8.1   *Ethnic identity (principal groups), Newham Borough, 2001 (%)*

White	39.4
Black African	13.1
Indian	12.1
Bangladeshi	8.8

Source: Census 2001, www.statistics.gov.uk/census2001/profiles/00BB-A.asp#ethnic (accessed March 2007)

Table 8.2 *Religious affiliation, Newham Borough, 2001 (%)*

Christian	46.8
Muslim	24.3
Hindu	6.9
Sikh	2.8
Buddhist	0.7
Jewish	0.2
Other	0.3
None/Not stated	18.0

Source: ibid.

Table 8.3 *Place of birth, Newham Borough, 2001 (%)*

UK	61.8
Other EU	2.6
Outside EU	35.6

Source: ibid.

[and therefore] nobody was making use of it', hence the need for the Ekta project. When shortlisted for an award, the CEO of Ekta is recorded as stating that the organisation is 'not about providing special services but providing equal services that people can use'.[4] Despite the CEO moving away from the notion of 'special services' for Asians, research by the council indicates that Ekta is an important source of support and information for South Asian minorities in the London borough. For example, a local council survey monitoring language use in the borough asked Punjabi-speaking respondents what sources of support they used. Eighty-one per cent cited voluntary organisations of which 56 per cent named Ekta (representing 46 per cent of the whole sample). When Punjabi speakers were asked where they would go for help, advice or support, 40 per cent said they would go specifically to the Ekta Project, or the Trinity Centre (which houses the Project), 22 per cent to other local service or community centres. A quarter (23 per cent) said they would ask their friends, family and neighbours. Two or three respondents each mentioned their doctor, the council offices or town hall, and the Citizen's Advice Bureau or similar centre.[5]

Alongside a befriending scheme for elderly migrants, Ekta organises weekly get-togethers, a swimming club, walking groups and artistic projects, for example, a play that raised awareness of breast cancer – in rehearsal during fieldwork following the success of an earlier endeavour when women performed a play representing their migration experience. During my period of fieldwork several activities were organised for the women, taking them outside the immediate vicinity. We

took a trip, very much like that represented in Gurinder Chadha's film *Bhaji on the Beach*, although this time it was Eastbourne and not Black-pool. One of the key reasons women sought to be part of Ekta was the isolation and loneliness that they experienced whether living alone or with their families. For women who live on their own, council support workers are central in ensuring that they are able to carry out domestic tasks such as cleaning and laundry. The warden and local council staff that come to the residence in order to perform domestic tasks care for those living in sheltered accommodation, and the local council provides a minibus for women to go shopping on a weekly basis. Shopping trips are also organised by Ekta although in the main Ekta provides its members with the facility to get together weekly, attend their swimming classes and other organised activities.

In addition to undertaking day trips with the elderly women, I attended a weekly women's group where the majority of women were Sikh or Gujarati, and on average aged around 60 years old, with one woman in her mid-80s. Several meetings took place on a weekly basis for men and women and members attended the one closest to their place of residence. A large majority of the women arrived at the community centre on the minibus arranged by Ekta and at all times were accompanied by volunteers who were Asian. The women's living arrangements differed; some lived on their own in council flats or sheltered accommodation, others with their husbands and in two cases with married sons and grandchildren. The borough has several residences specifically inhabited by Asian men and women, respectively, while there is one larger unit that houses both men and women in sheltered accommodation with varying degrees of 'independence'. This is not to say that these women maintained no links with family members, rather arrangements were often made involving sleep-overs with family members over weekends, during ritual occasions when more elaborate visiting occurred, and when women in the household travelled to the sub-continent to visit kin there. The perception that children are not there for the elderly, emotionally and/or physically, was repeated to me by many of the women. In some cases the women adopted a particular pragmatism, as they stressed the difficulties of living with children while for others living away from children had improved their social relationships. In rare cases, women were totally isolated from familial networks though this tended to be restricted to cases where there had been severe physical and mental abuse or abandonment.

Bridging the Internal and External Debates: The Role of Community Organisations

There is no doubt that the organisation of South Asian families is changing in the British context as it is in the sub-continent. Further-more, in the space of the community centre I encountered the need to look beyond the family for the support of South Asian elders (Mand 2006). In this sense Ekta as an organisation acts as a stand-in family. When I asked one elderly woman about her contribution of stories to the *yaada* (remembrances) project, involving members telling their stories about their migration from Punjab, she spoke of the need to collect stories as being of benefit to the elders stating: 'there is no one to hear our stories and its very important and very near to our heart. Children have no time to ... we try to revive them [oral narratives] in the form of drama, poetry, dance and plays'.

On the one hand the above quote illustrates changes in intergenera-tional relations as experienced by this elderly woman. On the other, as a result of changes, stories are told beyond the family, first to Ekta staff, but later they are retold in the form of public performances. The *yaada* project was turned into a play in partnership with local sixth form students (i.e. age sixteen plus) with the assistance of a playwright, and subsequently performed at the sixth form centre. Therefore the support that comes from Ekta fulfils the desire to be cared for in spite of the perceived unavailability of family members and offers an oppor-tunity for intergenerational contact. A focus on organisations like Ekta draws attention to a space wherein internal idealised perceptions are re-considered in the light of actual lived experiences for some elderly migrants, and through the performances are presented to a wider pub-lic sphere.

Other ways in which Ekta acts as a mediator includes providing infor-mation to the elderly about their pension rights, specific health issues like being aware of diabetes and the Asian diet, as well as housing mat-ters. Ekta arranges for experts in various fields to come and speak to the members at their meetings. The elderly pass on such information to their family members (if they live with them), although the main con-cern for Ekta is for the elders to know their rights and entitlements. For example, during the course of fieldwork a representative of the council came to talk to the elderly about their right to claim disability and/or pension benefits, especially if they were also widowed. Moreover, a key role is played by the organisation in educating other service providers involved in the care of elderly migrants. For example, the elder abuse awareness training organised by Ekta is attended by members of the so-cial services and by staff from care homes as well as health workers. Ek-ta's role is prominent, given the recognition of migrant's needs being

'unmet' and the lack of recognition in debates in the public sphere concerning changes taking place within South Asian families, notably in areas like elderly abuse. To this end, campaigns were launched by the organisation to draw attention to abuse occurring within families and the necessity for those external care providers to look beyond the stereotypes. Financial abuse is one of the key issues that Ekta sought to tackle, and volunteers and staff are trained to be vigilant.

> If you know that somebody is getting £180 a week [through benefits and pension] but yet the person's coat is falling apart and she has no money in her pocket and can't pay for her tea, then you wonder why.

The exposure of elder abuse occurring within South Asian families is resisted from within the Asian community. As the trainer explained, there is hesitancy in acknowledging the occurrence of elder abuse. She recounted some of the reactions on her training in elder abuse awareness from 'the community'.

> Our own Asian people [who] said 'don't say that because white people will think' ... And I said that is what I am trying to say! ... [they said] 'It looks *besharam* (shameless) that you are telling us that it happens, this happens in the Asian community and there are white people listening there'.

A tension exists between the representation of an ideal South Asian family that cares for one another, coming from the wider community, and the sensitive issue of abuse within families raised by Ekta. Interestingly the exposure of issues such as abuse in families is perceived as a betrayal, the public sphere associated with 'white people listening'.

Additionally, Ekta seeks to represent elderly members drawn from the different Asian groups in a culturally sensitive manner, given that the original survey undertaken by Verma indicated a lack of cultural awareness regarding 'values' held within the Asian community, for example, the idea of *sharam* (shame), which may result in an elder not speaking about their negative familial experiences given the ideal and status associated with becoming elderly and being cared for by family members. At the same time, Ekta wishes to move away from stereotypes that are held within the Asian communities, for example, daughters-in-law who are often expected to be carers and the elderly person in need (i.e. mother-in-law) as being pitted against one another. This was illustrated to me in the following quote from the founder, speaking first in the voice of an observer and then in the role of an elderly abused women.

These ladies ... they think maybe it's their fault and maybe I didn't bring up my son ... I have done something wrong in my past life and, after I die, they are going to take this money away anyway ...

Switching now to speak about the types of intervention, she commented:

[We] visit the family first because we work with carers as well [we ask the carer] ... we know how stressful it is and will you tell us what is the problem ... looking after your mother-in-law or father-in-law? Tell us and we can support you ... so we start working [with the carer/ family] taking mother-in-law to the centre to a centre for two hours a week or so she [carer] gets a break.

Organisations such as Ekta provide invaluable aid to elderly men and women and yet at the same time operate according to an ethos that seeks to challenge cultural essentialism from the top down as well as at the grass roots level. They can be interpreted as holding an intermediate position, whereby they are involved in a form of translation between one voice (the public) and the internal voice (of migrant families). This position is, however, a difficult one to straddle as they seek to promote the well-being of the elderly and their carers while at the same time being vigilant, despite opposition from the community at large, of the abuse that can and does occur within South Asian families. At the same time, Ekta recognises the onus placed on women in caring for family members while also having resources to deal with the pressures that are associated with caring and inter-family dynamics that come from the organisation's staff make-up.

In the context of changing familial organisation, there have emerged new ways of relating, notably through the utilisation of support networks beyond the family. This in turn means that groups like Ekta become important actors in the lives of migrant families, hitherto ignored in the accounts of migrant familial life. Nonetheless, Ekta as an organisation holds a complex position as it maintains a secular ethos owing to the diversity of its member's religious identities. Although all major religious festivals are celebrated within the different groups at the level of dance and food, clear limits are placed. The celebration of religious occasions is divorced from any sermons or specific religious practices. The religious aspects are split off from the festivities, and sometimes these are collapsed together. For example, during *diwali*, the festival of lights, the weekly group members (women) danced the *giddha* (Punjabi folk dance) and *dandiya* (Gujarati folk dance), but although *diwali* is celebrated by both Punjabi and Hindus the women were not allowed to

recount devotional tales or songs. Women objected to the distinction between religion and events like *Eid* (Muslim) or *Baskahi* (Sikh). In fact, when elderly Ekta members raised specific political and/or religious issues or practices within the groups they were severely reprimanded by volunteers and outreach workers. The reasoning behind such secularism is to ensure harmonious gatherings. As one outreach worker explained:

> We don't bring the religious bit you know? But that's where all the problems starts ... 'My religion is better than yours' or 'This is what happened'. It is bound to cause problems. So no religion and the same thing with politics. We don't want to know what has happened in Pakistan or in India or Sri Lanka ... No, keep it out! So I tell my members that look, our women can't read and write anyway which is good in one way but men, yeah, they do and they used to bring newspapers in their back pocket and say 'Oh Pakistan this has happened and India has done this and this'. So about ten years ago we said 'No!' 'I don't want to see any paper here. You have six and a half days so read as many papers as you want'.

Ekta as an organisation needs also to be located in the context of British debates about multiculturalism and difference. Organisations like Ekta mediate between the external and the internal. Although members of Ekta hold different religious and regional identities, as an organisation there are certain ideological ways of operating and aims that underlie Ekta's approach. By maintaining a position of being secular and multicultural, wherein cultural diversity is celebrated at a particular level (without the religious aspects), Ekta is different from other religious community groups. Besides a commitment to being secular, Ekta is also committed to denouncing the negative as well as the positive aspects of South Asian families, and at this level speaks out against the wider community. Hence, conflicts arise because of the political and social messages that the organisation seeks to establish and its views on the social injustices experienced by migrants on the basis of gender and generation. Whilst we can interpret Ekta as taking on the caring practices ideally performed by family members there are nonetheless boundaries that the organisation sets. For example in insisting that religion and politics be kept outside the meetings, Ekta promotes a view of multiculturalism (akin to that of the State) wherein more palatable differences (such as festivals) are promoted whilst others (notably religious) are curtailed.

Conclusion

The strategies and practices that South Asian families incorporate with regard to care for the elderly are influenced by a variety of factors including the household's stage in the development cycle, the migration process, transnational networks and so on, and these are further informed by voices in the public sphere and internally within families. There is some degree of overlap between public and internal voices linked to particular moral and/or ideological positions. It is interesting to note that neither internal nor external discourses are homogeneous, rather, they can and often do contradict each other, as is revealed when looking at the 1999 and 1998 Department of Health initiatives. The growing number of elderly migrants in the UK coupled with the lack of appropriate services and the low take-up of those that exist by migrants is clearly of concern to service providers and community organisations. This chapter has raised a third voice, that of a community-based organisation, Ekta, which can be seen to mediate between the two perspectives and plays an essential role in ensuring the well-being of the elderly and their carers whilst also educating other service providers. The chapter has drawn attention to the significance of such a perspective, which hitherto remains marginal in the account of migrant families.

Yet the role that Ekta plays is shifting and contextual, depending on audience. For example in relation to wider service providers, Ekta acts as an educator of Asian practices and speaks on behalf of the elders. At the same time the context of these elderly women's lives presents a very different picture to the stereotypical depiction of South Asian families as being self-sufficient units. In the absence of familial support Ekta acts like a family member, one that has time to listen and undertake the process of developing understanding between family members. Nonetheless, Ekta can and does speak against the community and in some cases its members. Furthermore, Ekta maintains its own ideological position; it seeks to represent all Asian cultures and refutes any specific religious affiliation. This differs from members' own wishes but affords organisations like Ekta a legitimacy because they are not are religiously aligned. In this sense, Ekta adopts the State's discourse on multiculturalism, by accepting and celebrating difference and diversity in certain spheres whilst religious differences are minimised through a secular stance.

Acknowledgements

Notes

1   See www.multikulti.org.uk/agencies/bengali/london/17586; accessed December 2007.
2   The National Health Service and Community Care Act (1990) sought to enable aging people or those affected by disability to live independently within the community and be cared for by the community.
3   An 'in-house' report was produced in the late 1980s following this survey undertaken by Ramesh Verma (the founder of Ekta).
4   www.charityawards.co.uk/previous/2001/winners/research; accessed August 2006.
5   www.languageshop.org.uk/language%20summaries/Punjabi%20Summary.htm; accessed December 2007.

References

Anwar, M. (1979), *The Myth of Return: Pakistanis in Britain*. London: Heinemann Educational.
Baumann, G. (1996), *Contested Cultures: Discourses of Identity in Multi-Ethnic London*. Cambridge: Cambridge University Press.
Beishon, S., T. Modood & S. Virdee (1998), *Ethnic Minority Families*. London: Policy Studies Institute.
Boneham, M.A. (1989), 'Ageing and Ethnicity in Britain: The Case Study of Elderly Sikh Women in a Midlands Town', *New Community* 15 (3): 447-459.
Bowes, A.M & N.S. Dar (2000), 'Researching Social Care for Minority Ethnic Older People: Implications of some Scottish Research', *British Journal of Social Work* 30: 305-321.
Burholt, V. (2004), 'Transnationalism, Economic Transfers and Families' Ties: Intercontinental Contacts of Older Gujaratis, Punjabis and Sylhetis in Birmingham with Families Abroad, *Ethnic and Racial Studies* 27 (5): 800-829.
Chen, M.A. (2001), *Perpetual Mourning. Widowhood in Rural India*. New Delhi: Oxford University Press.
Department of Health (1998), *'They look after their own don't they?' Inspections of Community Care Services for Black and Ethnic Minority Older People*. www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsInspectionReports/PublicationsInspectionReportsArticle/fs/en?CONTENT_ID=4008284&chk=X6h3hC; accessed February 2007.
Department of Health (1999), *Caring about Carers: A National Strategy for Carers*. www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsPolicyAndGuidance/PublicationsPolicyAndGuidanceArticle/fs/en?CONTENT_ID=4006522&chk=yySBZ/1999; accessed February 2007.

Forbat, L. (2004), 'The Care and Abuse of Minoritized Groups: The Role of Statutory Services', *Critical Policy* 24 (3): 312-331.

Gardner, K. (1995), *Global migrants, Local Lives: Travel and Transformation in Rural Bangladesh*. Oxford: Clarendon Press.

Gardner, K. (2002), *Age, Narrative, Migration. The Life Course and Life Histories of Bengali Elders in London*. Oxford: Berg.

Harper, S & S. Levin (2003), *Changing Families as Societies Age: Care, independence and ethnicity*. Working Paper Number WP503. Oxford. Oxford Institute of Aging.

Harbison, J & M. Morrow (1998), 'Re-examining the Social Construction of "Elder Abuse and Neglect": A Canadian Perspective', *Ageing and Society* 18: 691-711.

Horden, P & R.M. Smith (1998), *The Locus of Care: Families, Communities and the Provision of Welfare since Antiquity*. London: Routledge.

Katbamna, S, W. Ahmed, B.A. Bhakta, R. Barker & G. Parker (2004), 'Do They Look after their Own? Informal Support for South Asian Carers', *Health and Social Care in the Community* 12 (5): 398-406.

McKie, L, S. Bowlby & S. Gregory (2004), 'Starting Well: Gender, Care and Health in the Family Context', *Sociology* 38 (3): 593-612.

Mand, K. (2004), *Gendered Places, Transnational Lives: Sikh Women in Tanzania, Britain and Indian Punjab*. University of Sussex: Unpublished DPhil Thesis.

Mand, K. (2005), 'Marriage and Migration at the End Stages', *Indian Journal of Gender Studies. Special issue: Marriage and Migration in Asia* 12 (2 &3): 407-425.

Mand, K. (2006), 'Friendship and Elderly South Asian Women', in *Community, Work and Family. Special Issue: Families, Minority Ethnic Communities and Social Capital* 9 (3): 309-323.

Menski, W. (1999), 'South Asian Women in Britain: Family Integrity and the Primary Purpose Rule', in R. Barot, H. Bradley & S. Fenton (eds.), *Ethnicity, Gender and Social Change*, 81-98. London: Macmillan Press.

Moore, H. (1988), *Feminism and Anthropology*. London: Routledge.

Palriwala, R. (1994), *Changing Kinship, Family, and Gender Relations in South Asia. Processes, Trends, Issues*. Leiden: Women and Autonomy Centre (VENA).

Prinja, S. (1999), *With a View to Marriage: Hindu Gujaratis in London*. London School of Economics: Unpublished DPhil Thesis.

Reynolds, T (2002), 'Analyzing the Black Family', in A. Carling, S. Duncan & R. Edwards (eds.), *Analyzing Families*, 69-76. London: Routledge.

Reynolds, T. (2004), *Caribbean Families, Social Capital and Young People's Diasporic Identities*. Families and Social Capital ESRC Research Group Working Paper Series, Number 12. London: South Bank University.

Sachdeva, Sanjiv (1993). *The Primary Purpose Rule in British Immigration Law*. Stoke-on-Trent: Trentham Books and School of Oriental & African Studies.

Shaw, A. (2000), *Kinship and Continuity: Pakistani Families in Britain*. London: Routledge.

Song, M. (2003), *Choosing Ethnic Identity*. London: Polity Press.

Vatuk, S. (1990). 'To be a Burden on Others: Dependency Anxiety amongst the Elderly in India', in O. Lynch (ed.), *Divine Passions: The Social Construction of Emotion in India*, 64-88. Berkley: University of California Press.