A QUALITATIVE STUDY OF THE PROCESS OF ACCULTURATION AND COPING FOR SOUTH ASIAN MUSLIM IMMIGRANTS LIVING IN THE GREATER TORONTO AREA (GTA)

by

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A thesis submitted in conformity with the requirements For the degree of Doctor of Education Department of Adult Education and Counselling Psychology Ontario Institute for Studies in Education of the University of Toronto

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Abstract

The present study explores the nature of coping mechanisms among South Asian Muslim immigrants living in the Greater Toronto Area (GTA) who have been living in Canada between three to five years and experienced acculturation challenges and depression. Thirteen immigrants (seven females and six males) were interviewed to share their stories of personal experiences of settlement and acculturation in Canada. These interviews were analyzed using the grounded theory approach to develop themes and sub-themes to understand and interpret the data. The findings reveal that the research participants experienced a number of acculturation challenges (feeling different, feeling excluded, disruption in the family and material differences) which led to depression. During the course of their depression participants experienced certain events which became turning points in their lives, subsequently motivating them to change the way in which they live. They sought out particular kinds of support and coping mechanisms which helped them to settle, integrate and belong to the Canadian culture. The midlevel grounded theory that has emerged from participants’ responses is discussed. Recommendations are made to inform mental health professionals to incorporate these coping mechanisms in delivering culturally sensitive services to the target population. Study implications for theory, psychotherapy, counselling and other mental health practices and future research in the area of settlement and adaption of newcomers in Canada are discussed.
I want to thank all of those individuals who played a significant role in conducting the study. Without their support and contribution, this research would have not been possible. I like to thank everyone from my family who supported me directly or indirectly to concentrate on my work. My husband and children made many sacrifices to let me fulfill my dreams and to pursue my goals. Thank you very much for their co-operation because without their help, I would not have been able to accomplish my work. Being an immigrant in this country, I always wanted to study hardships of immigrants, their mental health issues and coping strategies, which encourage them to settle and adapt in a new land. Through this research, I have tried to unfold some of these layers to understand implications of acculturation, settlement and adaptation. Thanks to all of those immigrants who trusted me and voluntarily participated in this study to share the wealth of their settlement experiences.

Thanks to Dr. Roy Moodley, my thesis supervisor, who helped me to sharpen my understanding, knowledge and research skills in the area of immigration, settlement and adaptation and critical multicultural counselling. He always encouraged me to stay persistent and focused and showed me a ‘light at the end of the tunnel’ when I was feeling exhausted during the undertaking of this research work. His mentoring and positive reinforcement helped me to complete this thesis. Many thanks to my committee members, Dr. Mary Alice Guttman and Dr. Jeanne Watson, for their input into the dissertation and suggestions to refine my work.
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DEDICATION

To immigrants who enrich a new land with their knowledge, skills and cultural traditions.
CHAPTER 1

Introduction

1.1 Background

Canada is a multicultural country and its population comprises a combination of diverse cultures that can be described as a multicultural mosaic (Bowman, 2000). Each year thousands of immigrants come to Canada and make it their new homeland. Between the years of 1996 and 2001 Canada’s population increased by 4 per cent (Statistics Canada, 2002a) and between 2001 and 2006 it increased by 5.4 per cent (Statistics Canada, 2006), in both cases due primarily to immigration. In Ontario, Canada’s most populated province, 28.3 per cent of the total population is born outside of Canada (Statistics Canada, 2006). According to the 2006 census conducted by Statistics Canada 22.8 per cent of the population of Ontario can be considered to belong to a visible minority group. Furthermore, visible minorities have surpassed the five million mark for the first time in Canada’s history of which the South Asian community makes up the largest community in Canada (Statistics Canada, 2006).

Despite the increasing numbers of visible minority immigrants, they are still not well-represented among the leadership in the country. For example, of the 103 seats in the Ontario legislature, only 8 are occupied by ethnic minorities (Lagerquist, 2007). Similarly the low representation of ethnic minorities in the Ontario legislature, ethnic minorities are underrepresented in government and public institutions in the Greater Toronto Area (GTA) (Siemiatycki & Saloojee, 2002). Canadian media and several community groups are lobbying for the inclusion of diverse populations in various government and public institutions but until they are successful, visible minority immigrant populations will continue to face draconian
acculturation challenges. Even though the Canadian Multiculturalism Act, 1988 (Multicultural Canada, 2010) and the Canadian Charter of Rights and Freedoms support equal access to services regardless of cultural or ethnic background, ethnic minority populations still struggle to make themselves visible in various levels of government and public institutions (Black, 2006; Institute on Governance, 2000).

In addition to representation in various government and public institutions, immigrants experience many acculturation challenges and hardships during their settlement process (Berry, 2001; Kalek, Mak & Khawaja, 2010; Osmun & Allen, 2001; Sandhu, 1997; Yeh, Kim, Pituc, & Atkins, 2008). These acculturation difficulties in turn, generate a number of mental health issues for new immigrants (Lee, 2007; Ying & Han, 2007). Despite all of these hardships and mental health challenges, some immigrants are more resilient than others and they cope with these challenges better than others (Berry, 1997; Potochnick & Perreira, 2010; Reivich & Shatté, 2002). The ones who are not able to cope with them are more likely to fall into long term mental health difficulties and find no way to come out of them (Ghuman, 1998; Lee & Chen, 2000).

For South Asian immigrants, the general settlement challenges related to financial issues and lack of social support are compounded with acculturation shifts related to the difference in linguistic, ethnic, familial and religious norms between themselves and other Canadians (Khan & Watson, 2005; Sandhu, 1997). These acculturation challenges can increase immigrants’ chances of developing mental health issues (Das & Kemp, 1997). However, there appears to be a huge gap and paucity of information in literature in regards to what helps South Asian immigrants settle in a new country (Kaul, 2001; Sheth, 1995). Thus, there is a strong need to explore the mechanisms South Asian immigrants use to cope with acculturation adversities and consequent mental health issues following their arrival to Canada (Jibeeen & Khalid, 2010). This study
thoroughly investigates coping strategies in the target population in the context of acculturation and depression (Appendix A) and focuses only on those immigrants who have demonstrated an ability to cope with their acculturation hardships and depression in the three to five years period following immigration. This information is useful to increase mental health professionals’ awareness about and understanding of the coping capabilities of the target population so that they can include this information in planning and delivering culturally sensitive counselling services to them.
CHAPTER 2

Review of Literature

This study explores coping with depression in the phase of acculturation in South Asian Muslim immigrants living in the GTA. The following literature review expounds on the key concepts of the study including acculturation, depression, and coping.

2.1 **Acculturation: Introduction and General Research**

Acculturation is a process of adaptation to another culture that involves learning, development and competence in adjusting to the new culture and facing new challenges (Berry, 2006; Furnham, 1997; Tadmor, Tetlock, & Peng, 2009). In other words, it is a modification of a culture as a result of contact with other cultures (Berry, 1994; Gibson, 2001; Sandhu, Portes & McPhee, 1996; Schwartz, Unger, Zamboanga & Szapocnik, 2010). During this process, cultural features are exchanged, and the original cultural patterns of either or both groups may be altered; however, the groups remain distinct (Kottak, 2004). According to Said (2004), “the world does have a real interdependence of parts that leaves no genuine opportunities for isolation” (p. 878). Many studies conducted on the topic of ‘acculturation’ support that acculturation can be a very complex and challenging process that may produce ‘acculturation stress’ (Appendix A) (Berry, 2001; Potochnick & Perrerira, 2010; Rudmin, 2009) where an immigrant has to face numerous challenges to adapt to the host culture. There are a number of factors that determine the level of acculturation stress; however, some experience it as more stressful than others due to a number of factors such as lower sense of coherence, low perceived social support and demographic variables (Berry, 1997; Jibeen & Khalid, 2010).

Many studies support the idea that people migrate from one part of the world to another with high hopes of bright future, but due to number of migration and settlement challenges they
struggle with acculturation difficulties such as low social status (Yeh, et al., 2008; Williams & Berry, 1991), language difficulties (Caetano, Ramisetty-Mikler, Wallisch, McGrath, & Spence, 2008; Khan & Watson, 2005; Osmun & Allen, 2001; Sandhu, 1997), employment difficulties (Bratter & Eschbach, 2005; Khan & Watson, 2005), racism and invisibility (Cornelius, 2002; Fozdar & Torezani, 2008), and loss of social support networks (Jibeen & Khalid, 2010; Schwartz et al., 2010). Furthermore, some other factors such as disparity between the host culture and original culture, difficulties with immigration status and lack of social support (Liebkind, 1996; Schwartz et al., 2010; Uba, 1994) multiply these hardships.

The literature shows that ethnic identity plays a significant role in forming strong cultural ties and developing a sense of identification in a dominant culture (Berry, 2001; Costigan, Koryzma, Hua, & Chance, 2010; Rumbaut, 2008; Schwartz, Pantin, Sullivan, Prado, & Szapocznik, 2006). However, if ethnic identity is extremely strong, then the dominant culture may perceive it as a threat (i.e., especially when there are differences in host and immigrant culture), and the immigrants may face acculturation difficulties with the dominant culture (Nesdale, Rooney & Smith, 1997). These acculturation difficulties can be exacerbated by hate and discrimination against a particular ethnic community (Berry, 1980; Chao, 1997). For example, the increased levels of hate and discrimination implicit in reports against the South Asian community since September 11, 2001 have done little to ease South Asian migrants’ acculturation into Canadian culture (Critelli, 2008; Soharwardy, 2002; Steyn, 2006). Phinney (1996) noted that ethnic identity is an important factor in a social environment where there is more than one ethnic group. If immigrants have a strong ethnic identity, then their self-esteem will be high. Also, they can enjoy a sense of pride by belonging to a particular group. Otherwise, with low ethnic identity, they may suffer with mental health issues (Dhillon & Ubhi, 2003;
Phinney et al., 1992; Uba, 1994). However, some studies identified strong relationship with the dominant culture can lead to high acculturation level in immigrants. For example, Mehta (1998) conducted a study on the South Asians and explained that if the South Asians hold strong relations with the dominant group, then they feel well integrated and suffer from less stress.

Acculturation is a continuous process, but when people from diverse cultures interact, cultural changes will occur (Arnett, 2002). If there is a clash of values or difference in cultural norms between immigrant and host culture, then more acculturation stress is experienced (Gil, Vega & Dimas, 1994; Rudmin, 2003). Researchers have discussed the acculturation process according to the kind of interaction between the original and the host culture such as unidimensional\(^1\) (Gordon, 1964; Schildkraut, 2007), bidimensional\(^2\) (Benet-Martínez & Haritatos, 2005; David, Okazaki, & Saw, 2009) and tridirectional model (Flannery, Reise & Yu, 2001). The unidimensional perspective emphasises that the connection to the original and host cultures cannot exist simultaneously and negatively correlates with each other. According to this perspective, the acculturation process is unidirectional and starts from one continuum of total attachment with the original culture to total attachment with the host culture (Ryder, Alden & Paulhus, 2000; Phinney, 1996). According to this linear continuum, an individual starts from total attachment with the original culture and moves towards total attachment to the host culture. This linear continuum represents an ‘assimilation’ strategy to acculturation (Flannery et al., 2001). As a result of assimilation immigrants are expected to adopt the values, traditions, practices and beliefs of the host culture and to leave their original culture (Schildkraut, 2007).

The bidimensional perspective (also called biculturation) describes the co-existence of the original and host cultures, and this relationship is considered to be the most adaptive strategy for

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\(^1\) The other terms used for unidimensional approach are unidirectional and linear

\(^2\) The other terms used for bidimensional approach are bidirectional and orthogonal
the non-dominant group by some scholars (Berry 1997; LaFromboise, Coleman & Gerton, 1993). The bicultural strategy is a commonly used strategy which explains diversity in terms of levels and experiences of acculturation and multicultural approach towards accepting immigrants by the host culture (Berry, 2001). For example, Kosmitzi (1996) conducted a study to compare monocultural and bicultural acculturation strategies. She included German and U.S. nationals living in their own countries as monocultural and Germans living in U.S. and U.S. nationals living in Germany as bicultural. She found that bicultural immigrants perceived their culture superior and less similar to the host culture. A number of studies show that this kind of acculturation strategy could lead to better psychosocial adjustment in immigrants (Benet-Martínez & Haritatos, 2005; Schwartz, Zamboaga, & Jarvis, 2007); however, researchers have been calling for more extensive research in this area (Berry, 2001; Mehta, 1998, Suinn, Ahuna & Khoo, 1992).

Lastly, the tridirectional perspective, considers an occurrence of a third culture as the result of combining the original and host culture, and this is called ethnogenesis (emergence of new ethnicity). This perspective is a further extension of the bidimensional model which focuses on the emergence of a third culture (Flannery et al., 2001) and often this third culture is not owned by either culture (i.e., original and host in terms of set of values, attitudes and characteristics). Flannery et al. (2001) give an example of ‘Chicano/a’ that is the product of Mexican and American cultures, but they do not consider themselves affiliated with any of these cultures. With regards to tridirectional perspective, third-culture kids (TCK) is another example of creation of a third culture who do not identify with their parents’ culture. These TCKs experience “out of placeness” and loss of belonging with their parents’ culture (Gaw, 2007). In addition to unidimensional, bidimensional and tridimensional acculturation practices, Schwartz et al. (2010)
discuss multidirectional perceptive of acculturation. They state that “Acculturation is multidimensional not only in terms of the independence of heritage-culture and receiving-culture orientations but also with respect to the components are assumed to change” (p. 244). They support that what we study as ‘acculturation’ is a part of the whole and it should be categorized properly such as “behavioural acculturation,” “value acculturation,” or “identity based acculturation.”

2.1.1 Acculturation Process

Immigrants’ acculturation process involves change as the result of interaction between the original cultures and the host cultures (Berry, Phinney, Sam, & Vedder, 2006; Sam & Berry, 2006). Costa (2008) defines the acculturation process as “the change process that takes place when groups or individuals from different socio-historical contexts come into continuous contact affecting the original culture patterns and creating new power dynamics for all and between groups and individuals involved” (p.12). In the present study, I explore the process of acculturation and coping for South Asian Muslim Immigrants living in the GTA.

Throughout the acculturation process, immigrants are not passive receivers of the host culture, but rather they are active agents of their own acculturation process. The attitudes and behaviours that immigrants adopt determine the acculturation strategy (Berry, 2001). According to Berry’s model of acculturation, the active engagement of immigrants is possible through a bidimensional model in which both the individual and group level variables contribute to the process of acculturation. Berry (1980) highlights a comprehensive list of individual and group level variables that play a vital role in a bidimensional model. The individual level variables include features: individual’s motives of immigration, personality characteristics, demographics, length of stay in the host country, social support and negative experiences. The group level
variables include features of the original culture, host culture and overall acculturation style of that group. These individual and group level variables facilitate the process of acculturation within a bidimensional model.

During the acculturation process, immigrants go through a number of changes that can be grouped into five categories: physical, biological, cultural, social and emotional (Kim & Berry, 1986). While discussing acculturation process, Berry explains four acculturation strategies and several independent acculturation dimensions which play an important role in immigrations’ acculturation process in the host culture. These four acculturation strategies are: integration (when someone maintains close relation with the original culture but simultaneously adopts the host culture), assimilation (when someone rejects one’s original culture but adopts the host culture), separation (when someone maintains close connection with one’s original culture but rejects any connection with the host culture), and marginalization (when someone rejects both the original and the host culture). Furthermore, he explains that the acculturation process is directly linked with one of the several independent acculturation dimensions an immigrant adapts and these dimensions are independent of each other. These dimensions include: maintenance of original culture and maintenance of contact with host culture (Berry, 2001). The interaction of acculturation strategies and acculturation dimensions determine which acculturation strategy an immigrant will adopt: integration, marginality, assimilation and separation (Berry, 2001).

A number of studies have found that integration is reported as the most adaptive acculturation approach (Krishnan & Berry, 1992; David et al., 2009). Other types of acculturation strategies including marginality (Berry, 1984) and assimilation (Berry, 1994) are linked with a high level of stress producing strategies. There is a strong correlation between expectations of the host culture towards immigrants and the acculturation strategy adopted such
as expectations of assimilation can lead to a melting pot approach; demands of separation can result in segregation and marginalization which can lead to exclusion from the host culture (Berry, 2001; Huntington, 2004). For the promotion of multiculturalism, Berry (1984) suggested that the host culture needs to provide support to immigrants to integrate them into the dominant culture by respecting diversity and multiculturalism. Thus, we can accept diversity within and between groups (i.e., host and immigrant cultures) rather than expecting total homogeneity of cultures by becoming a melting pot.

In contrast to Berry’s acculturation model of domain and strategies, some other scholars suggest that the acculturation processes occur in stages, such as Hertz (1997) and Schmitz (1997). Hertz (1997) elaborates upon three stages of adaptation: pre-immigration (individual is excited to migrate); coping stage (feelings of fulfillment but later turning into anger and frustration and later acquiring skills for adjustment) and settlement (adjustment to new environment). In addition, Schmitz (1997) explains five stages of adaptation in a new culture: pre-contact with host culture, initial contact, conflict, crisis and adaptation. However, there are some other demographic factors that also influence the process of acculturation such as children, religion, financial situation, marital status (single), length of stay and lack of social support (Osmun & Allen, 2001; Khan & Watson, 2005; Golding & Burnam, 1990; Hovey & Magana, 2000; Ma, Quinn Griffin, Capitulo, & Fitzpatrick, 2010). It is a tough decision for immigrants to decide how much to adapt. There are a number of studies which reveal that there are individual variations and subjective preferences to the adaptation and acculturation process (Ryder et al., 2000; Berry, 2001).
2.1.2 The South Asian Immigrants and their Settlement in Canada

The history of the South Asian Canadian community dates back to the early 1900s (1905-1908) when approximately 5,000 South Asians arrived in British Columbia. These immigrants were Punjabi Sikhs who mainly worked in two industries: railroad construction and lumber. Due to strict immigration laws until early 1900s this community stayed small and homogenous. However, as the result of changes in immigration policies, more immigrants were eligible to enter the country and the South Asian community started to grow in Canada. Twenty nine per cent of the South Asians living in Canada were born Canadians, 69 per cent were immigrants and 2 per cent were non-permanent residents. Seventy six per cent of immigrants were born in Southern Asia and the top three birth places of these immigrants were: India (47 per cent), Sri Lanka (13 per cent) and Pakistan (12 per cent) (Statistics Canada, 2001). According to Statistics Canada (2006), the South Asian community turned out to be the largest visible minority population in Canada. About 1.3 million people identified themselves as South Asians in the 2006 Census – a 38 per cent increase over the 2001 Census (Statistics Canada, 2006). In Ontario the total South Asian population is 684,070 including male 345,825 female 338,245 and in Canada the total South Asian population is 794,170 including male 401,900 female 392,270 (Statistics Canada, 2006).

The South Asian community includes diverse sub-communities that vary in religion, ethnicity, immigration histories, personal experiences and linguistic backgrounds. The South Asian community is also known as East Indian in Canada and includes those with Bangladeshi, Bengali, East Indian, Goan, Gujarati, Hindu, Ismaili, Kashmiri, Nepali, Pakistani, Punjabi, Sikh, 

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3 As the result of the “continuous journey regulation,” effected in 1908, required all potential immigrants to travel through a continuous passage from their country of origin directly to Canada. At that time there was no direct passage from India to Canada and the South Asians were limited in pursuing immigration but eventually with the change of immigration laws and more travelling opportunities, the South Asian Community increased in numbers quickly and many immigrants came to Canada through family sponsorship, independent class or as refugees.
Sinhalese, Sri Lankan and Tamil ancestry. Many studies reveal that the South Asians do not identify with a common racial identity (Shankar & Srikanth, 1998) and prefer to be classified based on religion, ethnicity and socio-economic status (Koshy, 1998; Kurien, 1998). There are various other classification categories among the South Asians such as religion, caste, gender roles, regions of India, generational group, class and socio-economic status (Kurien 2002; Khandelwal, 2002; Prashad, 2000; Koshy, 1998). Many scholars have highlighted gender role differentiation in the South Asians as an important factor in identifying one’s ethnicity (Abraham, 1999; Dasgupta & Warrier, 1996; Anand & Cochrance, 2005); these gender roles are highly noticeable (Rudrappa, 2002). It is notable that the first generation South Asian immigrants prefer to stay close to their cultural values but the second generation is more flexible in welcoming the Western culture (Das & Kemp, 1997). Since there is huge diversity within the South Asian community, it is highly important to understand how someone identifies his/her ethnic background within this community. There is no simple way to address this issues i.e., how to determine someone’s ethnic background as a South Asian because of huge diversity within this cultural group (Jibeen & Khalid, 2010). Nagel (1994) has suggested that one way of determining someone’s ethnicity is a combination of “what you think your ethnicity is, and what they think your ethnicity is” (p. 154).

There is another twist to this confusion due to ‘within’ and ‘between’ group differences as well as personal affiliations of any cultural group/member. These complications further support the fact that there is a no straight forward answer to the question of ethnic belongingness as there are many layers of ethnicity. Moreover, these identifications are not static but fluid, changing and layered depending on situational, personal and contextual factors (Arthur & Collins, 2005; Espiritu, 1992; Moodley, 2007; Nagel, 1994, 1996). Based on anecdotal observations and also
supported by some studies, it appears that the South Asian community quickly identifies themselves with the titles of ‘Desi and/or Brown’ i.e., someone is culturally the same (Hilton et al., 2001).

Another distinguishing feature of South Asians is to maintain close ties with their country of origins. Sheffer (1986) explained the same notion “. . . ethnic minority groups of migrant origins residing in host countries but maintaining strong sentimental and material links with their countries of origin” (p. 3). An Ethnic Diversity Survey (EDS) developed by Statistics Canada (2003) revealed that the most of South Asians keep close ties with their country of origin. The EDS also revealed that the next generations born in Canada continue these ties with their relatives overseas through various channels of communications. Moreover, family unity and close cultural ties with their cultural heritage are highly emphasised by South Asians (Das & Kemp, 1997; Sandhu, 1997; Statistics Canada, 20035).

On the same note of ethnic diversity within the South Asians, a huge diversity of languages exists in this community. The South Asian community reported that more than 75 different mother tongues exist within this community6 (Statistics Canada, 2001). The EDS also supported the findings that the South Asians encourage their next generation to learn their mother tongue. 58 per cent of the South Asian parents responded on the EDS that it was important for their children to learn how to communicate in their mother language. These findings reveal that it is important for the South Asian community to sustain cultural ties and maintain strong connection

4 Some 66 per cent of the South Asian immigrants (78 per cent of those from India, 89 per cent from Fiji, and 96 per cent from Trinidad and Tobago) reported having visited their country of birth at least once since arriving in Canada. 5 The EDS survey revealed that the vast majority of the South Asians exhibited (93 per cent) a strong sense of belonging to their family. Indeed, 95 per cent of the South Asians live in family households with their family and relatives as compared with 87 per cent of the total Canadian population. 6 Punjabi was the most common first language (29 per cent), followed by English (27 per cent), Tamil (10 per cent), Urdu (8 per cent), Gujarati (6 per cent), Hindi (6 per cent) and Bengali (3 per cent).
with their cultural heritage. In addition, in the same EDS more than 8 in 10 also reported that maintaining such traditions were very important to them.

Another distinguishing cultural identification factor within the South Asian community is ‘religion’ (Kurien, 2002; Williams, 1988). The roots of Buddhism, Sikhism and Hinduism can be easily traced to the Indian subcontinent, as well there are a large number of Muslims and Christians affiliated with this community. Religious affiliation is associated with specific ethnic origins (Statistics Canada, 2001). The EDS findings also supported that religious affiliation is very important to the South Asian community.

The above mentioned literature review shows that the South Asian community is a diverse community and it is hard to capture each and every feature of its diversity in one study. However, in order to limit the scope of this study only the South Asian Muslims who emigrated from India and Pakistan will be the focus of this research to explore the relationship between acculturation, depression and coping strategies.

2.1.3 Muslim Communities: Specific Concerns around Acculturation and Settlement

‘Religion’ is considered one of the most important ways of cultural identification for many immigrants (Statistics Canada, 2001). Moreover, some studies also confirmed it as a source of gaining acceptance and identification within the host culture (Kurien, 1998; Williams, 1988). Muslims all over the world follow the religion of Islam. Islam is an Arabic word meaning “total submission to the will of God.” Muslims believe in the five pillars of Islam including: faith in God and Mohammad (peace be upon him) as His Prophet, five times prayer, fasting during the

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7 According to the census 2001, about 30 per cent of the South Asians identified themselves as Sikh, 28 per cent Hindu, 23 per cent Muslim, 8 per cent Catholic, 7 per cent another religion and 3 per cent reported having no religion.
8 The census 2001 revealed that Punjabi were mainly Sikh (86 per cent), those who reported Pakistani (90 per cent), Bangladeshi (87 per cent) and Bengali (74 per cent) ethnic origins was Muslim. Those who reported affiliations with Tamil (80 per cent) and Sri Lankan (64 per cent) ethnic origins were Hindu.
9 The EDS (2002) findings show that 83 per cent of the South Asians reported that religion was an important factor for them.
month of Ramadan, Zakat\textsuperscript{10} and Hajj\textsuperscript{11} (Lippman, 1995; Khan, 2000). The interdependence and interconnectedness between culture, religion, community and family are strongly emphasized in Muslim culture as opposed to the West where individualism is emphasized (Levy-Warren, 1996; Schwartz et al., 2010). According to Williams (1988):

\begin{quote}
People are not “religious-in-general,” but “religious-in-particular. They follow specific religious traditions, with texts, history, rituals, and leaders specific to a group. These are transmitted in a language with music, persons, and gestures joined into rituals that have meaning in a specific social isolation (p. 280).
\end{quote}

For Muslims, Islam is not only a religion but a way of life that dominates every aspect of their life (Khan, 2000). Moreover, for the Muslim community culture and religion are the same and difficult to separate, they place a high value in following the religious rituals in their everyday life (Roald, 2001). The Muslim population is growing at a very fast pace in Canada. The history of Muslims in Canada dates back to almost the same time when the nation itself was born. Four years after the birth of Canada in 1867, the Canadian Census of 1871 indicated the presence of 13 Muslims in the nation (Census of Canada). As a result of changes in immigration laws in late 1960s, many Muslims migrated to Canada for various reasons, such as financial needs, political safety and escape from civil war. The Muslim population represented just fewer than 2 per cent (579,640) of the total Canadian population in the 2001 Census but it is increased to 2.5 per cent (about 783,700) according to the 2006 Census. The records of the Canadian Census

\begin{flushright}
\textsuperscript{10} To give for charity 2.5 per cent of total asset/annual savings once a year.  \\
\textsuperscript{11} Pilgrimage to Mecca, obligatory for Muslims once in lifetime.
\end{flushright}
show a steady growth and expansion of Muslims in Canada. According to an estimate, Muslims are expected to grow to 1.1 million by 2011 and 1.4 million by 2017.\textsuperscript{12}

The South Asian Muslims began migrating to Canada in small numbers in the 1950s. They came from India, Pakistan, South Africa, Fiji, Kenya, Mauritius, England, and the Caribbean region (Multicultural Canada, 2010). The first significant migration from India and Pakistan occurred in the early sixties. In the 60’s many people from India and Pakistan started coming to Canada for jobs and training opportunities. Later, in the seventies and eighties many South Asian immigrants came to Canada for several other reasons, such as studies, employment or to join the family and relatives already settled here. It was very difficult for the South Asian Muslims to keep their identity as well as to cope with the demands of Canadian life. This pressure led them to get closer to their community and to form strong social networks. A glimpse of these efforts can be seen at the gatherings of Eid\textsuperscript{13} and Friday prayers and other religious days. Presently, there are number of Islamic institutions in GTA that are encouraging Muslim cohesiveness and Muslim identification at a large scale (Bakht, 2008).

An anti-Islamic wave after the September 11\textsuperscript{th}, 2001 incident has caused continuous stress and mental health issues in Muslim community around the world (Critelli, 2008). For example, the Cartoon incident (published drawings of the prophet Muhammed [peace be upon him] in the private newspaper, Jyllands Posten (Factsheet Denmark, 2006; Ismail, 2007), war on terror/Peace mission in Afghanistan, Iraq, Palestinian and Kashmir problems and Libnan-Israel

\textsuperscript{12} According to the Canadian Census of 1971 there were 33,000 Muslims in Canada. In the 1981, the Census reported 98,000 Muslims. The next census of 1991 revealed more than double of these figures 253,265 showing growth of Muslims in Canada. In 2001, Muslims came out 2 per cent of the total Canadian population and grown to more than 579,000. Preliminary estimates for Census 2006 point to a figure of almost 800,000 that is almost 2.5 per cent of total Canadian population.

\textsuperscript{13} Muslims celebrate three Eids occasions in a year which are considered times of happiness and mass gathering with other Muslims: one after the month of Ramadan, second after the ceremony of Haj (Pilgrimage to Mecca) and the third one is on the birthday of the last Prophet Mohammed (PBUH).
conflicts have impacted Muslims, especially Muslim immigrants in Western countries (Roald, 2004). Since the events of September 11th, 2001, the Muslim community has been under a wide discussion and many racist incidents have been reported to humiliate them (Aldridge, 2000; Allen & Nielsen, 2002). Due to these reactions, Muslims all over the world have become under constant stress, especially in non-Muslim, Western countries. There are a number of studies which indicate a close connection between depressive symptoms and perceived prejudice (Nesdale et al., 1997; Rahman & Rollock, 2004; Soharwardy, 2002). In the next section, I discuss acculturation challenges in detail and how they impact immigrants’ mental health.

2.1.4 Acculturation Challenges and Mental Health Concerns of Immigrants

The literature shows that the acculturation process is closely connected with many psychological and emotional challenges that may lead to mental health difficulties (Abouguendia & Noels, 2001; Ghuman, 1998; Hernández, 2007; Karim, 2007; Kiang, Grzywacz, Marin, Arcury, & Quandt, 2010; Lee & Chen, 2000; Miranda & Umhoefer, 1998; Potochnick & Perreira, 2010; Yakushko & Espin, 2010; Yeh, 2003). Osmun and Allen (2001) conducted a study and found several hardships and challenges faced by newcomers such as major problems in attaining employment, lack of basic life skills training, onerous debt load from travel and medical assessment costs, lack of recognition of foreign credentials, lack of assistance in obtaining appropriate housing, inaccessibility of English classes particularly for women due to lack of daycare and the prevalence of loneliness and isolation experienced by interviewees. Similar to Osmun and Allen (2001), and Yeh et al. (2008) conducted a study on Chinese immigrant youth which also highlight various challenges of new immigrants’ during their acculturation process. They identified six main themes: socio-economic changes due to immigrant status; English proficiency as a barrier to adjustment; changes in family structure and
dynamics; racism, and invisibility; challenges to social support system; and some other challenges with regards to navigating in the U.S. Some other studies also revealed a significant correlation between acculturation processes and mental health issues in immigrants (Akutsu & Chu, 2006; Chang, 2006; Hundley & Lambie, 2007; U.S. Department of Health and Human Services, 2001). It is also noted that the correlation between acculturation process and mental health issues can be increased due to some other factors such as resettlement context (Abouguendia & Noels, 2001; Beiser, n.d.; Hyman, 2001), migrant status (Pernice & Brook, 1994) and a constant battle to decide how much to adapt to the new culture and how much to sacrifice their original culture (Berry, 1999; Rudmin, 2003). Also, many studies note that there is a strong possibility that persistent cultural conflicts can lead to mental health issues in immigrants (Berry, Kim, Power, & Young, 1989; Jibeen & Khalid, 2010; Khan & Watson, 2005; Kwak & Berry, 2001; Pernice & Brook, 1994). These mental health difficulties are not only limited to first generation immigrants, but are also faced by the second generation immigrants (Abouguendia & Noels, 2001; Ghuman, 1998; Gupta, Johnstone & Gleeson, 2007; Weinreich, 1986). All of these studies indicate acculturation challenges of new immigrants which lead to their mental health issues; however, the present study specifically focuses on the process of acculturation and coping for South Asian Muslim Immigrants living in the GTA. In the next section, I discuss how acculturation hardships may generate experiences of depression during the acculturation and settlement process.

2.2 Depression: Introduction and General Research

Depression is a serious illness that has a negative impact on a person’s emotions, thinking and behaviour (American Psychiatric Association, 2000). Depression is a term commonly used to explain if someone is feeling low or sad; however, clinical depression can significantly affect
most aspects of life. According to the American Psychiatric Association (2005) depression has a variety of symptoms, but the most common are a deep feeling of sadness or a marked loss of interest or pleasure in activities. Other symptoms include: changes in appetite that result in weight loss or gain unrelated to dieting, insomnia or oversleeping, loss of energy or increased fatigue, restlessness or irritability, feelings of worthlessness or inappropriate guilt, difficulty thinking, concentrating, or making decisions, thoughts of death or suicide or attempts of suicide. World Health Organization (2006) WHO defines depression as depressed mood, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, low energy, and poor concentration. The Centre for Addiction and Mental Health in Toronto (n.d.) classifies the risk factors for depression into three categories: biological factors (genetic predisposition, imbalance in brain chemistry, and response to another illness); psychological factors (emotional vulnerabilities and cognitive distortions) and psychosocial environmental factors (family history and major stress in life). It reveals that depressive symptoms can be exhibited biologically, psychologically and/or psychosocially and mental health professionals need to understand these risk factors and how they are impacting someone’s life.

More than a million Canadians have reported experiencing a depressive episode annually and it is considered one of the chronic health concerns as a heart disease and diabetes (Statistics Canada, 2002b). Stewart, Gucciardi and Grace (2004) found that Canadians who experienced an episode of severe depression were more likely to be diagnosed with heart disease than those who did not.

Alone, or in combination with other mental health issues, depression interferes with the ability to function at home, at work and at social level (Beutler & Malik, 2002; Breslin, Gnam, Franche, Mustard, & Lin, 2006). Furthermore, workplace stresses and economic conditions play
important role in depression. WHO statistics also show that 121 million people are affected by depression and it is one of the major causes of disability (WHO, 2006). Patten, Wang, Beck, & Maxwell (2005) report that an estimate of 1 in 10 Canadians experienced a major depressive episode at some point in his or her life. In 1998, the economic impact of short term disability days due to depression has been an estimated $2.6 billion in Canada, i.e., this financial loss is primarily due to lost work productivity and health care cost (Arie, 2011; Stephens & Joubert, 2001). Gilmour & Patten’s (2007) study shows that working Canadians with depression have reported an average of 32 days per year when they were not able to do their job properly. Mood Disorders Association of Ontario (2005) statistics indicate that of the nearly 3 million people report experiencing depression, 30 per cent are submitting disability claims.

American Psychiatric Association (2005) explains that depression affects nearly 1 in 10 adults each year, and nearly twice as many women as men. Many other research studies also support these findings that its occurrence is higher in women (15-25 per cent) as compared to men (10-15 per cent) (Mood Disorders Association of Ontario, 2005; Beutler & Malik, 2002). The course of depression varies from once in a life-time event to multiple reoccurrences and same is with its prevalence which can vary widely all over the world (American Psychiatric Association, 2002). In general, Asian countries, such as Japan and Taiwan, have the lowest documented lifetime prevalence rates of depression (both approximately 1.5 per cent); poorer countries like Chile have the highest rates (27 per cent); the United States and other Western countries have intermediate lifetime prevalence rates of depression (Tsai & Chentsova-Dutton 2002). A point to be considered is that these estimates may vary from one study to another, and not only because rates of depression do actually vary over time in a population but also due to differences in the survey sample, depression measuring instruments and definition of depression.
in a particular study. It is difficult to say whether depression affects poor or affluent socio-economic class. New studies find depression to be just as common in poorer countries as in affluent countries (Luczaj, 2008).

Many studies reveal that depression is a commonly reported mental health illness and people interpret and express depressive symptoms differently, some through external symptoms and others through intra-psychic symptoms (Giosan, Glovsky & Haslam, 2001; Nemade, Reiss, & Dombeck, 2007). Depression has different meanings and different presentations for different people and is closely related to the socio-historical context in which it is manifested (Kleinman, 2004). In some communities there is a lack of vocabulary to express psychological symptoms; consequently, these symptoms are expressed in somatic form (Beiser, n.d.). For example, in Chinese society depression is expressed in physical terms. According to Kleinman (2004), “Chinese people do not report feeling sad, rather express boredom, discomfort, feelings of inner pressure, and symptoms of pain, dizziness and fatigue” (p. 51). Different cultures interpret the symptoms of depression in different ways. In Latino and Mediterranean cultures, people may report symptoms such as nervousness or headaches. In Asian cultures, depression may be described as tiredness, physical weakness or imbalance of physical and mental functioning (Fenton, & Sadiq-Sangster, 1996; Nemade et al., 2007). In Middle Eastern and Native American cultures, depression may be described as heart problems or heartbreak (Depression and Bipolar Support Alliance, 2006). Lawrence et al. (2006) conducted a cross-cultural study to explore concepts and underlying factors of depression and found that White British and Black Caribbean participants defined depression in terms of ‘low mood and hopelessness’ whereas the South Asian and Black Caribbean participants frequently defined depression in terms of ‘worry.’ It seems that the health and social care professionals need to be sensitive to the language of
depression used by different ethnic groups as well as stigma attached to mental health issues. For example, due to the stigma of mental illness in Indian society, health workers in a project assigned to deal with undiagnosed and untreated mental distress in India, carefully avoided using the term “depression” or “anxiety” for diagnosis and used words like “stress” and “tension” instead (Luczaj, 2008).

Patel (2001) highlights that linguistic factors and vocabulary to express mental health issues play an important role in identification and diagnosis of mental health issues. For example, those who are able to better express their symptoms of depression are better able to be assessed and treated properly as compared to those who are struggling with linguistic challenges and vocabulary limitations. Moreover, Patel recommended developing tools to understand the language of Asian patients and the use of their idioms of distress within the context of mental health issues. By developing these tools, Patel hopes that a common understanding between doctors and patients would be established in understanding and treating psychiatric patients particularly depressed patients. Thus, it is important that mental health professionals need to have an understanding of culture specific terminology and to consider individual and group cultural dynamics before generalizing and stereotyping these symptoms in diverse communities. However, these semantic and linguistic differences in various cultures need to be understood as cultural differences rather than cultural deficits (Raguram, Weiss, Channabasavanna, & Devins, 1996).

Jadhav, Weiss and Littlewood (2001) noticed differences in presentation of symptoms of depression in white Britons in London and South Indians in Bangalore. The findings of the study in Bangalore revealed that the tendency of South Indian patients was to report somatic symptoms spontaneously, these patients explained psychological symptoms on probing whereas
white Britons living in London and under the treatment of depression expressed psychological symptoms first and somatic ones upon probing. Patel (2001) highlighted differences in the expression of depressive symptoms and explained that applying psychiatric categories from one culture to another is not always appropriate. On the same note, if manifestation of depression can vary from one culture to another, and then the same diagnostic criteria cannot be applied to everyone without understanding their cultural context (Ehntholt & Yule, 2006; Nemad et al., 2007).

In the above discussion, the difference in the representation of symptoms can be attributed to differences in the ‘acceptance’ and ‘understanding’ of mental health issues in each culture. As well, the manifestation of the symptoms can also vary from one culture to another. The present study explores how symptoms of depression are experienced by the South Asian Muslims (the target population of the study) physically (somatic symptoms) and/or psychologically (emotional symptoms) and which strategies they use to cope with these symptoms. The findings of this study may help to understand the language and vocabulary used by this particular community to express their experiences of depression. Furthermore, this information can help mental health professionals to better understand the manifestation of symptoms and how it is expressed by South Asian Muslims in order to offer them culturally appropriate services.

2.2.1 Classification and diagnosis of depression and ethnic minority issues

The revised fourth edition of Diagnostic Statistical Manual of Mental Disorders (DSM) is commonly used to diagnose depression (American Psychiatric Association, 2000; Glovsky, & Haslam, 2003), but many experts criticize the manual’s lack of provision in offering culturally sensitive classification system to diagnose people from diverse cultural backgrounds (Beutler & Malik, 2002; Dalal, 2000). There are variations in the expression and interpretation of
depressive symptoms from culture to culture, and there are chances to misdiagnose those who do not fit into their prescribed classification of diagnosis (Pedersen, 2001; Wakefield & First, 2003). In this way, there is a tendency to label those who do not have ‘power to influence’ and ‘power to define’ (Wright, 1998) and make it convenient for professionals to justify their diagnosis and recommended treatments based on DSM-IV-R classification (Moodley, 2003).

According to a psychosocial perspective, depression can also be caused or trigged by various situational and contextual factors such as when immigrants move from one part of the world to another part, due to stress, and other challenges, their behaviour changes (Lux & Kendler, 2010). However, identifying their behaviour changes outside of their social context is inappropriate (Dalal, 2000). Berry (1997) has explained three important processes that may take place during acculturation: culture shedding (unlearning behaviours and other patterns that do not fit in the host culture), culture learning (learning of new behaviours and other patterns in harmony with the host culture) and culture conflict (disharmony between the behaviours and other patterns to learn and unlearn). There is a strong relationship between these processes and psychopathology. Many studies have been conducted to explore the relationship between immigrants and mental health issues especially in regards to symptoms of depression (Jang, Kim & Chiriboga, 2005; Lee, 2007; Potochnick & Perreria, 2010; Ying & Han, 2007). To explore symptoms of depression in the South Asian immigrants, Burr (2002) conducted a study with mental health care professionals and found that stereotypes are incorporated as fact and have the potential to mislead diagnosis; therefore, they also misdirect treatment pathways. Aside from the stereotypical cultural perspective from mental health professionals, there is also a continued stigma associated with mental illness among the Asian community (Leong & Lau, 2004; Nemade et al., 2007; Ng, 1997). Bender (2004) also highlights the stigma of mental health issues in
South Asian culture and explained that the identification process of mental illness is a slow process because of lack of acceptance of mental health issues in the target population. There are some other studies on mental health issues with a specific focus on depression and fear of stigma in the South Asian immigrants that support Bender’s findings that mental health issues are stigmas and individuals from the South Asian culture are reluctant to talk about or seek assistance for their mental health issues (Anand & Cochrance, 2005; Dhillon & Ubhi, 2003; Jha, 2001; Lee, Koesky, & Sales, 2004; Rahman & Rollock, 2004; Yeh & Inose, 2002). Furthermore, mental health issues become more complex to identify when coupled with acculturation challenges such as stress of learning new language, new codes of conduct, finding ways to look for job, establishing new social networks (Jabeen & Khalid, 2010; Arthur & Collins, 2005). The identification of mental health issues, specifically depression, is further explored in the present study through self-reported and self-identified features of depression in the target population.

There is huge criticism of diagnostic classifications and testing instruments especially when they are not developed and/or standardized on a particular population (Cuéllar & Paniagua, 2001; Moodley, 2003; Wright, 1998). Also, differences in the symptoms and manifestation of depression can be due to methodological differences in researches studying depression (Tsai & Chentsova-Dutton, 2002). It is inappropriate to use the same psychological measures for diverse cultures if they are not adapted to that cultural group (Cuéllar & Paniagua, 2001; Sue, Arredondo & McDavis, 1992). According to Costa (2008):

Researchers may still utilize instruments for assessment of depression and refrain from engaging in ‘othering,’ for example, by reporting results in terms of the incidence of symptoms of depression, rather than labelling participants as “depressed.” In addition,
researchers must understand the results as transitory and specific to the context in which they were obtained (p. 29).

In the DSM (American Psychiatric Association, 2000) an attempt is made to capture these migration challenges and their effects on mental status by adding a category of Acculturation Problems under Other Condition to highlight these challenges and make clinicians aware of mental health issues faced by immigrants. The above mentioned research studies raise an interesting question: why do people who meet the diagnostic criteria of DSM-IV not pursue treatment? Is it because they are afraid of being stigmatized or is it due to poor mental health literacy that people are not aware that they need any support to overcome depression? A response to this question can be that not everyone who meets the criteria of DSM IV for depression needs treatment and some of its symptoms may eliminate on their own (Beutler & Malik, 2002; National Institute for Health and Clinical Excellence, 2004). There is a need to investigate why some people meeting the diagnostic criteria for depression are recovered without any treatment or professional support and what else help them to be resilient to deal with their mental health issues. The present study responds to this question by exploring coping capabilities in the target population. Moreover, the study also closely examines how cultural and contextual factors contribute to acculturation difficulties and shape coping mechanisms of South Asian immigrants to Canada. Based on the findings of the present study, recommendations are made for mental health professionals to incorporate coping mechanisms of South Asian Muslim immigrants in planning and delivering culturally sensitive services to them.

2.3 Coping/Resilience: Introduction and General Research

Literature reviews indicate that coping is considered a form of resilience; an ability to bounce back and to effectively deal with adversities. Resilience in psychology refers to the
positive capacity of people to cope with stress and catastrophe (Werner, 1982; Seligman, 2002). It is also used to indicate a characteristic of resistance to future negative events. Some other commonly used terms for resilience are psychological resilience, emotional resilience, hardiness, and resourcefulness which highlight multilevel individual capacity for resilience (Erwin, 2009; Masten, 2009). Resilience is the ability to spring back from and successfully adapt to adversity (Henderson, Benard & Sharp-Light, 2008). In psychological research, resilience is used in many ways such as to deal effectively with adversities and create positive outcomes (Yee, DeBaryshe, Yuen, Kim, & McCubbin, 2007; Rutter, 1987); and also to lead to absence of pathology (Radke-Yarrow & Brown, 1993). Definition of resilience differs from culture to culture and context to context (Arrington & Wilson, 2004; Shweder & Sullivan, 1993). However, generally it is used to refer to someone’s ability to “cope well with adversity” (Unger, 2005) and “preserve and adapt when things go awry” (Reivich & Shatté, 2002). Resilience skills prepare people to deal with adversities, reach out for opportunities, establish healthy relations and be less inclined towards depression (Brown & Turner, 2010; Masten & Coatsworth, 1998; Weiner, 1985).

Historically, the studies of resilience can be classified into three waves: first wave focused on resilient qualities that promote social and personal success (Werner, 1982; Wright & Masten, 2005); second wave considered resiliency as a process to figure out the relationship between protective factors and successful outcome (Richardson, Neiger, Jensen, & Kumpfer, 1990); and a third wave highlighted identification of motivational factors within individuals and groups that lead to resilience (Diamond, 1997; Richardson, 2002).

Emmy Werner was one of the first scientists to use the term resilience in the 1970s. Werner and Smith (1989) conducted a longitudinal study of 30 years on children who grew up in
a very challenging environment such as prenatal stress, poverty, instability in everyday life, and mental health issues in family. She noted that children who grew up in very high-risk environment two-thirds exhibited destructive behaviors in their later teen years, such as chronic unemployment and substance abuse. One-third of these youngsters did not exhibit destructive behaviors. Werner called the latter group resilient. Resilient children and their families had traits that made them different from non-resilient children and families such as personal characteristics (social, adaptable, good communication skills and high self-esteem), and environmental factors (care giving environment both inside and outside of family). In this study, Werner (1995) identified three protective factors that either existed in or supported resilient people: (a) personal attributes- outgoing, bright, and having a positive self-concept; (b) the family-having close bonds with at least one family member or an emotionally stable parent; and (c) the community-receiving support or counsel from peers. Kobasa, (1979a; 1979b) also identified three common elements in resilient people: control (trust in their abilities to handle the controllable aspects of an adverse situation), challenge (ability to face problems and consider mistakes as learning opportunities and potential for growth) and commitment (engagement in the task). Researchers describe resilience qualities in a number of ways: self-determination (Schwartz, 2000), excellence (Lubinski & Benbow, 2000), hope (Snyder, 2000) and forgiveness (McCullough, 2000). Other research studies support the close connection between positive emotion and resilience (Ong, Bergeman, Bisconti, & Wallace, 2006) and explain that positive emotions help resilient people construct psychological resources that are necessary for coping successfully with significant adversities like migration, war, natural disasters or terrorist attacks (Fredrickson, Tugade, Waugh, & Larkin, 2003; Jibeen & Khalid, 2010; Tugade, Fredrickson, & Barrett, 2004). Following an examination of emotional responses of the US college students to the
September 11, 2001 attacks on the World Trade Centre, Fredrickson et al. (2003) indicate that positive emotions are essential ingredients in resilience to deal with crisis situations and depression.

Resilience is not limited to time or age but it rather is acquired through an ongoing process. We can learn how to be resilient and face adversities by changing our thoughts and the way we approach problems (Reivich & Shatté, 2002). According to Reivich and Shatté (2002) there are seven critical abilities associated with resilience: emotional regulation (the ability to stay calm under pressure and express emotions in an appropriate manner), impulse control (the ability to delay immediate gratification and determine whether or not to take any action), causal analysis (the ability to figure out the relationship between cause and effect), empathy (the ability to understand someone else fitting into his/her shoes), realistic optimism (the ability to maintain a positive attitude without refusing reality), self-efficacy (the ability to trust oneself to handle adversity and solve problems) and reaching out (the ability to approach other people and things to take advantage of new opportunities). This list focuses on resilience within various contexts i.e., the individual in relation to other individuals; the individual in relation to a particular community and in a broader context the individual to a particular society. Another concept of resilience is based on a positive/empowering model that follows the philosophy of positive psychology. It highlights the importance of human empowerment and prevention rather than a disease-based model that deals with pathologies and psychological problems. According to Seligman (2002):

At an individual level it is about positive personal traits-the capacity for love and vocation, courage, interpersonal skill, aesthetic sensibility, perseverance, forgiveness, originality, future-mindedness, bright talent and wisdom. At the group level it is about civic virtues
and institutions that move individuals toward better citizenship: responsibility, nurturance, altruism, civility, moderation, tolerance and work ethic (p.3).

It is of great interest to researchers why some people adapt well in extreme adversities (such as wars and natural disasters) and serious psychological illnesses (Luther, Cicchetti & Becker, 2000) whereas others do not. Studies on resilience highlight the significance of positive development and skills to deal with adversities (Wright & Masten, 2005). Moreover, in the 1970s, the research on resilience highlighted character traits such as self-confidence and effective internal locus of control to deal with adversities (Garmezy, 1978). Researchers became more interested in exploring how resilience is acquired and what processes are involved in its development (Flach, 1988).

Many experts considered that social and environmental factors play an important role in resilience (Blanco-Vega, Castro-Olivo & Merrell, 2008; Fozdar & Torezani, 2008; Kiang et al., 2010; Wright & Masten, 2005; Yee et al., 2007). Werner & Smith (1992) conducted a study for a period of over 40 years with 700 at-risk Hawaiian residents born in adverse circumstances and found that a distinguishing factor is shared by each resilient child was a long-term, close relationship with a caring, responsible parent or other adult. Beyond the issue of supportive parents and other adults, are concerns about why some people who experience the same type of adversities and who have the same level inter-personal and socio-environmental support are more resilient than others. Perhaps, the response to this question can be that some studies also highlight internal motives as driving forces for resilience in face of adversities. According to Richardson (2002) “there is force within everyone that drives them to seek self-actualization, altruism, wisdom, and harmony with a spiritual source of strength” (p.313).
McCubbin, Thompson, Thompson and Fromer (1998) explained the Resiliency Model of Family Stress, Adjustment and Adaptation. This model explains developmental stages, culture, values, interpersonal skills, and family system properties as critical resources on which the family unit may rely to deal with any stressors. This model includes various components of resilience such as individual, cultural, and familial. It reveals that we cannot attribute only one or two factors in promoting resilience but it is a product of multiple factors such as contextual, cultural and social personal and group motivation. For this study, I focus on these multiple factors that help in dealing with adversities and promoting resilience.

2.3.2 Factors of Resiliency and their Impact on Individuals

As discussed above, there are various ways of defining and measuring resilience (Rigsby, 1994; Kaplan, 1999). Similarly, there are multiple strategies used to measure resilience such as academic achievement and successful adaptation in certain areas (Luthar, Cicchetti & Becker, 2000) and adaptation to personal, environmental and situational factors (Tummala-Nara & Harvey, 2007; Gordon & Song, 1994).

Resilience is not a static concept; it changes over time and from culture to culture (Arrington & Wilson, 2000; Shweder & Sullivan, 1993). We cannot use the same criteria to measure resilience in every culture due to diversity in socio-cultural contexts as well as various other above mentioned factors. For example, ethnic minorities are exposed to various contextual issues that impact their resilience and coping strategies to deal with adversities such as racism, oppression, and segregation. When we discuss resilience in an individual or group level, it is also important to consider the context in which we are talking about. There are chances that the same behaviour could be considered resilient in one society whereas in another as a sign of deficiency. For example, the same behaviour may be considered terrorism in one context and in
the other context it can be classified as patriotism. Rigsby (1994) also highlights the importance of context in resilience and states “what we really want to understand are the processes of human development in different times and places, for individuals with varying risks and assets, and for individuals developing in a variety of social contexts” (p.91). Fuentes and Vasquez (1999) in their study found multiple factors influencing the rate and degree of acculturation and settlement in immigrants such as age, socioeconomic class, education and fluency in English language and their impact on ethnic population especially adolescent girls of ethnic community (other than white). Chavkin and Gonzalez (2000) explain that literature on resiliency identifies five key protective factors of families, schools, and communities: supportive relationships, particularly encouragement from school personnel and other adults; student characteristics, such as self-esteem, motivation, and accepting responsibility; family factors, such as parental support/concern and school involvement; community factors, such as community youth programs (e.g., sports, clubs, hobbies); and school factors, such as academic success and pro-social skills training.

In addition to contextual factors (e.g., the role of family and kinship (Brice-Baker, 2005; Bartelt, 1994) many other studies on resilience also highlight the importance of cultural dynamics (Cohler, 2000; Wong, Wong, & Scott, 2006; Wright and Masten, 2005). It is also noted that those individuals who have strong ethnic identity and close affiliations to their cultural groups are more resilient than those who do not have strong ethnic ties. Holleran and Waller (2003) found in their study that those who have feelings of cultural connectedness and positive feelings towards their group exhibit more resilience than those who have low ethnic identity (López & Vargas, 2011). Along the same lines, Lee (2005) noted that in case of ethnic discrimination there were more depressive symptoms and poor social connectedness in his
research participants. Yee et al. (2007) conducted a study on various cultural groups and found four cultural themes common to Chinese, Japanese, Filipino, Southeast Asian, South Asian, Hawaiian and Samoan cultures. These themes are collectiveness (to place group needs above the individual’s desires); a relational orientation (self is defined in reference to others); familialism (relationship with the extended family) and family obligation (attitudinal and behaviour responsibilities towards children, seniors and other family members). The impact of ethnic identity, close affiliations to cultural groups and cultural connectedness is further explored in the present study in reference to South Asian Muslim immigrants.

A number of studies explore the acculturation challenges of immigrants and the coping strategies of the South Asians (Maraj, 1996; Ward & Styles, 2003; Jabeen & Khalid, 2010; Khan & Watson, 2005). The present study shares some features with these studies, such as focus on the acculturation experiences of South Asian immigrants to Canada, but it extends the reach of these studies by relating acculturation to resilience, depression and mental health practices. For example, Khan & Watson’s study targets Pakistani immigrant women and explores the quality of life and personal stresses and strains that follow immigration to a Western culture. Khan & Watson’s study includes participants who have immigrated to Canada within the last year through Canadian immigration point system. The present study focuses on both South Asian male and female participants who are Muslims and came from either India or Pakistan (i.e., literature review explains diversity within and between the South Asians). These national and religious restrictions help me to see the impact of gender differences in coping strategies within the context of acculturation challenges and depression as there are a number of studies which emphasize upon the distinct gender roles and religious differences in the South Asians (Anand & Cochrane, 2005; Kurien, 2002; Abraham, 1999; Williams, 1988; Dasgupta & Warrier, 1996).
As stated earlier, coping cannot be studied in isolation from social, contextual, cultural, personal and group factors since it is shaped by each of these factors. Arrington and Wilson (2000) have emphasized that “future work on risk and resilience with populations of youth of colour would be more relevant and complete if theories that incorporate culture and diversity are used as a framework of research” (p.228). In the present study the concept of coping is studied broadly to examine South Asian immigrants’ abilities to adapt and deal with adversities of acculturation and to nurture their strength in the adaptation process. Coping is explored within the context of acculturation and depression in the South Asian Muslim immigrant community and how it helps them to acculturate in a new land and cope with their acculturation challenges and depression. Based on the findings of the present study, recommendations are made to mental health practitioners on how to incorporate coping capabilities into their practices in a culturally appropriate way.

2.4 Study Rationale

A review of the literature shows that coping is constructed through various internal and external sources (Richardson, 2002). The internal sources of coping can be self-esteem, confidence, knowledge and awareness and its external sources can be social networking, family support, community resources and spirituality. Moreover, cultural dynamics (Cohler, 2000; Wong et al., 2006) and contextual factors (i.e., role of family members and friends) also play a vital role in resilience (Bartelt, 1994; Brice-Baker, 2005). However, there is a paucity of research literature to inform us about coping strategies of South Asian Muslims to deal with their acculturation hardships and mental health issues particularly after their initial period of immigration i.e., after three years (Jibeeen & Khalid, 2010).
My reasons for focusing more specifically on South Asian Muslim immigrants are two-fold: (1) the research resonates with me on a personal level as I share the same ethno-cultural and religious background and have gone through the personal experience of immigration; and (2) there is a paucity of research to explore coping mechanisms of South Asian Muslim immigrants living in GTA. The present study focuses only on those South Asian Muslim immigrants who have coped with their acculturation hardships and depression after three to five years of immigration. In this study, I specifically focus on the religious dimension and period of residence in Canada because most of the studies generally highlight acculturation challenges of South Asian immigrants without offering specific information about South Asian Muslims (Choudhry, 2001; Das & Kemp, 1997) and their coping strategies after a few years of immigration. Thus, this study addresses the gap to investigate the coping strategies of South Asian Muslims which have helped them to stay and adopt their new land as their future homeland following the first three years of immigration. Also, Canadian Federal Government\(^\text{14}\) funds a number of settlement services and programs for new immigrants based on the residence criteria of up to three years. According to Citizenship and Immigration Canada (CIC) funding guidelines landed immigrants are considered newcomers for the first three years of their residence in Canada. In order to narrow the focus of the present study, I have included those participants who have immigrated for more than three but less than five years to explore what happens after the three years of residence and how these newcomers cope with their acculturation hardships and mental health challenges to settle in Canada.

This research provides new insights into the challenges and hardships of South Asian Muslim immigrants during their journey to settlement and highlight coping mechanisms that make them resilient to deal with their acculturation adversities and consequent mental health

\(^{14}\) http://www.cic.gc.ca/
issues. In addition, the present study helps to understand how number of years of residence following their immigration impacts the coping and adaptation process of South Asian immigrants. Based on the findings of the present study, recommendations are made for mental health practitioners on how to incorporate coping strategies into their practices in a culturally appropriate way. Furthermore, these recommendations can be used for professional development training and as the basis for further research on coping mechanisms to acculturation and depression in other cultural groups for other social dimensions. In the next section, I discuss the research methodology of the study.
CHAPTER 3
Research Method

This chapter explains the research methodology used in the study including the research questions, details about participants including procedures for their recruitment and screening, measures, data collection, and analysis procedures. In this study, I used a qualitative methodology to investigate South Asian Muslim immigrants’ coping with depression in the acculturation phase. Qualitative research design is based on inductive reasoning and helps a researcher to understand the socially constructed nature of reality, the intimate relationship between the researcher and what is studied and situational constraints that form inquiry (Denzin & Lincoln, 2003). According to Charmaz (2000):

Grounded theory served at the forefront of ‘the qualitative revolution’ . . . at a critical point in social science history . . . defended qualitative research and countered the dominant view that quantitative studies provide the only form of systematic social scientific inquiry. (p.509)

I used grounded theory analysis (Bryant & Charmaz, 2007; Glaser & Strauss, 1967; Henwood & Pidgeon, 2003; Strauss & Corbin, 1994) to analyze and interpret participants’ responses, to organize the data into themes, sub-themes and categories and then to generate theory that was further explored through a number of back and forth interplays with the data (Fast, 2002).

As previously discussed, the present study focuses only on those immigrants who were able to cope with their acculturation hardships and depression. Their coping sources are further explored in depth to investigate what helped the immigrants handle acculturation challenges and
depression. The following research design and analysis procedures are used in this research study:

a. Collecting demographic information, assessing depression; and conducting a semi-structured interview with participants through three instruments: (i) demographic information questionnaire (see attached Appendix F); (ii) depression checklist (see attached Appendix G); (iii) semi-structured interviews (see attached Appendix H)

b. Conducting Analysis of the data using grounded theory method (see below)

c. Comparing the themes obtained using grounded theory to factors of coping identified in the literature to explore coping strategies in South Asian Muslim immigrants

3.1 Research Question

In the previous chapter, the literature review shows that coping is constructed through various internal and external sources (Richardson, 2002). The internal sources of coping can be self-esteem, confidence, knowledge and awareness and its external sources can be social networking, family support, community resources and spirituality. Moreover, cultural dynamics (Cohler, 2000; Wong, Wong, & Scott, 2006) and contextual factors (i.e., role of family members) also play a vital role in coping (Bartelt, 1994; Brice-Baker, 2005). My main research question was:

What sources lead to coping of South Asian, Muslim immigrants in the GTA who have faced acculturation challenges and depression?

The sub questions that helped me to answer this question were:

1) What are the internal sources of coping in the target population?

2) What are the external sources of coping in the target population?
3) What, if any, is the interaction between internal and external and other sources of coping (i.e., cultural and contextual) in the target population?

3.2 Eligibility Criteria and Screening of Participants

For qualitative studies, an appropriate sample size is the one which can answer the research question (Sandelowski, 1995). There is no set criterion for the accurate sample size in qualitative studies; it is more important to generate meaningful information from research participants and to elicit observational and analytical skills of the researcher rather than the size of the sample (Patton, 2002). For this study, I used theoretical sampling in which data collection continues until sufficient data is gathered to answer research questions and to allow a grounded theory to emerge (Cohen, Manion, & Morrison, 2007; Glaser, 1992). I interviewed 13 participants using a semi-structured questionnaire and their responses helped me to work on developing various themes and sub-themes. In addition, I have attempted to recruit an equal number of male and female participants (Females= 7 and Males= 6) in order to comply with gender equity issues so that the data is not saturated with only one gender’s specific acculturation challenges, mental health issues and coping strategies. Later, participants’ responses were compared and contrasted with one another to explore further my research questions in regards to coping strategies in South Asian Muslim immigrants.

Participants needed to meet the following recruitment criteria: first generation immigrants from India or Pakistan; Muslim males or females, been to Canada for more than three years and less than 5 years; residing in the Greater Toronto Area (GTA); within the age range of 18-55 years; Canadian citizens, landed immigrants, convention refugees, refugee claimants; able to communicate in Urdu, Hindi, Punjabi or English; and have experienced depression during their acculturation process but somehow managed their depression during the
specified time period (between 3 to 5 years of immigration), However, at the time of participation in the study, depression was not reported. The Depression checklist was used to screen participants for depression during their process of acculturation by recalling their experiences as well as at the time of participation in the study (see attached Appendix F)

These recruitment criteria were well-connected with my research questions and helped me to investigate and further compare and contrast coping skills in participants and to generalize findings to this specific cultural group i.e., South Asian Muslim immigrants meeting the above mentioned criteria.

3.3 Measures

In the present study, three measures were used for data collection. These three measures were: Demographic Information Questionnaire, Depression checklist and Semi-structured Interview.

3.3.1 Demographic Information Questionnaire (see Appendix F)

Demographic Information Questionnaire was used to collect demographic information about participants which included: pseudonym (chosen by the participants), gender, age, education, socio-economic status (income range), marital status; number of children (if applicable), preferred language: English/Hindi/Urdu/Punjabi, country of origin, relatives/friends in GTA/Canada (support network in Canada), and number of years living in Canada.

The above mentioned demographic questions helped me to study in detail coping skills in participants. As discussed in the previous chapter, demographic information of internal and external factors of coping was collected from the participants such as internal factors: age, education, language skills, socio-economic status and number of years in Canada; and external factors: children, married/partner in Canada and relatives/friends living in Canada.
3.3.2 Depression Checklist (see Appendix G)

A checklist was used to assess depression level of participants to determine if they met the inclusion criteria of the study. This checklist was based on the Beck Depression Inventory II (Beck, Steer & Brown, 1996), and participants were asked to describe details of their depression in a narrative manner. This checklist was administered twice: first to assess if participants were experiencing depression during their acculturation process through recalling their experiences; and second to assess if participants were experiencing depression at the time of participation in the study. Those who were experiencing depression during their acculturation process but not at the time of participation in the study were included in the research provided if they met the rest of the inclusion criteria.

3.3.3 Semi-structured Interview (see Appendix H)

Semi-structured interviews (60-90 minutes) were used to collect information about the South Asian Muslims’ experiences and acculturation process living in the GTA. In the present study participants were provided details of the interview in the form of an information letter as well as a consent form about the interview i.e., what it will be ‘for’ and what the ‘task’ for the interviewee will be (Potter & Hepburn, 2005). If participants needed any further information regarding the purpose or use of the data, it was made available to them.

I formulated questions after conducting a detailed literature review (e.g., Arthur & Collins, 2005; Berry, 1997, 2001; Khan & Watson, 2005; Osmun & Allen, 2001; Yeh et al., 2008) and discussion with other experts in the field (e.g., thesis supervisor and thesis committee members). The interview questions were developed using three themes: acculturation experiences, depression, and coping. The semi-structured questions offered flexibility to participants to respond freely and openly based on their personal experiences. In addition to English, the
questionnaire was translated into Urdu and Punjabi by me and reviewed by independent people with expertise in English as well as Punjabi and Urdu. These translators also have counselling experience in local community centres (see Appendices I and J).

3.4 Recruitment Procedures

Upon approval from the University of Toronto, Office of Research Ethics, I started the recruitment process for my study. I used purposive sampling to include those participants who fit into the recruitment criteria as outlined above. The request for research participants was made through various sources such as local community centres serving South Asian Muslims, religious places, recreation centres, and academic institutes and so on (see Appendix B). Among these sources, those who agreed to support the study by participating in the recruitment process were called “recruitment partners.” Copies of a flyer were sent to these recruitment partners for posting purposes (see Appendix C). These recruitment partners were asked to post the flyer to connect the interested individuals with the researcher. Those who were interested in participating and/or needed more information were requested to contact the researcher. The detailed information of the research study was provided to them which included the benefits and risks of participation. The detailed information included: purpose of the study, criteria of (voluntary) participation, confidentiality issues, and implications of participation in the study, such as risks and benefits of participation (see Appendix D). Those who met the recruitment criteria and were interested in participating in the study after collecting detailed information were included in the next step of the recruitment process, consent process.

3.5 Consent Process

As mentioned above, an information letter (see Appendix B) about the study was sent to the sources serving the South Asian Muslim community such as local community centres, places
of worship, recreation centres, and academic institutes. Recruitment partners were provided copies of the flyer to post for recruiting purposes (see Appendix C). The prospective participants who showed an interest in participating and/or needed more information about the study were asked to contact the researcher. I booked time with them individually to discuss details of the research study (see Appendix D). After receiving detailed information of the study, those who met the inclusion criteria and were interested to participate in the study, were included in the consent process. They were further informed about the consent details (see Appendix E). If they required any additional time to think about or consult with someone about the study then they were provided with the additional time. Once they agreed to participate and were willing to sign the consent form, they were welcomed to participate in the study. As a researcher, I was clear that their participation was voluntarily and they could withdraw any time or choose not to answer any question if they did not feel comfortable to do so. If any participant wanted to withdraw, he/she could inform me and the audiotapes, interview material; questionnaire would have been destroyed and would not be included in the data analysis, subsequent publications, meetings and presentations. I did not receive any request from participants to withdraw from the study after giving consent for their participation.

The interviews were conducted from the beginning of April 2010 to end of September 2010 at various community sites where participants felt comfortable such as libraries, community centres, schools and community organizations. I made sure to book a private space in these sites so that participants could respond to the questions both comfortably and privately. These interviews were recorded and then transcribed within two weeks of the interview. Since all of these interviews were conducted in Punjabi, Hindi and Urdu languages, after their transcription they were translated into English by me. All of the interview recordings were
erased after two months of the interview. All of the related research information was stored under lock and key at a secure and confidential place for two years after the study. After two years of the study, tapes, electronic files, and hard copy materials would then be deleted and disposed of in a confidential waste.

3.6 Data Analysis

The following data analysis processes are used:

3.6.1 Analysis of the interview data using grounded theory method

In the study, I have used grounded theory for the interpretation and analysis of data (Henwood & Pidgeon, 2003; Strauss & Corbin, 1994; Glaser & Strauss, 1967) to explore various acculturation challenges, mental health issues (depression) and coping strategies (resilience skills).

Grounded theory plays a critical role in generating theory from qualitative data. In grounded theory the criterion of judgment is based upon the actual strategies used for collecting, coding analyzing, and presenting data when generating theory (Glaser & Strauss, 1967). Grounded theory is an intertwining of research process (i.e., detailed and flexible interrogation which is grounded-in the data) and outcomes (i.e., theory) (Henwood & Pidgeon, 2003). Ground theory analysis is based on the process of inductive reasoning which addresses the gap between theory and empirical research (Glaser & Strauss, 1967). According to Glaser (1992), “this methodology of analysis [grounded theory] will not be for the production of forced, preconceived full conceptual description” (p.11). Thus, a grounded theory neither supports any pre-conceived conceptual framework nor reifies to analyze the data. It is important that a researcher using grounded theory method should understand the data as it is without framing it with any pre-conceived notion and to observe the data for further analysis and conceptualization.
A researcher arrives at a grounded theory by several times going back and forth from data to conceptualization of theory to ensure that emerged grounded theory is ‘fit’, ‘workable’, ‘relevant’ and ‘modifiable’ (Henwood & Pidgeon, 2003; Glaser, 1992). If a grounded theory is embedded into the data and generated after careful inductive process, then it will fit within the area of study and be workable and relevant. Furthermore, a well constructed grounded theory will not be rigid but flexible enough to modify depending on the possibility of new data and other changes.

The methodological approach of the grounded theory also met the needs of the present study because of its flexibility to accommodate and categorize a variety of qualitative responses to develop a theory from the research data. Through careful data analysis, I developed themes, sub-themes and categories through several times back and forth interplay with the data and conceptualization (Strauss & Corbin, 1994).

3.6.2. Comparing and contrasting the themes obtained from data using grounded theory method

I compared and contrasted the theme and sub-themes which emerged through participants’ responses to the study questions. Glaser and Strauss (1967) explained the four stages of this process: “(1) comparing incidents that are applicable to each category; (2) integrating categories and their properties; (3) delimiting the theory; and (4) writing the theory” (p.105). For this study, I started with the open-coding process to understand the details of the data. I coded all of the responses with different colours and categorized under different themes. Then through constant comparative coding, I compared and contrasted these categories and themes with one another many times for conceptual similarities and differences to develop several themes. The themes and categories were named based on the existing literature and language of the
participants in the study. Once I developed the themes, I returned to the transcripts to see if they were more generally applicable to the data i.e., participants’ responses. This process of movement from the themes to the data was replicated many times to develop themes and their relationships to one another. According to Glaser (1992) “For grounded theory first we collect the data in the field and then start coding, constantly comparing incident to incident and incident to codes, while analyzing and generating theory” (p. 32).

The constant comparative analysis helped me to explore the conceptual relationship between the themes and categories. Through the theoretical coding process, I was able to understand the conceptual relationships between themes and their properties based on similarities and dissimilarities of participants’ experiences. In addition, this process helped me to discover the underlying patterns to answer my research question. According to Glaser (1992):

> Analysts should be wary of the difference between (1) just labelling an act, which is not a method in grounded theory, and (2) conceptualizing a pattern among many incidents. The result sought in grounded theory is a small set of highly relevant categories and their properties connected by theoretical codes into an integrated theory. (p. 42)

Further to constant comparative analysis, I also used some additional strategies such as reviewing the existing literature, and consulting other professionals in the field including my research supervisor and thesis committee to move analysis from descriptive (data observation) to a more theoretical level. According to Henwood & Pidgeon (2003):

> The core processes of generating grounded theory exhibit both linear and iterative qualities, reflecting both the ongoing flip-flop between data and conceptualization . . . the fact that research design with grounded theory is emergent rather than inexorably fixed in advance. (p. 136)
Eventually, through constant comparative analysis a midlevel grounded theory of coping to depression and acculturation hardships in South Asian immigrants was emerged. This process was iterative even though various linear steps have been outlined.

3.7 **Researcher as an Instrument**

According to Potter and Hepburn (2005), interviewers are not always aware of the extent to which their personal interaction factors influence the interview process. Not only interactional factors but also the interviewer’s personal characteristics, insider status (sharing cultural, religious and ethnic background with participants), perceptions and experiences may affect the interview process. In addition to the interviewer’s personal characteristics and interactional factors, changes may also occur in participants over time. It is important for a good qualitative research to pay attention to this change and understand the process of change rather than considering human behaviours or thinking styles as fixed entities (Parker, 2004).

In the present study, the strategies used to deal with some of the above mentioned biases were: writing in a notebook and consulting with literature, counsellors, colleagues and committee members (triangulation/expert review).

3.7.1 **Writing in a Notebook**

I kept a notebook to record any observations and document any thoughts and ideas that come into my mind during the interview process. These thoughts and ideas were reviewed to see if they should be included in the study. Moreover, interviews were audio recorded so that I could pay more attention to the participants’ actual words, my response to their comments, and our dynamic interaction. After transcribing the interviews, I re-read them several times to ensure that my initial experience of the interview process, as recorded in my notebook, did not carry more weight than the participants’ responses. However, my observations and records of
interaction between me and participants further helped me to understand participants’ responses and emotional experiences when they were relating with their acculturation hardships, mental health issues and coping strategies.

3.7.2 Consultation with literature, counsellors, colleagues, and committee members

I have used more than one source to review and analyze the data to reduce any biases in the research, i.e., multiple analysts were consulted to review the results of this study once I have generated the codes. These analysts include: my research supervisor, thesis committee members and other professional working in the field. These analysts have knowledge of the field of immigrant issues, knowledge of the population, and methodological expertise. This approach helped me to become aware of my biases and allowed me to reduce the likelihood that they could negatively impact the findings. As a person sharing the same cultural and religious background as the participants, it was important that I was aware of my insider status. However, as a researcher, I simultaneously held an outsider status. My thesis committee members reviewed the research process and its findings to enhance credibility. Once the data was analysed, themes and sub-themes were developed it was further reviewed by my supervisor and thesis committee members. Moreover, it is also important that the researcher needs to consider all the contextual factors such as participants’ non verbal responses, emotional expressions and other behavioural observations that might influence the data and research findings and report them in the study. I have included these contextual factors, my personal observations and any thoughts/ideas that come in my mind while interviewing in the discussion of the analysis and interpretation of data. In the next chapter, I discuss the results of the present study.
CHAPTER 4

Results

The present study investigated the process of acculturation and coping for South Asian Muslim Immigrants living in the GTA and a midlevel theory was developed based on the participants’ responses and grounded theory analysis which helped me to answer the research question: what sources lead to coping of South Asian, Muslim immigrants in the GTA who have faced acculturation challenges and depression? Through participants’ responses, it was revealed that they experienced acculturation hardships and depression after immigrating to Canada. Then, they had turning points in their lives which motivated them to seek various coping strategies to deal with their acculturation hardships and depression and to become acculturated and settled. In this chapter, I explain the characteristic of sample and research findings in detail.

4.1 Characteristics of Sample

Only those participants who met the inclusion criteria were included in the study (see Table 1). All of the participants were between 18-55 years of age, first generation Muslim immigrants from India or Pakistan and were currently living in the Greater Toronto Area (GTA). These participants immigrated to Canada under various categories which included family class assisted relatives, convention refugees and refugee claimants. They had been living in Canada for more than three but less than five years. All of the participants reported that they became depressed as the result of acculturation hardships but they managed to cope with their depression during the specified time period (between three to five years following immigration). At the time of participation in the study, they did not report any depression and preferred to respond to the interviewer in their first languages i.e., Urdu, Punjabi and Hindi. Full details of participants’ demographic information are available in the Table 1.
The average age of participants was 38 years, with the youngest being 19 and the oldest being 53 years of age. There were 13 participants in total which included 7 women and 6 men. Nine participants were married and living with their spouses and two were single and two were divorced. The ages of their children ranged from 2 to 21 years. Seven participants immigrated to Canada through family class sponsorship, five through independent professional class and one as a refugee. Five of them were working at full-time jobs, one at a part-time job, four participants were students, two were homemakers and one was not employed at the time of the interview. Four participants had Masters’ degrees; three had engineering degrees, and the remaining six participants had Doctorate in Psychology, Bachelor of Arts, Bachelor of Pharmacy, Bachelor of Medicine, grade 12, and grade 10. Eleven interviews were conducted in Urdu and only two in Punjabi. Eleven participants emigrated from Pakistan and two from India.

The details of demographic description of individual participants are described as follows:

1. Amna is a 35-year-old female participant who emigrated as a landed immigrant from Pakistan four and a half years ago with her husband and two daughters. She has two masters’ degrees from Pakistan and is presently attending English classes. Her preferred language is Urdu.

2. Fatima is a 39-year-old female participant who came from Pakistan four years ago after her marriage with a Canadian citizen. She was a medical doctor in Pakistan and is presently working towards the accreditation of her academic degrees. Her preferred language is Urdu.

3. Ali is a 45-year-old male participant who emigrated from Pakistan under the professional category with his wife and two children four and a half years ago. He was a professional
engineer in his home country and is working as a taxi driver in Canada. His preferred language is Urdu.

4. Osman is a 43-year-old male who arrived in Canada as a refugee with his wife and two children three years ago. He was running his own farming business in Pakistan, and is working as a taxi driver in Canada. His preferred language is Punjabi.

5. Doctor is a 26-year-old male participant who immigrated to Canada four years ago with his parents and four siblings. He was a medical student in his home country and completed his Master’s degree in pharmacy in Canada. He has taken a few part-time courses for his professional upgrading and is also looking for a job. His preferred language is Urdu.

6. Sunny is a 19-year-old male who emigrated from Pakistan with his parents and two siblings four years ago. He was a student in Pakistan and is also attending a high school in Canada. His preferred language is Urdu.

7. Rita is a 42-year-old female participant who came from Pakistan as a professional immigrant. She is single and has no children. Rita was working as a school principal in Pakistan and is teaching in an Islamic school in Canada. Her preferred language is Urdu.

8. Iman is a 41-year-old male participant who immigrated to Canada under a professional class with his wife and five children three years ago. He was working as a pharmacist in Pakistan and is working in a factory for a general labour in Canada. He is also working towards attaining his licence to practice as a pharmacist in Canada. His preferred language is Urdu.

9. Fowad is a 53-year-old male participant who immigrated to Canada under the professional class with his wife and four children three years ago. He was an engineer in Pakistan and started working as a security guard on a part-time basis in Canada. Due to health
difficulties, he is not able to resume his work and is currently unemployed. His preferred language is Punjabi.

10. Sara is a 29-year-old female who immigrated to Canada three years ago after her marriage to a Canadian citizen. She was an engineer in Pakistan and is working as a security guard in Canada. After immigrating to Canada, her marriage did not last long and she filed for a divorce after a few months. At the time of participation in the study, she was divorced. Her preferred language is Urdu.

11. Rahat is a 29-year-old female who immigrated to Canada three years ago after her marriage to a Canadian citizen. She was a university teacher in Pakistan and is pursuing her doctorate degree in Canada. She has a 2-year-old son. Her preferred language is Urdu.

12. Amina is a 43-year-old female who emigrated from India with her husband four and a half years ago who was accepted under the professional class. She was a homemaker before coming to Canada and has two children. She started working in a factory after her immigration to Canada. Her preferred language is Hindi.

13. Perveen is a 45-year-old female who also emigrated from India under the professional category with her husband and two children. She has a doctorate degree in psychology and was involved in teaching as well as clinical work in India. She is working as a settlement worker in Canada. Her preferred language is Hindi.
<table>
<thead>
<tr>
<th>Pseudo Name</th>
<th>Gender</th>
<th>Immigration Status at the time of migration</th>
<th>Current Occupation</th>
<th>Age</th>
<th>Education From country of Origin</th>
<th>Annual Family Income</th>
<th>Marital Status</th>
<th>Length of Stay in Canada</th>
<th>Preferred Language</th>
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<td>Urdu</td>
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<tr>
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<td>Landed</td>
<td>Homemaker</td>
<td>39 y</td>
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<td>30,000-40,000</td>
<td>Married</td>
<td>4 yrs.</td>
<td>Urdu</td>
</tr>
<tr>
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<td>45 y</td>
<td>Bachelor of Eng.</td>
<td>20,000-30,000</td>
<td>Married</td>
<td>4 1/2 yrs.</td>
<td>Urdu</td>
</tr>
<tr>
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<td>Taxi driver</td>
<td>43 y</td>
<td>BA</td>
<td>20,000-30,000</td>
<td>Married</td>
<td>3 yrs.</td>
<td>Punjabi</td>
</tr>
<tr>
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<td>26 y</td>
<td>MA</td>
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<td>4 yrs.</td>
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4.2 Findings

In this section, I present the findings of this study based on the participants’ responses about their acculturation experiences during their settlement process in Canada. After facing these acculturation challenges, the participants reported subjective experiences of depression. When these participants experienced their moments of realization which they called turning points, they became aware of their capabilities which empowered them to use various coping strategies to deal with their acculturation challenges and consequent depression. Through using these coping strategies, they experienced a sense of belongingness to Canadian culture and eventually became acculturated and settled in Canada. I have used the grounded theory analysis for interpretation and analysis of the data. Participants’ responses are categorized into three key areas: acculturation challenges, becoming depressed and coping and becoming acculturated: settlement and belonging. These three key areas are further divided into themes, sub-themes and categories (see Figure 1). Themes, sub-themes and categories are developed based on the conceptual and experiential similarities of most of the participants’ responses which are further categorized and elaborated by participants’ quotes. I discuss detailed analyses of the key themes, themes, sub-themes and categories in the subsequent section.
Figure 1. Model for the Process of Acculturation and Coping for South Asian Muslim Immigrants living in the GTA

Process of Acculturation and Coping for South Asian Muslim Immigrants living in the GTA

Acculturation Challenges
- Feeling Different
- Feeling Excluded
- Disruption in the Family
- Material Differences

Becoming Depressed
- Subjective Experiences of Depression
  - Pain
  - Emotional Turmoil
  - Loss of Pleasure
  - Absent Mindedness
  - Worthlessness
  - Sadness
  - Hopelessness

Coping and Becoming Acculturated: Settlement and Belonging
- Turning Points
  - Internal Turning Points
    - Rediscovering oneself
    - Standing up for others
    - Restoring through prayers
  - External Turning Points
    - Following the example of others
    - Getting Canadian Credentials and Finding employment

Becoming Empowered
- Finding Strength in Religion
- Extending Social Connections
- Reaching out to Community

Looking Inside and Exploring Strengths
Closeness to Cultural Roots
Learning the English Language
Having Faith in God
Praying to God
Support from Family and Friends
Finding Strength in Religion
Community Organizations
Support of Canadian Government to Newcomers
I. **Acculturation Challenges**

In this study, the key theme of acculturation challenges highlights the difficulties, and challenges that the participants faced after coming to Canada. It is difficult to completely separate the themes of participants’ experiences as they overlap and are interconnected and experienced simultaneously. In order to organize the data through grounded theory analysis based on the similarities of the participants’ responses and existing literature, four themes are identified: Feeling Different than Others; Feeling Excluded; Disruption in the Family; and Material Differences (see Figure 2). I discuss each of these challenges in the subsequent sections.

**Figure 2. Themes Related to Acculturation Challenges**

![Diagram showing the themes related to acculturation challenges](image)

A. **Feeling Different than Others**

Participants explained their feelings of being different than others during their struggle to acculturate themselves within Canadian culture. This theme, Feeling Different than Others, provides an account of how participants were feeling different, isolated and segregated from other people both socially and culturally while living in the GTA. The theme of Feeling Different than Others can be further divided into four sub-themes which includes: Feelings of Emptiness in an Unfamiliar Environment: ‘Alone and culturally different’; Loss of Social Status: ‘No
value, no respect here’; Unfamiliar Cultures and Unfamiliar Faces: ‘Fear of loss of identity’; and ‘Halal and Hijab: ‘A big challenge’ (see Figure 3).

**Figure 3. Sub-themes of Feeling Different than Others**

1. **Feelings of Emptiness in an Unfamiliar Environment: ‘Alone and culturally different’**

Participants described a variety of personal experiences in the process of connecting with the larger society after their immigration to Canada. They revealed a number of hardships exhibited through mental, social and physical symptoms which added to their settlement difficulties. They were feeling afraid of going out publically and for most of them, there was a strong sense of being ‘different from others.’ In addition, they were unfamiliar with Canadian customs and traditions which restricted their social life and caused emotional disturbances for them. For example, some participants reported that they used to stay home all of the time and were feeling isolated and segregated from the rest of the world because they had no relatives or friends to socialize with after immigrating to Canada. During that time, they also compared their life in Canada with the one they used to enjoy back home.

The participants of the study explained their experiences of ‘isolation’ where they had limited or no contact with the larger world and felt segregated and isolated from the rest of the world. Some participants could not label their experiences and reported that they felt as if they
were feeling ‘dead’ or ‘emotionless’ after immigrating to Canada. Even though the intensity of these mental and social experiences varied among participants, most of them considered these experiences as ‘mentally torturing’ and ‘emotionally overwhelming.’ Participants’ experiences elucidate the difficulties in interacting with others and developing social relations in the initial process of acculturation. In particular, almost all of the participants elaborated on their social and cultural difficulties in adjusting to a Canadian lifestyle. Participants shared that they experienced ‘stress’ when they were in social and cultural settings with others as a minority group during their post-settlement period. Iman explained his stress in the following way:

Nothing felt good at that time . . . there were strange feelings of emptiness after coming to Canada and finding a socially and culturally different lifestyle . . . it was stressful to go out and meet with other people who were culturally different . . . I used to stay alone and had a low mood most of the time.

The first sub-theme of Feelings of Emptiness in an Unfamiliar Environment reflects most of the participants’ experiences of isolation which were perpetuated in a number of ways. For example, several participants identified the traditional ways that they lived in their home countries which changed as the result of immigration. It was difficult for them to cope with their ‘different’ and ‘completely changed’ lifestyles due to immigration, and they preferred staying home and being isolated from the outside world. For example, Amna elaborated on her experiences in the beginning of her immigration to Canada. She described that she preferred to keep herself segregated from others due to lack of familiarity with her new surroundings:

I had a fear that I came from a certain environment and culture and it was completely different here. I could not go out for a whole year . . . my husband had to go out for work
and I stayed home alone with my young daughter. It was very stressful to stay alone but I did not know what to do.

Rita explained that her emotional experiences were intense and stressful after immigrating to Canada and she felt isolated in an unfamiliar environment around her:

When I came here, I had some plans but due to the hardships and feelings of isolation I could not sustain my interest in doing anything. I felt as if I was going to collapse due to being socially segregated . . . there were many days when I was completely alone when I did not receive a single phone call or called anyone else and I felt as if I was cut off from the whole world . . . it seemed that I was living in a dead land.

Participants reported feeling isolated and missing their family members in their home countries. Many participants explained that they had no one with whom they could socialize as their relatives and friends were in their home countries and the outside world seemed 'strange' and 'cold' to them. Their feelings of isolation due to absence of family members were stressful for them which kept them further away in forming social relations after their immigration to Canada. Like many other participants Amina described her experiences of social isolation because her immediate family was not with her:

Here [in Canada] the whole world was different. We used to live together in India . . . I never felt so bad like here. We had no relatives or Muslims living close by here . . . it seemed like a new world with different people; we were like strangers to them . . . there was no social life; everything was barren . . . I was confused what to do?

Sara expressed similar emotions to Amina’s that due to lack of family support she was not able to connect with the outside world and felt cut off:
I felt low after coming to Canada because obviously it was not the same here; I was missing my own family to support me; days seemed to me like years as time was stuck somewhere. I used to cry a lot and did not know how to connect with the outside world . . . I was completely cut off from the outer world.

Participants’ experiences of social isolation increased as their experiences of immigration challenges became intense and they were more time away from their loved ones. For example, Ali expressed that he was emotionally disconnected from the outside world because his social reference group was drastically changed:

Being away from social context was difficult to tolerate; our social relations were left behind; emotionally we were suffering due to their loss but physically we were living here. It was very stressful and socially isolating.

Like Ali, Rahat also expressed her sadness and lack of confidence if she would ever be able to see her relatives whom she had left in her home country. These feelings of uncertainty were stressful for her and caused social isolation in a new land:

There were many challenges in the sense that you were far from your roots and your loved ones. I came to Canada soon after my marriage and was not able to see my parents after that. It did not feel good and I was not sure if I would see them again. It was heartbreaking . . . my feelings of uncertainty led to lack of interest in my surroundings and I became socially isolated.

All participants explained experiencing intense feelings of social isolation due to living without their loved ones and their social and cultural groups. Isolation and hardships of settlement made life so difficult for them that they were stressed and lacked motivation to move on in their settlement process. Furthermore, they described their personal experiences of social
isolation which caused mental and emotional stress and impeded their process of acculturation to a great extent. For example, Rahat was a lecturer in a college and had a huge circle of friends and other colleagues to socialize with. After immigration to Canada, she felt as if she would never be able to interact with others due to feeling emptiness in an unfamiliar environment around her:

I was feeling reluctant to go out and used to feel unsafe from the outside world. Back home I used to have connections with the whole town, but after coming here nobody knew me; I believed it was possible that they [people in public] would misbehave with me. I had no confidence to go out and see the world outside of the four walls of my house. It was distressful for me . . . I felt helpless at that time.

Perveen was also reluctant to go out and socialize with others and she associated her difficulties with the ‘bad’ and ‘humiliating’ work environment:

I was desperate to find any kind of job due to financial difficulties . . . the way factory supervisors used to treat me, felt as if I was in the wrong place. These feelings led to low self-respect in me. These feelings caused my further inhibition to integrate with others and I used to feel depressed.

Like Rahat and Perveen, many other participants also expounded on their personal experiences of being strangled by the feelings of worthlessness and helplessness which led to their personal challenges. For example, Rita expressed her experiences in the following way:

It seemed there was nothing left in my life . . . I was like a statue with no self-respect and no confidence to move on . . . I was cut off from everyone and at the same time there was a strange emptiness in me . . . lifelessness . . . no confidence in myself.
Like Rita, most of the participants’ stories illustrated the way they felt socially isolated and experiencedemptiness in an unfamiliar environment. These internal feelings were generated from their lived experiences of social isolation in an unfamiliar environment during the process of adaptation to life in Canada which led to stress and further developed into depression.

2. **Loss of Social Status: ‘No value, no respect here’**

Most of the participants expressed their concerns about the loss of Social Status after immigrating to Canada which was completely the ‘reverse’ than what they were enjoying in their home countries. After their immigration, they found themselves at a lower rank of social status which was painful and heart breaking for most of them. For example, Perveen expressed her sentiments due to loss of social status as follows:

> Before coming to Canada, I was feeling proud of myself belonging to a high class family enjoying a high social status . . . I had helpers to assist me in household chores but here I had to do everything myself . . . even to clean my own washroom too. I felt like an ant on the wall . . . no value, no respect after coming to Canada . . . I lost my self-respect with the loss of social status.

Like Perveen, Rahat was also stressed due to changes in her social status and considered it a hard way to pay the price for leaving her country. She was feeling inferior compared to the others around her and felt ashamed of calling anyone to her home or to meet with her acquaints. She described changes in her social status as being ‘dropped from top to bottom’ which was emotionally disturbing and mentally unacceptable for her:

> I was ashamed of the change in my social status, in my financial status, actually change in everything . . . I did not want to meet with anyone whom I knew from my home country . . .
it was a shame for me that others see me in such a bad condition where I had no value.

Without any value in this society, I felt as if I was floating . . . no recognition, no respect.

Perveen and Rahat and many other participants were feeling distressed that they lost their social status due to changes in their contextual world which added further hardships to their acculturation and settlement process in Canada. Many participants associated loss of identity and respect with loss of social status. For instance, Ali expressed his challenges in the following way:

I lost my identity after coming to Canada. In my home country, I was having a respectable job and also people around me used to respect me and value me . . . after coming to Canada, I lost my self-respect, my identity and my respect . . . my job, my social status . . . here, I am a taxi driver . . . a lower item of the social hierarchy. I ask myself a question, what I gained after coming to Canada . . . nothing gained but lost everything.

Like Ali, Iman also expressed his ‘sense of loss’ with the loss of social status:

I was feeling ashamed of myself in front of my family, and everyone around me. It felt as if I was hanging up in the air and I lost my grounds . . . in this strange world, I was strange to myself and ranked low in the social set up . . . no power, no value.

An in-depth analysis of participants’ responses revealed that they associated their loss of social status with the loss of self-respect and were upset due to their changed position in the society. All of them felt the ‘change’ in their social status was one of the main challenges to coping which generated many other associated acculturation challenges and mental health difficulties such as lack of confidence, low self-esteem, and lack of interest in daily life.
3. Unfamiliar Cultures and Unfamiliar Faces: ‘Fear of loss of identity’

Many participants in the study revealed their challenges with unfamiliar cultures and unfamiliar faces. The sense of unfamiliarity expressed by most of the participants depicts those cultural contrasts that immigrants faced between their own culture and Canadian culture following their immigration to Canada. Participants’ narratives revealed ongoing cultural compromises as they adapted to life in Canada and made adaptations to their culture, traditions, food, clothing and overall lifestyles. Furthermore, the fear of amalgamating in Canadian culture elucidates hardships of immigrants fitting into the multicultural environment of the GTA. In particular, many participants reported that they came from Muslim populated areas of their homelands and they never felt alone or different from the ‘others’ in back home because they belonged to the majority group; however, after coming to Canada they developed a strong sense of ‘being different’ than the ‘others’ as they were in minority. These feelings of ‘being different’ kept them further away from mixing with other cultural groups as they wanted to protect their cultural traditions. Furthermore, they felt that there was ‘no place’ for their cultural traditions and festivals to be included within the mainstream Canadian culture. Amna explained that she was extremely protective of her culture and thought that her culture would be ‘spoiled’ by mixing with the others in a multicultural context. As a result, she preferred not to ‘mix up’ with the others:

I had strong feelings of protecting my cultural and traditional values which could be easily spoiled by mixing with the Western culture and other non-Muslim cultures . . . the other cultures were so different than ours . . . I felt myself landed on a strange world . . . it was very stressful.
For other participants like Sunny, Sara and Ali mixing with a range of cultures different from their own cultures was a big challenge as they had no prior experience of living with other cultural groups in their home country. Sunny expressed his experiences in the following way:

When we came to Canada, we had to face people from different communities; they came from different cultural groups, speaking different languages. It was difficult for us to understand their cultural traditions . . . so there was a cultural gap. We were stressful to see these differences but it was too late, we could not do anything except staying apart from other cultural groups . . . there was a fear of unknown.

Sara shared her fears to mingle with other cultural groups due to the stereotypic information conveyed to her about them. She preferred to keep herself away from those other cultural groups in order to protect her perceived safety:

I used to feel very uncomfortable after coming to Canada, sometimes people used to scare me that other people were different here especially black people. I was warned not to mix up with other people [from other communities], they could easily harm me; just avoid them. I used to get horrified after seeing black people and then tried to stay close to my own people [from the same cultural and ethnic community]. I stayed under this fear for a long time. It was very stressful.

Ali was concerned about the protection of his own cultural identity which he thought would be lost while extending relations to the other cultural groups:

It was extremely stressful to mix with other people who were from so many cultures . . . I used to cry to see unfamiliar cultures and unfamiliar faces around me. I felt as if my identity was lost.
Not only the presence of different cultures, but also the lack of recognition of one’s cultural and religious festivals caused distress in most participants. For example, Amina became sad when she had to celebrate Eid with only her immediate family [husband and children]. Eid was a big celebration in her home country and she used to shop for special dresses and cook special food to celebrate with the whole neighbourhood. She enjoyed performing prayers with other Muslims, meeting with her parents and other relatives and sharing festivities of Eid with the whole neighbourhood. After her immigration, when she had to celebrate Eid for the first time in Canada, she felt different as the rest of the majority of people were not celebrating Eid:

At that time, everything felt bad. Here [in Canada] we were not able to celebrate our festivals such as Eid or any other celebrations in the same way as we used to; our festivals did not seem connected within Canadian culture. I used to cry on our Eid day. I had to go to work on Eid, just imagine even on an Eid. I felt sorry for my children too because they were feeling the same and I had a strong sense of loss as if my identity was lost in this multiculturalism.

For many participants unfamiliar cultures and unfamiliar faces around them were difficult to ‘accommodate’ as they had never lived in a multicultural environment with other religious and/or cultural groups in their homelands. For example, Rita explained her concerns about ‘amalgamating’ her culture with the other cultures:

The concept of diversity was very strange for me . . . we were expected to leave our culture, traditions and religious values to merge into the others . . . then what would happen to our cultural identification . . . I always thought that we would be lost in the mist of unfamiliar cultures and unfamiliar people . . . usually my discussions ended into heated

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15 Eid is a time of happiness and congregation with the whole Muslim community. Muslims celebrate Eid three times a year: Eid al Adha (after Hajj of Mecca); Eid ul Fitr (after Ramadan); and Eid Milad un Nabi (birth of Prophet Mohammad Peace be upon Him).
debates where we [immigrants] were expected to leave our past and adopt the others’ culture.

All of the participants discussed their difficulties accommodating with unfamiliar cultures and unfamiliar faces around them because they were fearful that their own cultural traditions and values would be lost in the unfamiliar cultures. These difficulties caused distress and created hurdles in their adaptation process as they felt themselves isolated and at an unprivileged status from the mainstream population specifically ‘whites.’

4. ‘Halal and Hijab: ‘A big challenge’

Twelve out of thirteen participants stated that they faced difficulties in finding Islamic food and using Islamic attire after their immigration. Muslims are obligated to follow Muslim dietary rules [food as recommended by Islam]\(^\text{16}\). For example, it is highly important for Muslims to eat Halal food and to stay away from prohibited foods as explained by their religion\(^\text{17}\). Before immigrating to Canada, many participants expected to face difficulties adjusting to changes in language and climate, but they did not expect that it would be difficult for them to find Halal food as they had no prior experience of living in a non-Muslim country. After immigration, they realized that unavailability of Halal food caused stress and hardships. Difficulties related with Halal food left them with limited eating choices, and they were extra careful with what they were eating i.e., Halal or non-Halal which caused challenges during their acculturation process.

In addition to finding Halal food, many participants reported that reading food labels was a challenge for them. For example, Sunny was in his teens when he came to Canada with his

\(^{16}\) Islam has laws regarding which foods can and cannot be eaten and also on the proper method of slaughtering an animal for consumption. The rules and regulations of Halal food are clearly explained in the Holy Quran.

\(^{17}\) According to the Holy Quran, prohibited foods for Muslims include pork, blood, Animals slaughtered in the name of anyone but Allah, carcasses of dead animals, an animal that has been strangled, beaten (to death), killed by a fall, gored (to death), savaged by a beast of prey (except by a human), food over which Allah's name is not pronounced (or at least not in a name other than Allah), and alcohol.
family. He described his difficulties reading food labels [to ensure that he was eating Halal food] as he was not used to reading labels back home. In his home country, he was confident shopping, because while living in a Muslim country he knew that no prohibited ‘non-Halal’ food would be sold. That reason is why he never paid attention to reading labels. In Canada, he was forced to read labels to confirm whether or not any prohibited food items were included in the ingredients:

There was a problem with food . . . Muslims cannot eat pork or non Halal food. When Muslims come here, initially, they do not know which food contains bacon, beef or so on. We were not used to reading labels in our home country because it was given that everything was Halal . . . also some people cannot even read labels. Halal food was a big problem . . . which was stressful for me.

Osman also expressed the same difficulties as Sunny about reading food labels due to his difficulties with limited English proficiency:

I had difficulties in reading food labels due to limited English language . . . I was always apprehensive before buying something that I had never used before. It was very stressful . . . my options were limited due to fear of taking something non-Halal.

As a result of facing difficulties with finding Halal food during their post-immigration period, some participants were quite apprehensive about leaving home without their ‘own food.’ They were uncertain about whether or not they would be able to find Halal food. For example, Ali shared his concerns about packing his food before going for any trip:

I think we take availability of Halal food for granted in our Muslim countries, which was a big challenge for me after coming to Canada . . . I had to travel everywhere with my food
because I was not sure for the availability of Halal food . . . sometimes it was extremely stressful.

Some participants explained that their social life became limited due to difficulties with the availability of Halal food in social settings. For example, Amina had to face taunting comments from her colleagues when she was not able to join them for any social dinning out activities:

I had concerns about eating outside; it was distressful to go out like many others living here. It was difficult for others to understand my difficulties . . . they used to think about me as I was an old orthodox person, but I could not sacrifice my religious obligations being a Muslim . . . difficulties with the availability of Halal food impacted negatively on my social life.

Many participants reported that they were forced to stay in Toronto for the availability of Halal food as moving outside of Toronto meant added difficulties in accessing Halal food. For example, Amina was living with her husband and two young children in Toronto. Her husband got a job in a small town near far from Toronto. Both husband and wife preferred to raise their children in Toronto because it was difficult to find Halal food in the area where her husband got a job:

It was difficult to find Halal food in the surrounding area where my husband got the job as there were not many Muslims living there. It was difficult to live without my husband in Toronto, but I think it was more difficult to live without the Muslim neighbourhood, mosque or Halal food. My husband lived near work during the week and returned home [Toronto] over the weekends. He had to face another migration after immigrating to this country . . . it was very sad to live without him, but our choices were limited.
In addition to facing difficulties with finding Halal food, participants expressed challenges with wearing Islamic attire in a Western Society. Female participants reported more challenges with wearing Islamic attire than male participants because males were using ‘Western-like styles’ in their home countries. Female participants used the phrase ‘traditional’ clothing, to refer to a specific article of female clothing—the Hijab\(^\text{18}\). Female participants faced two-fold challenges: difficulties wearing the Hijab and difficulties using Western attire which was not only strange for them, but also clashed with their religious and cultural values. Many female participants felt as if they were restricted to using Islamic attire specifically, the Hijab in order to acculturate with the Canadian lifestyle which caused segregation from the ‘others’ and other emotional challenges. For example, Perveen discussed her concerns about wearing the Hijab in a Western country as follows:

I think Muslim women stood out the most when they wear the Hijab. I did not use the Hijab in my home country and here I thought of using it, then I felt myself more prominent while wearing it as no one else at my work was using it. When people talk negatively about those who wear the Hijab, I feel bad about it and it causes stress in me. I think there is no support to follow Muslim attire in a non-Muslim country.

Perveen was concerned that Muslim females were victimized and targeted for criticism when they tried to follow Muslim traditions by wearing traditional attire. Consequently, Muslim females felt limited in their ability to enjoy their rights of religious freedom in Canada. Like Perveen, Fatima also shared her strong feelings of being segregated from the others when others perceived her to be strange due to wearing the Hijab:

\(^{18}\) The Hijab refers to both the head covering traditionally worn by Muslim and modest Muslim styles of dress in general. For the purposes of the present study, the Hijab is meant head covering with full body covering styles of dressing.
The whole world was different after immigration. In our home country, everyone was Muslim and it did not feel strange to use Islamic attire but here I felt different than the others . . . I felt very self-cautious when I was wearing something different than the others, they looked at me with strange eyes and it caused feelings of exclusion and segregations in me which were very stressful.

In addition to feeling restricted wearing Islamic attire, many female participants felt forced to don Western attire after immigration to Canada. For example, Amina reflected on how she felt emotionally disturbed and developed low self-esteem when she had to dress in Western clothing to go to work:

   It was a very strange and very bad experience for me; I used to think oh God! What kind of test was that for me . . . yes, it was a test that I had to wear such a type of clothing that I had never worn in my life? I never worn Western clothes and it was so unnatural to me that I used to cry. It diminished my self-esteem and social life because I was not feeling comfortable in Western clothes . . . it was one of the main problems leading to my depression.

   Amna was worried about raising her children in a Western country especially when her daughters asked her questions after seeing others dressed so openly. Mostly, she stayed at home with her daughters and used to explain them Islamic teachings i.e., how they were supposed to dress according to their religious values and cultural traditions:

   Whenever my younger daughter used to see someone openly dressed [in Western clothing], she used to look at her with curiosity and asked me mama look at her legs . . . they were naked. Then, at home I used to tell her, the way we were supposed to dress . . . it was
difficult to tell my daughters about cultural differences between us and the outside world . . . I felt myself so helpless.

Rita expressed her difficulties with the Western attire in this way:

It was so strange to see myself in different attire [Western attire] that you had never used in your life. It seemed that I was naked even after putting on the clothes . . . it was damaging to my self-esteem that I had to change myself from top to bottom to settle here . . . I could not feel myself comfortable in something that was enforced on me due to no reason . . . it was an emotionally stressful experience.

Rita felt uncomfortable when she had to wear the Western attire to go for a job interview. She felt as if she was naked because the Western attire was too revealing for her. She felt as if she was ‘caged’ in the Western clothing which was completely foreign to her. Many participants were upset to see the ‘others’, especially females, dressed so openly in the summer. Most of the participants came from Muslim saturated areas where women used to dress by fully covering themselves during all seasons. It was a sudden contrast for them to see people dressed in short dresses especially in summer. Sara belonged to a religious family in Pakistan where it was not allowed for females of her family to expose their bodies to others. When she came to Canada, she was astonished to see women wearing revealing dresses:

When I came to Canada, it was summer . . . when I saw different people around me and saw others especially ladies dressed up so openly [nakedly] then I used to close my eyes and pretended as if I was not seeing them. They looked at me with strange eyes too because they were openly dressed and I was covered from top to bottom even in the hot weather . . . I used to avoid going out in summer because it was too embarrassing to see all of this.
Like Sara, Fowad was also finding it difficult to go with his family in summer especially in local parks where women were openly exposed to the sun:

It was shameful to go out with my family during summer especially to any park . . . It was disgraceful to see people lying for sunbath almost naked . . . I had no such kind of exposure in my home country. I used to feel stressed out to bring my family to a Western country.

All of the participants talked about their difficulties related with obtaining the Halal food and conforming to Western norms of attire and were fearful that Western society would take away their traditional and cultural identification. These worries generated feelings of distress which eventually made them further depressed during their post-immigration period.

**B. Feeling Excluded**

The second theme of Acculturation Challenges is Feeling Excluded as most of the participants felt excluded from the mainstream Canadian culture due to various roadblocks they faced during their process of acculturation and adaptation. The theme of Feeling Excluded can be further divided into three sub-themes which include: Difficulties with English: ‘A major roadblock’; Foreign Qualifications and Experiences: ‘Here are valueless’; and Racism and Discrimination: ‘Painful experiences’ (see Figure 4).

**Figure 4. Sub-themes of Feeling Excluded**

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Feeling Excluded

  Difficulties with English
  Foreign Qualifications and Experiences
  Racism and Discrimination
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1. **Difficulties with English: ‘A major roadblock’**

Participants identified a range of experiences with English language difficulties that contributed to their hardships in pursuing settlement in their post migration period. They expressed that language difficulties compounded their acculturation challenges in every aspect of their life. Their challenges multiplied due to difficulties in communicating, understanding or listening to the English language. These challenges were perpetuated in a number of ways in various aspects of their initial stage of settlement in Canada such as in getting to know their neighbourhood and community resources, searching for a job, going to school, finding childcare, contacting their children’s schools, finding accommodations and developing social networks. They explained that these challenges led to further hardships and feelings of distress during their acculturation process.

Sunny reported on the way English language difficulties fostered an ‘environment of hardships’ and poor school performance for him. He was a high school student when he immigrated to Canada. Due to difficulties with language, he was not able to understand his teacher and to work on his class assignments according to his capabilities. Consequently, his grades were low:

- The biggest problem is language which almost every immigrant faces here. English is not our first language. It was also difficult in schools to adjust as those students who were good at English were able to handle their work better than us. I was not able to get good grades due to difficulties with English and it impacted my grades negatively. For me, language was a problem to make friends . . . I used to stay sad and under a lot of stress.

Fatima shared her feelings of being constrained and dependent on her husband due to difficulties with the English language:
I felt as if I was just following my husband and looking up to him to handle things for me.
I was not used to interacting in English, even though I was able to communicate in English;
I still was not used to having complete interaction in English. I used to feel sad over my
dependent condition.

Many other participants like Amina and Ali elaborated on their experiences with English
language difficulties and challenges in finding employment. They described barriers to career
development and adaptation process due to difficulties with the English language. For instance,
Amna explained her frustration due to difficulties with the English language competency which
caused difficulties in her job search process:

   English is my second language. I have done post-graduate work, actually two masters’
degrees but they were mainly in Urdu. I have problem with speaking and listening
English. I think language is a main thing; if you are able to understand conversation then
half of your confusion is gone and then you can proceed further for your job search. I
faced many difficulties in communicating with others due to the English language.

Ali also expressed his difficulties due to not having English speaking fluency and accent
which made him feel depressed because he was judged against the proficiency of his fluency and
accent rather than his capabilities to do the job.

Whoever come here as a professional have knowledge of the English language and have
vocabulary to understand English. However, they do not have fluency and accent to speak
as local people. I was refused for various job positions due to lack of fluency in speaking
the English language but I think it is not a criteria to judge someone’s professional
capabilities. This situation was very distressful and made me depressed.
Like Sunny, Fatima, Amna and Ali, many other participants expressed their challenges due to a lack of English proficiency, especially in their process of job search. For example, Osman explained a connection between his financial difficulties and problems with the English language:

After coming to Canada, due to financial difficulties I started to look for work. Due to problems with the English language . . . I faced tons of difficulties . . . I will call my initial period of settlement as ‘stressful’ and I was very hopeless that I would never be able to get a job to be settled here.

Perveen immigrated to Canada under the independent and professional category. Like Ali, she was able to speak the English language but had difficulties with fluency. She also considered difficulties with fluency as a major ‘roadblock’ in getting employment:

Even though I was able to speak English, my accent was different. In the beginning, I had difficulty to understand other people. Just imagine if I had difficulty in understanding them, then how I would respond to them. Language was one of the main tensions for me and a major roadblock in getting a reasonable employment.

In addition to facing challenges in finding employment, those who were able to get a job expressed their difficulties to perform to their maximum capacity due to limitations with the English language. For example, Amina explained her challenges as follows:

I faced many hardships due to difficulties in understanding the English language. I went to a car parts manufacturing factory. I was not able to perform my work because I was not able to understand the instructions delivered to me in English. I was insulted many times due to not being able to understand things properly. . . . it was because of limited English language skills . . . it was not an easy thing to face . . . very stressful.
All of the participants described their challenges with the English language. These challenges range from difficulties in fluency and accent to a complete unfamiliarity with the language which led to further acculturation adversities. In addition to difficulties with English, participants identified that the Canadian education system was a huge compromise for them after immigrating to Canada. All of the participants who had children felt that due to language difficulties, they were doubtful if their children were getting ‘proper’ schooling as they were supposed to receive in their home countries which created feelings of ‘mistrust’ on the Canadian education system. In the following excerpt, Osman expressed his dislike of the Western school system and parents’ lack of involvement in the education system due to their limited English skills:

Children who came here after being raised back home they were safe. Otherwise, it is difficult to raise children here. Children think that they have an upper hand on their parents because they can understand and speak English . . . even it is shameful for them if we [parents] go to their schools because we cannot speak English . . . they think that their parents are getting their money [child tax benefits] . . . school is putting these types of ideas in their mind . . . there is a huge difference between schools here and in my home country . . . it was stressful to send our children to this kind of education system.

Many participants explained that their difficulties with English which negatively impacted their process of settlement in a new land. They not only discussed their own challenges with English, but also shared that they experienced a tough process of compromising their children’s education due to linguistic and cultural differences in their post-immigration period. These linguistic and cultural differences led to further acculturation hardships and challenges.
2. **Foreign Qualifications and Experiences: ‘Here are valueless’**

Many participants reported that the lack of acceptance of their foreign educational qualifications and experience according to Canadian standards was ‘painful’ for them. They were confused and frustrated that their professional credentials were accepted for immigration purposes but not for employment or education purposes. For example, Fatima was a medical graduate in her home country. She wanted to pursue her medical career after immigration to Canada, but it was difficult for her to get through the Canadian system to get her credentials recognized. Due to lack of acceptance of her academic credentials, she decided to pursue her efforts for accreditation through the American system. Fatima considered the American system to be comparatively easier than the Canadian system and called the Canadian system ‘wastage’ as she stated:

I wanted to continue my professional career without a break. When I came to Canada, it was very difficult for me to understand the accreditation system for medical professionals. I could not find any system that could guide me what to do with my profession. Even some of my friends tried writing exams here [Canada], but no one was successful in getting their residency. Policies are very strict here and I had not met with any foreign graduate who qualified his/her exams in Canada . . . Sadly, it was wastage of time to try to go back to my field.

Fatima’s story was similar to many other immigrants’ stories who were welcomed to immigrate to Canada based on their professional and educational backgrounds but could not be accepted for employment in their professional fields. For example, Iman talked about his shattered dreams of entering to his professional field due to lack of opportunities for gaining Canadian experience:
The problem is whatever qualification you have brought here are valueless. We are asked to get our accreditations by passing exams but it is not possible without having the Canadian experience. My question is if they [Canadian employers] can hire a grade 10 student, then why not us [newcomers] to get some practical experience in Canada to pass the exams. It is painful to leave our profession where we have spent many years of schooling. I have seen my dreams being shattered in front of my eyes and it was very painful for me.

Like many other participants, Sara expressed her frustrations when it was suggested to her to look for a lower level job rather than what she deserved based on her degrees and professional experience:

I never knew about this that my degrees would be so useless. Our [Pakistani] education is recommended in UK and UAE, even many of my friends had gone there and got jobs in their professions. In Canada, our education is considered nothing. Once I attended an information session, a consultant suggested going for any technician job rather than any engineering job. I felt so bad. If they have their own criteria, it does not mean that our degrees are nothing . . . it is very depressing to see our degrees so valueless.

Many other participants were stressed due to facing number of acculturation challenges at the same time which became further complicated when they were asked to repeat their degrees and/or rewrite professional examinations to attain a job in their field. For example, Rahat explained her views in the following way:

Education systems are different; my main problem was to understand the educational system and to cope with other settlement problems along with my further studies. I felt degraded when my degrees were evaluated at a lower level . . . it is insulting and
heartbreaking that you have to go back and start from scratch to return to your profession . . . it is sad and creates more hardships for newcomers.

As can be seen by the comments of Fatima, Iman, Sara and Rahat, they either altered or started upgrading their professional backgrounds as a result of immigration. This change led them to compare and contrast their pre and post-immigration experiences in their professional fields. It was difficult for them to get their degrees accepted according to the Canadian legislations for professional registrations which further disheartened them and created barriers in their acculturation process. They were frustrated that their professional credentials were accepted for immigration purposes but not for employment or educational purposes and they were not aware of this ‘discrepancy’ in their home countries. The contrast between the acceptance of professional documents for immigration purposes but not for employment purposes created confusion in many of the professional new immigrants which made them upset and further led to depression.

In addition to difficulties with accreditation of foreign qualifications, participants in the study explained that their period of job search and meeting the financial needs of their families upon arrival to Canada was marked by professional and financial instability. Those participants who were working in professional capacities in their home countries found the job search processes extremely challenging as they did not have professional Canadian experience or social networks from which to draw support. Those who came as skilled workers had their own challenges in getting their qualifications accepted in Canada. The job search process was not only difficult for professionals, but it was described as ‘a big challenge’ for almost all of the participants. These job search issues became intense for those who had additional difficulties with the English language and no prior work experience in their home countries.
Amina pointed out that lack of information and guidance for immigrants about the Canadian job market prior to immigration was the cause of their distress. Her husband immigrated to Canada under the professional category of an accountant but he was not able to get a job in his field because of having lack of appropriate information in attaining his licence to work in Canada. She expressed her concerns:

The problem is lack of guidance for newcomers. Like many other newcomers, my husband did not know how to get his degrees evaluated and get his licence to work in his field a year following his immigration. Even after going through the evaluation process, there was no job for him in his field. It was a distressful for the whole family because we all were depending on him and he had no job to financially support us. It was hard for me to find a job too because I had difficulties with the English language and no experience of working before . . . it was very stressful.

Like Amina, many other participants expressed their difficulties with the job search process during their settlement period. Doctor explained difficulties of having ‘mental readiness’ at the time of immigrating to Canada. Those immigrants who were accepted as professionals for immigration purposes assumed that they would be accepted as is in their fields and consequently felt more depressed than those who came with an open mind to do whatever would be available for them:

If someone comes here with an understanding that he would do any kind of job available in Canada either in a factory or truck/taxi driving . . . this person would be in a better position to settle here. If a taxi driver works hard and gets sufficient money to support his family, then it is good for that person. If someone comes here with a masters or PhD

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19 Pseudo name chosen by the participant because he was a medical student in his home country and was called by this title. After immigration he was not able to continue his studies in medicines but still misses his profession and title.
degree, then this person will waste time going through evaluations and assessment processes to get a minimum wage job. Despite having good education, I was not able to find a reasonable job in my profession . . . it is difficult for educated immigrants to swallow bitterness of lack of job opportunities in their professional fields.

Like Doctor, Ali was also accepted under the professional class and was working as an engineer in his home country. Despite his many efforts, he was not successful in obtaining a job in his field:

I started to drive a taxi when I faced continuous failures in my job search . . . I felt as though I had been dropped from top to bottom. The person I had become was like a dead person. Due to shame, I could not tell anyone in home country about my occupation in Canada. I have sacrificed my career to immigrate here and my heart was shattered upon this professional defeat.

Some participants were under the impression before coming to Canada that because they were accepted under the professional category there would be no problem in finding work in their professional fields after their immigration. However, lack of acceptance of their documents and difficulties being accredited to work in their professions made them disappointed which caused further challenges in their job search process. For instance, Perveen explained her hardships during her job search process:

Common perception of immigrants is that they should take whatever is available and not be upset if they cannot pursue their fields. Even though I had PhD in Psychology but it was difficult for me to get a job in my field . . . this situation made me to feel depressed because I never thought about it. Sometimes, I used to regret why I came to Canada and exposed myself and my family with these hardships.
Some participants were upset because they were required to have the Canadian work experience in order to apply for any job especially to work in professional capacities. They were frustrated that they needed to build up their work histories in Canada by attaining work experience in Canada; it may be even outside of their professional field. Like many other participants Sara was aware that she had to start from ‘somewhere’ to attain Canadian experience as it was required for almost every kind of job, but it was difficult for her to get even a survival job as a newcomer:

Whenever, I applied for any job, I was always asked for the Canadian experience which was difficult for me to provide as a newcomer. Nobody was willing to give me an opportunity and then I decided to go for any survival job to financially support myself. I started hiding my degrees because nobody wanted to give me even a survival job with so much education. It was very unbearable and stressful for me and added further challenges in my life.

Further to the Canadian job experience, some participants were stressed when they were asked for professional references. Being new to the country, it was difficult for them to establish social and professional networks to use them for their references. Fowad expressed his sadness due to lack of references which made it impossible for him to find work in Canada:

In Canada, you need references to get a job. It is difficult for those who come to a new country but have no references in hand. I had the same experience when I was applying for my job. Professional references in Canada were not possible without the Canadian experience and nobody was willing to give me a job without a reference in the early stage of immigration. This dilemma was very stressful and gradually, I started to become hopeless and depressed about my future.
As these excerpts illustrate, employment challenges posed a significant barrier to acculturation for new immigrants. Lack of proper information and guidance before coming to Canada created unrealistic expectations in the immigrants and they believed that they would be accepted in the Canadian job market as they were accepted for immigration. Lack of opportunities for internship, Canadian experience, volunteer work, references and social networking were considered main hurdles in finding professional jobs. Eleven out of thirteen participants reported that their dreams were shattered when they faced job-search related hardships and eventually they became depressed.

3. **Racism and Discrimination: ‘Painful experiences’**

The category of Racism and Discrimination reflects participants’ emotional setbacks due to harsh experiences of ‘being different’ and at a ‘lower status than the others’ that many participants faced in their new country. These setbacks led to certain compromises of self-identification and self-respect. Experiences of inequality were perpetuated in a number of ways and in a variety of contexts which were considered by participants to be underlying factors for most of the acculturation challenges. For example, Perveen expressed her difficulties due to belonging with a minority group both religiously and culturally:

Christian and white are the norm . . . wherever you go you find things according to them . . . I used to feel like a stranger and it was difficult for me to find my position within the Western world. It was stressful when you do not find your place anywhere and you are just considered like a piece of garbage as compared to the dominant culture . . . it was sad and upsetting.

Osman was a taxi driver and was very upset about the racist remarks which people made about non-white immigrants:
Whenever I was not able to accommodate their [white people’s] demands, then usually I hear them yell racist remarks such as, “go back to your country!” It was very heartbreaking to hear these kinds of words after leaving everything behind in order to settle here . . .

Doctor expressed his difficulties with finding employment due to the problems with racism and discrimination embedded in Canadian culture:

Whenever I applied for a job, I was asked if I knew the plant manager . . . It is just to discriminate those who do not have acquaintances and connections with the dominant culture. Being a new immigrant, it is a big hurdle in getting our resumes forwarded because we do not have connections with the plant managers who can recommend us forward. This is a clear example of discrimination with new immigrants which is heartbreaking and stressful.

Similar to Perveen, Osman and Doctor, many other participants such as Sunny and Amina also shared their experiences with racism and discrimination. For example, Sunny was emotionally hurt due to being discriminated on the basis of his country of origin and skin colour:

My skin colour is dark; some people discriminated against me because of my country of origin and used to call me Paki. It was a very painful experience for me when people pass judgement on me through racist remarks . . . they do discriminate against us based on our skin and type of clothing . . . it is an emotionally painful experience.

Amina shared her physical and emotional pain caused by discrimination due to her immigration status:

People’s way of talking did hurt me. I met with a lady who called herself a Canadian; she was a very rigid lady . . . she did not like immigrants . . . she used to talk to me harshly. I
do not care about that now but at that time due to her harsh tone, I used to become sick.
also, my nerves used to hurt due to tension.

Participants such as Sunny and Amina described their experiences of racism and discrimination which were based on the differences of race and immigration status. They noted that these experiences were ‘heartbreaking’ and ‘stressful’ and made them depressed. Many other participants also shared that these harsh experiences of racism and discrimination were exhibited through physical and somatic symptoms.

Experiences of racism and discrimination were not limited to one or two aspects of life but participants shared that they experienced them in every walk of life. For example, some female participants expressed their challenges wearing traditional clothing such as the Hijab which contrasted with non-Muslim or non-traditional clothing style. Some female participants did not use the Hijab in their home countries but because of being in a Western country they felt unsafe and felt a need to cover themselves properly to represent their Muslim tradition. However, they reported that they felt being discriminated because of using Muslim attire which was emotionally distressing for them during their early years in Canada. Rita started wearing the Hijab after her immigration to Canada. She reported that peoples’ attitudes changed when she started wearing the Hijab and they started to discriminate against her:

Mostly people already had a set image of Pakistanis in their mind, especially females when they were wearing the Hijab. I was also treated based on others’ perception of Muslims from Pakistan. For example, when I started wearing the Hijab, due to my Hijab I could feel the difference in the way people behaved with me; there was a change in their attitude that was very noticeable.
Sara also started wearing the Hijab after coming to Canada because she felt an obligation as a Muslim to follow her traditions in a non-Muslim country. Despite her feelings of safety and security after wearing the Hijab, she was stressed due to the discriminatory reaction of other people around her:

When I started wearing the Hijab, then I felt as if I was safe. After wearing the Hijab regularly, I realized people around me used to stare at me as if I was an alien or came from a different world. It was stressful.

All of the female participants pointed to difficulties in accessing equal opportunities for employment and also in facing discrimination due to their traditional clothing style. Rahat was using the Hijab in her home country and continued it after her immigration. However, she reported feeling distressed when she was not able to find a job in her field due to wearing the Hijab. Her emotional turmoil as the result of hurtful comments on her attire was heightened by social isolation and lack of self-respect. She explained:

Many people asked me whether it was my idea to wear the Hijab or my husband had forced me to wear it… Even, an employment counsellor clearly told me that if I removed it [the Hijab], I would be more likely to find work. I thought that it was my personal matter… I was not asking others to change their attire, then why I had to change for them… it was upsetting when you see people degrading you just if you look different than them.

All of the participants talked about their difficulties using the Muslim attire in a Western country and were feeling stressed due to discriminatory and racist attitude of the ‘others’ towards their attire which caused them stress during their settlement process in Canada. Furthermore, participants talked about their difficulties being Muslims especially after Muslims’ involvement in the September 11th incidents. They reported that discriminatory attitude towards Muslims was
not limited to them only, but also included their children and other family members in their day to day life. Fowad expressed his frustration due to racist remarks in the following way:

I was coming back from the mosque and someone had seen me coming out and reading Holy verses on my way to home. Suddenly, I was surprised to see a few young white boys started throwing eggs on me due to their hatred for Muslims. They were shouting at me . . . here is another terrorist. I was so upset due to this racist incident . . . I could not leave my home due to fear and shame for the next few weeks. These feelings were very bitter and made me feel depressed.

Like Fowad, Rahat also expressed her sadness over discriminatory reaction of the ‘others’ towards Muslims and their conscious intention to make them feel degraded:

I am not sure why people think that all Muslims are bad especially after the incidents of September 11th . . . not all Muslims are the same. I was travelling on a bus and there was a white girl sitting next to me. Due to my head covering, it was obvious that I was a Muslim woman. She was critically observing me, even if I was opening my purse or arranging my shopping bags. Eventually, she felt so uncomfortable sitting next to me that she said a few bad words in a low tone and changed her seat. Actually, she said that she was scared as if I was carrying a bomb. It was very humiliating for me; however, I did not say anything to her but this incident was very upsetting for me. Even talking about it is making me very emotional.

Many participants were stressed when their children faced racist and discriminatory remarks and experiences in school settings. For example, Iman was upset when his children had to hear negative comments targeted at Muslims and his children felt disrespected in their schools:
We [Muslims] migrated here so that our children could live with peace, but I think here they are more disturbed than our own countries because they were excluded from the ‘others’ and being emotionally teased . . . It is very disturbing when your children face verbal taunts and comments of hatred because they are Muslims . . . my son was not able to form any friendship in his class because he was a Muslim . . . it was emotionally torturing for him as well as for us.

Iman felt emotionally tortured when his children were returning home after hearing negative comments about Muslims. He was sad that he wanted to give a peaceful environment to his children after immigrating to Canada but his children had to face discriminatory treatment being Muslims. Like Iman, Amina also expressed her sadness when her child came home and asked her if all Muslims were terrorists because this was what his other classmates were thinking about Muslims:

One day my son came home from school and I noticed that he was very confused and depressed. I asked him if he was okay. He told me that children in his class were making negative remarks about Muslims . . . they were saying that Muslims were terrorists and they were plotting to destroy CN tower now . . . mom, are we [Muslims] so bad? . . . after hearing these words from my son, I started crying because it was very emotional and disturbing for me to hear this about Muslims and I did not know how to explain things to my child.

Perveen was concerned about negative messages propagated against Muslims in the school system and in the overall society. She was worried that if Muslim children internalize these negativities then it would result in more destructive behaviour and they might end up in trouble with the law:
It is hard to explain things for our children . . . we are in a non-Muslim country and here Muslims are considered terrorists . . . I was totally confused what to do and how to explain my children about the message of peace given by Islam . . . I was scared about our children’s future . . . if they were raised in the atmosphere of hatred, then they would absorb all of these negativities of racism and might retaliate one day and get troubles with law.

All of the participants in the study described their personal and emotional experiences due to racism and discrimination within the Canadian system which caused their and their family’s emotional distress. They were worried about their own and their children’s future in a non-Muslim country when people were keeping so much hatred against Muslims, especially after the September 11, 2001 incidents. These challenges created further difficulties for them to acculturate during their post-immigration period.

C. Disruption in Family Relations

The fourth theme of Acculturation Challenges, Disruption in Family Relations, highlights changes in family relations and dynamics following their immigration to a new land. All of the participants reported that these changes were stressful for them and led to depression. The theme of Disruption in Family Relations can be further divided into three sub-themes which include: Changes in Family Situations: ‘Emotionally difficult experience’; Gender Roles Changed: ‘We are not used to these roles’; and Fear for Children: ‘Children are losing their religious and cultural traditions’ (see Figure 5).
1. **Changes in Family Situations: ‘Emotionally difficult experience’**

The sub-theme of Changes in Family Situations delineates the changes in family living circumstances following participants’ immigration to Canada. Almost all of the participants were surrounded by immediate family, relatives and extended relatives in their home countries. Due to immigration, their family structure was changed (i.e., either their immediate family or relatives and extended relatives were not with them) and they missed their supportive family surrounding them. There was no particular trend in the nature of the family structural changes across participants, but almost all of them reported that being away from family members made them sad and depressed. The absence of extended family support caused difficulties in coping with the stress of settlement.

All of the participants benefited from having family members with them and considered them as a great source of moral support. Also, they believed that bringing family members increased their network of support. They were distressed due to changes in their family structure and dynamics after their immigration to Canada especially, due to separation from their loved ones who were left behind in their home countries. For example, Perveen considered the accompaniment of family members at the time of immigration would be a great support, especially while experiencing the hardships of the settlement process as it offers ‘support’ and
‘strengthens’ the family relationship. She came to Canada as an independent immigrant under the professional category of psychologist. She initially decided to immigrate to Canada without her family, so that she could get settled before bringing her husband and children. After coming to Canada, she became depressed due to acculturation challenges and also lack of immediate family support. She believed her challenges would overcome through collaborative family support so she insisted her husband and children to join her. She explained:

It does make a difference to have a family here because if your family is with you then you can support each other; otherwise, you will be depressed. I was very depressed and all the time kept on thinking about my family. It was an extremely painful experience which kept me depressed most of the time.

Those participants who immigrated to Canada and whose family members and/or extended relatives were left behind in their home countries expressed a great sense of ‘loss.’ They missed their larger support system, people who could have helped them in time of need to face acculturation challenges. Osman came to Canada as a refugee and struggled to obtain his legal status. Due to his personal life challenges, he had to leave his parents and other relatives in his home country and sought asylum in Canada with his wife and children. He reported:

I got separated from my parents and other relatives for the first time in my life to immigrate here; it was a very difficult experience for me . . . I used to call them regularly to check if they were okay. I used to cry for them like a small child. It was very painful to live without them in a new world.

Like Osman, all of the other participants explained that their life ‘changed’ significantly as well as their ‘motivation’ towards life dropped after immigrating to Canada because they had to
‘live away’ from their family, extended family and other relatives. For instance, Rita explained that her motivation towards life was dropping due to no family support around her:

When I came here I had no family member to support me. You need family members to support you morally... I felt that those who were living with their families were more motivated towards life than me, whereas I used to feel more towards the end of life... it was sad.

Similar to Rita, Iman also expressed that the support of his family was indispensable in raising his children and sharing his responsibilities. He was missing his family support in almost every aspect of his life after immigrating to Canada:

In Pakistan, I had a joint family system if I was not available for my children then my brother or any other family member would have looked after my family [wife and children]. They all would have contributed to the upbringing of my children; here [in Canada] there was no one to help to support and nurture my family... it was a very difficult experience. Living without family was like a fish living without water.

Some other participants also acknowledged the moral support that they received from their family members, but they did not think that it was a good idea to bring the whole family with them especially when they were not personally settled in a new land. Some participants explained that they found themselves ‘helpless’ because it was difficult for them to provide assistance and financial support to their families as they were all struggling in the ‘same boat.’

For example, Amina, her husband and children immigrated to Canada at the same time but Amina felt that it was ‘very challenging’ for the whole family to immigrate and to go through the settlement hardships at the same time. She shared her views:
We came together, in a sense it was good that we were together but I would not recommend this to anyone . . . Everyone suffered at the same and there was no one to support and extend help . . . the whole family was in a crisis situation. At least there must be one person settled who could guide and support others then perhaps settlement would not be so much painful experience for us.

Participants had different opinions about bringing their family members e.g., partners and children, to Canada at the time of immigration. There were several reasons why some participants felt that family members were to be an additional financial burden to them. For example, when new immigrants were not personally settled in Canada, it was difficult for them to afford their family responsibilities. As a result, they considered the presence of family members to be an additional expense for them.

In summary, many participants expressed how they felt without their immediate or extended families and how the distance from relatives and changes in their family dynamics led to many hardships in their post-immigration periods. Participants shared their emotional experience of leaving relatives behind and trying to survive in Canada. Being away from loved ones was challenging for everyone, whether they had any relatives settled in Canada or not, but they were still missing the safety net of relatives that they used to enjoy in their home countries. Those participants who had no relatives or friends in Canada were ‘deeply missing’ their relatives and friends due to acculturation hardships and loneliness in their new land. Even those who had their immediate families immigrated with them, were still missing the support of their extended relatives from back home. Furthermore, at the same time participants were concerned about the upbringing safety and protection of their children in a Western country. Overall, participants were sad that they lost the family relationships and family structure they used to
enjoy in their home countries which added to their worries about raising children. This sense of loss generated feelings of sadness and distress in them which led to depression.

2. **Gender Roles Changed: ‘We are not used to these roles’**

All of the participants explained the way immigration to Canada challenged their cultural traditions and value systems in regards with their gender roles expectations. They shared that they were brought up with specific gender roles expectations in their home countries where roles for men and women were clearly defined and separated from each other. They explained how changes in their gender roles caused personal distress as a result of immigration and adaptation to a Canadian lifestyle. For example, in their home countries men were expected to financially support their families, whereas women were expected to do household chores and to take care of their children. After coming to Canada, there was a huge change in these clearly structured roles, for example, men were expected to take care of their children as well as to do household chores especially if their partners were at work, and women started to look for jobs because their families’ financial needs could not be met by single person’s income. Twelve out of thirteen participants mentioned that they were not mentally prepared for such a ‘drastic shift’ and ‘cultural contrast’ in their gender roles. Osman expounded on his personal experiences in Pakistan and compared them with the lifestyle in Canada:

Back home wives are supposed to take care of children and husbands are responsible for earning money; here husbands cannot afford everything single-handedly; otherwise, the whole family suffers . . . in that case the wives have to go out to work and they do not have anyone to take care of their children. It was extremely difficult and stressful for us [both husband and wife] after coming to Canada to go to work and raise our children at the same time because we were not used to these roles.
Amina described a similar concern as Osman. She decided to look for a job when her husband was unable to find work and the money they brought with them was nearly finished. After an intense struggle she found a job in a factory. She had no experience doing factory work in her home country. Beyond her challenge in adapting to a new set of job requirements, she found it difficult to work on machines with men and to go to work while her husband was at home:

When I saw my husband resisted taking a low paying job in spite of the fact that our funds were rapidly diminishing, I decided to find work for myself . . . after networking with other people I found a job in a factory. It was so difficult for me to work on a machine. In my home country women were not doing that kind of work . . . usually women were doing light work or staying home and raising children. It was disgraceful for me to work in a factory with other men but for survival I had to do it even though both I and my husband hated it.

Like Amina and Osman, many other participants expressed their concerns due to shifts in their gender roles after their immigration to Canada which caused distress because they were used to having clearly defined gender roles and tasks assigned to them in their home countries. Rahat expressed her challenges of getting permission from her husband to work in a factory which was against her cultural traditions to work with men in order to support her family:

When I wanted to work in a factory, my husband refused to permit me to do factory work. Also, he did not want me to work as he always provided for his family . . . he was not mentally prepared for this shift in our roles that required him to stay at home and I go to work . . . it was a tough call.
Perveen also compared gender role differences between her home country and the new land. It was strange for her as well as for her husband to accommodate changes in their gender roles which were not aligned with either their upbringing experiences or cultural values:

Here women have to fulfill many responsibilities . . . it was optional for me over there [home country] to go to work or not, but here [in Canada] I have to . . . my husband was looking for a job but he had no luck . . . he was taking care of children and other households; I was working in a factory to make our ends meet. It was very stressful for all of us . . . It was strange for us . . . husband staying home and wife going out to earn money for the family. . . this shift in roles was very stressful . . . our whole lifestyle went upside down.

Both male and female participants reported personal difficulties due to changes in their gender roles and responsibilities after immigration. They felt being ‘grinded’ by the Canadian system where they had to maintain their own cultural values and gender norms while fulfilling responsibilities associated with the Canadian lifestyle. Participants described that changes in their gender roles created tension and confusion within themselves as well as in their families during their post-immigration period.

3. **Fear for Children: ‘Children are losing their religious and cultural traditions’**

In addition to challenges of finding Islamic Food and using Muslim attire, many participants identified how adjusting to a Canadian lifestyle created a fear of their children losing their religious and cultural tradition. All of the participants expressed their struggle to preserve their religious values and cultural traditions and to transfer them to their next generation after immigration to Canada. For example, many participants contrasted a Canadian lifestyle with Islamic teachings, traditions and cultural values and found ‘huge disparity’ between the two. For
example, Amina talked about her individual efforts to make her children aware of their religious and cultural values in a Western society:

I used to feel unsafe because I had my daughters with me. My daughters used to ask me questions and I did not know how to respond to them . . . at home I continued telling them what our traditional and cultural values were. I was fearful that they would lose their religious and cultural traditions in a non-Muslim environment.

Also, Fatima reported her concerns about raising children in a Western culture where children were strongly influenced by non-Muslim trends:

When I came to this country, I was concerned about taking care of my culture and my religion. I was very worried about the training of my children and how to keep them close to their religion and culture . . . I was worried that it was very challenging keeping in view outside pressure.

Perveen described that she was afraid to interact with other people because she did not want her children to learn the cultural values of the Western country. These feelings were persistent with her for the first few years of her settlement process:

I preferred staying home . . . I used to feel unsafe and worried that my children would be exposed to a culture that permits people to walk around without much covering, especially females. At home, I was teaching my children our ways [Islamic teachings] . . . which includes not attending mixed gender gatherings where women remained covered, but I was not sure if it was enough . . . I was very confused.

Most of the participants were worried about raising their children in an ‘unhealthy environment’ which was different from their own ‘cultural traditions.’ They highlighted that an imbalance of power between parents and children was ‘strange’ for them after immigration to
Canada. For example, Foward expressed his concerns of raising children in a Western system where children were encouraged to be more independent and less respectful for their parents:

The biggest problem was that our children were less respectful to their parents . . . here children were taught that they were independent and no one could interfere in their lives. Children manipulate their parents who are new to this country and do not know Canadian rules and regulations. I was very concerned about having my children with me and how to save them from getting to wrong pathways. With our joint family structure back home, all of the relatives used to support each other in upbringing children . . . Sadly, I lost that supportive family structure after coming to Canada.

Like Fowad, Ali was worried about ‘too much liberty’ for his children which posed many challenges for him on how to protect them at such an early age in Canada:

I was very worried to bring my children here after seeing too much liberty given to children. I was missing my relatives back home but the ones who were here, I was concerned about their protection. It was a very complicated situation for me, I was confused . . . should I be sad for my relatives back home or should I be worried for the ones [wife and children] whom I brought with me . . . it was very depressing.

Most of the participants who could not live in Muslim neighbourhoods were depressed because they were not able to take their children to regular prayers and those who were surrounded by other Muslims considered having a mosque in the neighbourhood as a ‘blessing’ for them. For example, Rahat shared her worries due to not living in a Muslim neighbourhood because her children were not able to go to a mosque for prayers and regular Islamic teachings. She expressed her feelings in the following way:
I wished if I could have lived in a Muslim area where I could take my children for regular prayers with other Muslims like my other friends were doing who were living in Muslim neighbourhoods . . . but the area where we used to live there was no mosque . . . not the company of other Muslims . . . it was extremely distressful and I kept on worrying for the upbringing of my children.

Like many other participants, Ali also supported the belief that living close to people from his own religious group as well as having a mosque nearby was important for newcomers; otherwise, lack of opportunities for interaction with other Muslims added acculturation difficulties for them:

Living without a Muslim neighbourhood is as living without water, air and food. I guess it is one of the basic necessities of life. It was stressful for me to raise my children when others around me were practising contradictory norms to my religious and cultural values.

Like Ali, Sunny was also in favour of staying close to people from his own community and cultural background. He lived in a non-Muslim dominant area for some period of time after immigrating to Canada which made him feel depressed due to staying away from other Muslims and people from his cultural backgrounds. In addition due to staying far from a Mosque, he was feeling sad that he was not able to pray five times a day in company of other Muslims:

It is important for newcomer Muslims to live close to a Desi area [people from the same ethnic and religious background]. It was an awful experience to live without other Muslims or a Mosque close by. I was feeling guilty for not doing regular prayers and was extremely sorry for other children too.

All of the parents participated in the study reported having worries about raising their children in a non-Muslim context which clashed both culturally and religiously with their own
values. They explained that raising children in a non-Muslim context was a huge compromise for them happening at the expense of their integration in Canadian society. Due to the cultural and religious disparity between their original and host cultures, almost all of the participants liked having a mosque and Muslim community close by so that they could take their children for regular prayers. They believed that living in a Muslim neighbourhood was critical for them to preserve their Muslim traditions. Thus, all of the participants acknowledged the importance of being surrounded by people from the same religious and ethnic backgrounds and distance from them caused distress in them. They shared that following their immigration, living in the Muslim neighbourhood was not only essential for their ‘sense of inner strength’ and closeness with their ‘own religious community’ but also important for raising children in an ‘Islamic climate.’ They considered ‘Islamic surroundings’ and ‘support from other Muslims’ important to acculturate in a new country and unavailability of these supportive mechanisms caused stress for them. Thus, raising children without Muslim surroundings and distance from their religious places caused further worries and stress for participants during their acculturation process.

D. Material Differences

Most of the participants expressed that their acculturation challenges and hardships were due to material differences between their pre-immigration and post immigration situations. They faced a number of hardships due to financial limitations and material differences in their pre and post standard of living. Two sub-themes under Material Differences are: ‘Boiling inside’ due to Money Problems; and Dilemma of Affordable Housing: ‘Either keep a roof or food’ (Figure 6).
Figure 6. Sub-themes Related to Material Differences

1. Money Problems: ‘Boiling inside’

The sub-theme, Money Problems: ‘Boiling inside,’ delineates the way financial difficulties added to problems with acculturation for the new immigrants. They reported that their limited personal finances caused hardships in their overall settlement process. In particular, many participants identified the high cost of daily expenses and lack of financial resources as barriers during their post-immigration period. Ali discussed his financial difficulties in buying daily living items for his family:

Standard of living was too expensive here [Canada] . . . when I came here [Canada], I had a limited amount of money. . . Pakistani Rs=60 were equal to $1 Canadian and then I had to ask for more money from my relatives back home. My finances became only a handful amount of money when I converted them into the Canadian dollar . . . Also because Pakistani currency continuously devalued against the Canadian dollar, I was left with nothing to spend here and it was difficult to meet my family needs . . . difficulties to afford everyday living expenses caused further stress in my life.

Like Ali, many other participants such as Osman and Iman were also overburdened due to family responsibilities and limited amount of finances available. Osman expressed his financial difficulties in the following way:
Those who came with their families had more problems than others because they had to take care of their children to financially support them. I had to face the same struggle here with my family. Due to financial difficulties both me and my wife had to work but still it was difficult for us to manage everything . . . these financial hardships created too much tension in our life.

Iman was feeling responsible for bringing his family with him to face economic challenges. He was feeling guilty that he had to stay outside of his home most of the time to meet his family’s financial needs:

I came here with my wife and children but it generated other problems for me. I was feeling guilty that I was not able to spend quality time raising my children . . . my economic condition was not sound and I was very depressed because my whole family was suffering due to me. I kept on working over time to get more money for them and had less and less time for my family. I felt like a loser . . . there was no time left to spend with my family and I was feeling very distressed ‘boiling inside’ upon my financial limitations.

Like Osman and Iman many participants discussed their emotionally distressing experiences when seeing their children suffering as the result of their limited financial means during their post-immigration period in Canada. While sharing her experiences, Amina explained that she used to spend time parenting her children but due to acculturation hardships neither she nor her husband had time to spend with their children:

I used to spend a lot of time with my children in India; here nobody was around to help them. I used to go to work early in the morning . . . my husband was so worried about finding a job . . . he did not know what was going on with our children due to poor
financial condition. It seems that at that time our bodies were here but souls had gone somewhere else . . . very miserable condition.

In addition to parents’ bad feelings towards having less quality time with their children, children were also perplexed about their parents’ low financial condition in comparison with higher socio-economic status they enjoyed in their home countries. For instance, Perveen shared her daughter’s explanation for not bringing treats for her friends on her birthday which was heartbreaking for her:

Our financial difficulties negatively impacted not only me and my husband but also our children especially, our daughter . . . she knew about our tight financial condition. On her birthday, her friends asked her why she did not bring any candy for them. She told them that in this country they were poor and she would bring candies when her parents become rich. She used to say that we ruined her childhood and it was better for her to live back home rather than coming here . . . it was very disturbing.

All of the participants discussed the limitations of their personal financial situations and their negative impact on the whole family during their settlement process. Financial limitations caused additional hardships for newcomers and led to depression.

2. **Dilemma of Affordable Housing: ‘Either keep a roof or food’**

Participants’ challenges in finding affordable housing include difficulties in affording rent, having a guarantor, and many other sub-standard living conditions that many participants faced following their immigration. For example, Osman described his housing related challenges during his acculturation process in Canada:
It is a problem especially if someone comes new and tries to find accommodation at a low rent . . . I had to struggle hard to find accommodation for my family which added my settlement problems. It was very demanding and stressful experience for the whole family. Iman expressed similar difficulties in affording monthly rent of his apartment within his limited income as most of his income went into renting a space:

Finding affordable housing is another problem for newcomers. Government needs to make a rule that landlords cannot increase rent beyond a certain point. In order to pay rent within my minimum wage, I had to work for several hours of overtime which kept me away from my family. I did not know if it was more important for me to spend time with my family or to make sure they had a roof over their heads. It was a stressful dilemma for me to keep a roof over their heads or food on the table.

Participants highlighted not only the issues of unaffordable rent, but also challenges in finding individuals willing to be guarantor for their housing application. For example, Sunny explained his family’s struggle in making housing arrangements:

Housing is a major problem. It was also difficult to rent an apartment without the supporting documents and guarantor. In Pakistan, most of the people have their own accommodation . . . only a few come with any renting experience; it is strange for them to understand the processes of renting an apartment or a basement. It is extremely challenging and stressful for newcomers to understand the process of finding an accommodation without a guarantor.

Some participants discussed their experiences of living in shared accommodations due to financial constraints. They were not used to this kind of living arrangements in their home countries which caused additional stress for them. For instance, Rita shared her difficult
experiences of accommodating with changing roommates which she considered emotionally disturbing:

In the beginning after coming to Canada, I lived in a shared accommodation. When the girl I was living with decided to move out, I began to feel so bad that I could not express my feelings. I felt very lonely in a foreign country and wanted to throw away my things or to smash everything. Things became so meaningless for me and I started associating the experience of leaving the apartment with leaving the world. This type of housing arrangement was very disturbing and stressful for me but my choices were limited due to financial constraints.

Like Rita, Sara had to share accommodations with a roommate after coming to Canada. She had no prior experience of living in a shared accommodation in her home country and felt as if she was misbehaved being a female because finding a safe place and affordable housing was an additional challenge for females:

I used to live in a shared accommodation . . . might be I was not suitable for that kind of setting. Some people were very annoying and used to disrespect me because of my gender . . . in my home country, it is not considered good that females are living in shared accommodations with strangers but here I had to do it and it was very painful for me.

Some other participants encountered distress due to substandard living conditions compared to what they used to enjoy in their home country, which added to their worries. Rahat felt embarrassed inviting someone to her home as it was not up to the standard which she used to have in her home country:

In Pakistan, we were privileged and had a higher status than here [Canada]. When we came here we were deprived of many things which we used to enjoy there. We had our
own house back home which we cannot afford here. We were ashamed to invite someone to our home . . . It was disgraceful and stressful for me whenever somebody wanted to come to my house . . . it was because of our migration to Canada.

Amina shared difficulties due to rodent infestation in her apartment which multiplied her financial constraints as well as being psychologically upsetting for her:

After coming to Canada, we used to live in a second floor apartment which had mice in it. They destroyed our comforters and it was difficult for us to manage other ones in winter. There was not enough heating in the apartment; we used to shiver with cold. We were not able to buy new comforters or to move to another apartment . . . moving expenses were difficult to manage too . . . these limitations were very stressful.

All of the participants acknowledged the difficulties with their living conditions such as cost of living, cultural norms of social status associated with living standards, downward mobility, rodent infestations and many other sub-standard living conditions. In Canada, they faced a number of challenges in the process of adapting to the Canadian lifestyle with their living arrangements which added problems and stress for them.

In summary, the participants’ acculturation challenges are categorized through the process of grounded theory analysis. These hardships are categorized for our understanding; however, participants experienced these hardships within the same time period. Participants reported comparing their lifestyles in their home countries with their post-immigration period and feelings of depression. Due to the unfamiliar environment around them, participants were experiencing ‘strange emptiness’ and were distressed that ‘the new world’ was a threat to their cultural, ethnic and religious values.
In addition to experiences of isolation in an unfamiliar environment, participants also talked about their problems in finding employment and meeting financial needs of their families. Job search processes became further challenging for them if they lacked English language skills, Canadian experience, professional references and social connections. Most of them reported that their ‘dreams were shattered’ after coming to Canada and they were frustrated over their difficult acculturation experiences which contributed to depression.

All of the participants explained that it was difficult for them to make compromises to their religious preferences especially with regards to Islamic food, and attire, and Muslim neighbourhood. Participants were worried about raising their children in a Western country as they were concerned that their children would move away from their cultural and religious traditions. They considered themselves being dropped into a ‘hell of difficulties’ with no prior knowledge and information about post-immigration life in Canada.

As mentioned earlier, grounded theory analysis of participants’ responses also revealed that there were some gender specific trends in regards with experiences of immigration and depression. For example, female participants experienced intense differences between Islamic and Western norms of attire. All of the female participants expressed additional challenges of living in a Western country due to following Islamic guidelines of body covering and wearing the Hijab. It was not only difficult for them to follow their Islamic attire in Western society as they were targeted with racist remarks by the ‘others,’ but also it was ‘shameful’ for them to walk around in a Western attire because it was ‘too exposed,’ ‘almost naked’ and against their religious and cultural values. Thus, due to a constant conflict between Islamic and Western attire, Muslim females experienced additional difficulties in adapting to the Western context. Contrary to this, males did not express attire as a huge issue for them because they were using
almost the same attire in their home countries but they experienced greater difficulties in undertaking their roles as ‘a head of the family’. According to their role as a ‘head of the family,’ they were expected to fulfill financial and emotional needs of their families, but due to difficulties in acceptance of their credentials and other hurdles in the job search process they were not meeting their family expectations as they were undertaking in their home countries. Male participants were feeling guilty and holding themselves responsible for bringing their families in Canada and dropping them from ‘top to bottom’ which was emotionally upsetting for them as heads of their families. However, both men and women were stressed due to their ‘changed gender roles’ as both of them were feeling like ‘misfits’ in their ‘new gender roles’ and adopting ‘gender identities’ which were not in harmony with their cultural and religious practices. These hardships generated a number of emotional and psychological stresses in participants which resulted in depression. I discuss, in detail, the participants’ experiences with depression in the next section.

II. **Becoming Depressed**

The previous section highlights a variety of participants’ experiences of immigration and acculturation challenges which made participants depressed. These experiences did not impact only one or two areas of their lives but also they encapsulated almost every aspect of their lives. Participants’ interviews revealed that their experiences of immigration became intense when their depression increased and vice versa. The section of ‘Becoming Depressed,’ includes both subjective experiences of depression and turning points. These turning points helped participants to change their thoughts as well as their approach in dealing with their acculturation challenges and depression to settle and adapt (see Figure 7).
A. Subjective Experiences of Depression

Participants’ interviews revealed that their acculturation challenges became intense when they had subjective experiences of depression and vice versa. Within the theme of Subjective Experiences of Depression,’ the seven sub-themes emerged as key variables: Pain: ‘Feeling pain and wounded body’; Emotional turmoil: ‘Boiling blood and sinking heart’; Loss of Pleasure: ‘Feeling like a lifeless person and no social life like a barren land’; Absent-mindedness: ‘Being mentally absent like a wandering ghost’; Worthlessness: ‘Feeling worthless just like a piece of garbage’; Sadness: ‘Having Dead Heart like a Barren Land’; and Hopelessness: ‘Leaving soul out of the body, a piece of mud (see Figure 8). These sub-themes are discussed in detail in the following section.

Figure 8. Sub-theme Related to Subjective Experiences of Depression
1. **Pain: ‘Pain and wounded body’**

All of the participants discussed that sudden change in their social status, difficulties in finding employment and absence of relatives resulted in ‘emotional pain’ and ‘emotional wounds.’ For example, Perveen left her job, relatives and high social status to come to Canada and after immigration she faced numerous acculturation hardships such as difficulties in finding work and consequent depression. She was in physical pain most of the time and explained that she had no interest to do things around the house or outside. These changes were ‘foreign’ to her as she did not experience these difficulties before coming to Canada:

> My body used to ache all over as if I had wounds on my body. Every day, I used to feel as if it was getting worse and there was no part of my body which was not aching. I did not have any energy to work around the house . . . I could not put myself together to do things.

Doctor reported feeling depressed due to being in a ‘strange environment’, feeling a ‘lack of recognition’ and experiencing a sudden ‘changes in social status’ after immigration to Canada. He surmised that his health problems were directly linked to stress as the result of changes in his circumstances and living conditions after immigration to a new land, especially due to difficulties in finding employment in his profession:

> I used to experience headaches and pain all over the body. I became lethargic as if there was no energy left in me . . . felt very heavy as if I was made of a stone? I did not feel like eating anything. I used to force myself to eat, but the food was tasteless. My doctor suggested that I should not worry too much . . . it was not in my control . . . I was in a deep well which was completely dark, and I did not know how to get out of it.

Like Perveen and Doctor, many other participants of the study explained that they experienced a number of difficulties with pain and lack of energy due to the sudden change in
their social status after immigration to Canada. For example, Rita explained her emotional pain was ‘unbearable’ for her:

My body felt like a broken wood . . . painful everywhere . . . I did not know what was going on. Life seemed purposeless . . . unbearable pain was extremely distressing for me.

In summation, almost all of the participants discussed their emotional pain as the results of negative experiences of immigration. They associated these physical challenges with acculturation challenges and consequent depression and used various expressions to explain their painful experiences such as ‘made of stone,’ ‘being in a dark well,’ ‘no way out ’and ‘wounded body.’ They were depressed and confused as they left their ‘comfort zone’ and ‘high social status’ in their home countries to settle in Canada, but due to difficult experiences of immigration they were regretting their decision to immigrate to Canada which led to depression and further settlement challenges.

2. *Emotional Turmoil: ‘Boiling blood and sinking heart’*

Almost all of the participants discussed a number of physical symptoms which they experienced after experiencing hardships of immigration such as headaches, diabetes, hypertension and cardiovascular diseases. They related their physical symptoms with stress and difficulties of settling in Canada. Most of them explained that they had never experienced these bodily changes in their home countries. For example, Rahat was sick frequently after immigrating to Canada. She had a small child and was stressed due to having an ‘unfamiliar environment’ and experiencing a ‘distance from close relatives.’ Her husband immigrated with her but he had to go to work early in the morning. Most of the time, she had to stay alone in her apartment with her small child. She explained that while staying alone and being overwhelmed in a ‘strange world’; she became depressed which caused her physiological changes:
After some time [of immigration to Canada], I realized that my mood was constantly agitated. I used to cry most of the time due to loneliness as if I was captured in an unfamiliar world. I was under a lot of stress and ran into many health problems . . . I was diagnosed with diabetes and high blood pressure which I never had before coming to Canada . . . it was all because of my stress.

Like Rahat, Fowad also talked about the changes in his lifestyle after his immigration to Canada and lack of opportunities to pursue his professional career which adversely impacted his health during the post-immigration period. He reported that a combination of ‘stress of not finding employment in his field’, ‘difficulty to support his family’, ‘working for labour jobs’ and ‘overall day to day acculturation difficulties,’ resulted in his cardiac complications and eventually led to a heart attack:

My family physician told me that my heart attack was definitely due to too much worry. Actually, I was under a lot of stress . . . I had a set job in my home country and here I had to work for odd jobs . . . wake up throughout the nights for an ordinary job. I used to feel as if my heart was falling down . . . It was both mentally and physically torturing for me and this stress affected my whole body especially my heart.

As many other participants, Ali also reported that his health related difficulties were well-connected with his stress because he had constant settlement worries following his immigration. He was unhappy with his decision to move to Canada which made him further depressed:

Due to so many hurdles one after the other after immigrating to Canada, I felt as if someone was nailing me down every day, and I was feeling my heart sinking in my chest . . . I was feeling as if someone has held my heart in his hand tightly and squeezing it continuously . . . sometimes I was not able to breathe properly. I was repenting on my
decision to come to Canada. Due to staying in a continuous tension most of the time, my health started to decline and I was diagnosed with ulcer and high blood pressure.

Osman also associated his health related challenges with difficulties acculturating with Canadian culture. Specifically, he was missing his relatives back home. He was separated from them for the first time in his life, and felt a ‘strange emptiness.’ He indicated that every moment of his life was filled with stress after immigration to Canada and called his condition ‘emptiness of heart.’ Furthermore, he described that the stress of being away from relatives negatively impacted his health and eventually he had to pursue medical treatment to recover:

I used to experience dizziness and headaches often, which made me worried about my health . . . I kept on thinking about my family back home . . . I was constantly worried about my challenges after coming to Canada . . . due to staying under a constant stress all the time and being away from my family . . . I felt as if my blood was boiling and I could even feel my body too hot . . . my wife took me to the doctor and I was diagnosed with high blood pressure. I never had any problem with blood pressure before . . . this was all due to the stress and tension that I faced after coming to Canada.

Similar to Osman, Rita explained that her life seemed ‘totally strange’ to her and she was not sure what was left in her life:

After seeing so many difficulties and broken dreams, I had no happiness in life . . . my body felt strange to me like a shallow wood . . . there was no charm . . . my heart was dead and my hopes for a better future were also dead .

Participants of the study explained having a number of physical symptoms, which they attributed to their negative experiences of immigration. They were ‘stressed’ and feeling ‘overwhelmed’ after experiencing their settlement hardships. Most of the participants explained
that their stresses were expressed through bodily symptoms and somatic problems which led to
further psychological and emotional complications. They used various analogies to express their
experiences of depression such as ‘heart is falling down,’ having a ‘sinking heart,’ ‘someone
holding my heart tightly,’ and having a ‘dead heart.’ Most of the participants of the study
expressed their physical experiences of depression and reported having no serious physical
complications and health concerns in their home countries before immigrating to Canada. They
attributed their health deterioration to negative experiences of immigration and depression.

3. **Loss of Pleasure: ‘Feel like a lifeless person and no social life like a barren land’**

Participants discussed difficulties in their social experiences of interacting with others as
the result of their emotional experiences of immigration in a new land that did not possess the
characteristics of their regular daily life in their home countries. In particular, participants
described a close relationship between their negative experiences, drastic changes in their social
life and depression.

Participants in the study highlighted a rupture in their social life after facing hardships
during their process of settlement in Canada. For instance, Fatima reported that she led an active
social life in her home country and had many friends. After coming to Canada she experienced
difficulty in continuing her medical profession; she lost all of her interest in socializing which
eventually contributed to her depression. She explained her distressed feelings in the following
way:

I was not sure what was going on with me. Nothing seemed interesting to me. My
husband tried his best to keep me involved but it seemed that the flame of my life was
down. I was watching others busy in different activities like a theatre play but I was not
part of that world. I was not interested to go out or socially interact with anyone . . . I felt a
strange emptiness as if my body was hallow; nothing was charming for me and everything was dull and grey with no colours.

Fatima felt a ‘strange emptiness’ and lack of connection with others around her due to changes in her social life which eventually led to depression. In addition to disturbances in their personal lives, many participants talked about the impact of social life changes on their family relationships. For example, Fowad complained about lack of enjoyment and reduced social life when he experienced challenges during his process of adaptation and integration to the Canadian context. As a result of changes in his social life and lack of interest in his surroundings, Fowad reported having conflicts with his wife which negatively impacted his family life:

I did not want to stay with other people and there was no enjoyment for me . . . due to my depression, nothing was appealing for me. My wife was surprised over these changes in me and we had fights too, but things were not in my control. I used to feel as if I were lifeless person wandering around . . . no interest in social life . . . like a barren land.

Many participants shared that changes in their social life ensued disturbances in their personal, as well as their family lives. They associated these changes in their lives with negative experiences of immigration which resulted in their reduced social interaction and eventually leading to isolation and depression. Almost all of the participants were ‘surprised’ that these changes were not a part of their ‘regular’ personalities as they did not feel any motivation to socially interact with others due to their life challenges after immigration. For example, Amna contrasted her life after immigration with the way she used to socialize in her home country. She explained that her excitement in starting a better life in Canada went down drastically after facing acculturation challenges; consequently, she started to withdraw herself from all of the social activities happening around her:
When I came here with my family, I was excited . . . gradually, due to one problem after the other, it seemed life was hammering on us [family]. I preferred to be completely socially segregated . . . for weeks I did not feel like going out of my apartment. In my home country, I was a totally different person who was very social and full of life. Canadian immigration sucked that person out from me and I was a total stranger to myself . . . my segregation from the social life caused further depression in me.

Similar to Amna and many other participants of the study, Iman was an active and social person in his home country. When he came to Canada he tried to integrate socially in the same way as he did in his home country. He explained that as he experienced continuous failures in the job search process, he started avoiding people. He was concerned about the inquiries of others about his settlement challenges and whether he was successful in attaining any job or not. He was tired of these questions and decided to keep himself away from social contacts. He thought that it was not worth sharing his problems with anyone as his life was ‘stuck’ within these settlement hardships for a long time. Eventually, he realized that he had lost all of his interests and social contacts, and as a result he found himself isolated and lonely in a ‘foreign land’ where he was planning to live the rest of his life:

I was not sure what was going on with me, but I was a different person. Due to my depression and constant worries, I kept myself away from friends. It seemed that I tightly bottled myself and no fresh air was coming to me. My friends were surprised to see me like that. Whenever they made a plan, they asked me if I was interested to join them. But I had no interest in social activities; I was not sure why I came here [Canada] to suffer. My life was like a dead person’s life . . . very depressing.
Iman became depressed because his life was completely changed after immigration. He left his homeland to start off with a better future but experiences of immigration were too difficult for him to cope. As a result he lost interest in his social life and was completely changed from a social person to an isolated and segregated individual which was not only foreign to him but also to others. Iman was not the only one who experienced changes in his social life and consequent depression which changed his personality style and daily interaction with others, most of other participants also demonstrated the way the hardships of immigration facilitated social withdrawal and lack of enjoyment in their outside world.

4. **Absent Mindedness: ‘Mentally absent like a wandering ghost’**

This sub-theme illustrates a range of participants’ cognitive difficulties with decision making, memory, retention, attention and concentration as the result of tough experiences of immigration which generated depression in their post-immigration life. Ten out of thirteen participants reported that they were indecisive about whether to continue living under so much stress in Canada or to move back to their home countries. Some of the participants reported that it felt like they were being ‘broiled’ every day with the ‘heat of stress’ which was going into their ‘bones.’ They reported that as the result of their settlement difficulties they experienced cognitive changes which made it hard for them to think clearly to take any further decision in their lives. As a result of a combination of their indecisiveness and other cognitive changes, they were depressed which led to further settlement and acculturation difficulties.

For example, Sara immigrated to Canada after her marriage to start a new life with her husband. She explained that she was ‘too much stressed’ to remember anything and also experienced difficulties in attention and concentration because of overwhelming challenges to
adapt to Canadian culture. She associated her cognitive changes with her acculturation hardships which eventually led to depression:

I was sad most of the time, and I did not know what to do. Many things were going on in my life but I did not know what to do . . . I was mentally blank. It was negatively impacting my mental and physical health. I could not remember what needed to be done next . . . I lacked focus and concentration . . . I felt myself stuck in between a rock and a hard place . . . it was stressful for me to cope with these problems.

Like Sara, many other participants explained that their setbacks and challenges after immigrating to Canada impacted negatively on their cognitive abilities to concentrate on their present life circumstances and/or to think and plan for their future life. However, they reported no such difficulties before their immigration. Almost all of the participants discussed the negative impact of these cognitive changes on their personal as well as family life. For example, Rahat expressed the negative impact of cognitive changes on her overall functioning during her settlement process in Canada:

I decided to continue my studies after coming to Canada because there was no other way to stay in my field. I noticed a huge difference in me . . . I used to be a sharp student in my home country, but here I was not able to concentrate on anything. Due to so many difficulties at the same time . . . books were in front of me but I could not remember what I just studied. It was very frustrating and stressful.

Rahat shared how her daily life stressors reduced her abilities to concentrate on her studies and she was surprised over her changes in attention and concentration which she never experienced before. She further explained that her experiences of immigration were so ‘intense’ that they caused changes in her cognitive capabilities and consequently she felt depressed, which
led to further settlement hardships. In addition to personal challenges, participants of the study explained that the negative impact of cognitive changes was not limited to their personal life but they affected their family relationships as well. For example, Ali expressed his concerns about lack of concentration after his immigration to Canada which hindered the quality of interaction with his family:

I used to sit with my family but my mind was wandering somewhere else. I was so absent-minded that I could not contribute in any discussion . . . I did not know what they were talking about. You can imagine, I was physically there but mentally absent like a wandering ghost. I could not enjoy anything at that time which was very stressful.

Ali called himself a ‘wandering ghost’ due to a lack of mental presence in his family affairs. He associated his ‘absent mindedness’ with mental stress which was caused by acculturation hardships. Many participants also reported difficulties in their decision making skills due to increased acculturation stress and depression. For example, Osman came as a refugee and faced challenges after immigrating to Canada. He described a negative correlation between his stress level and his decision making skills (i.e., high stress level was leading to poor decision making skills):

I thought many times to go back to my country but I had no ability to decide at that time . . . my mind was completely blank. It seemed as if I was a useless person who could not think or take initiative for change. Simple decisions like what to eat, what to wear or where to go were very tough for me at that time . . . I was surprised what was going on with me . . . very stressful and depressing.

Like Osman and many other participants of the study, Fowad also explained his difficulties with taking any initiative or making simple decisions after going through acculturation stress. He
was sad that he never considered himself so ‘weak’ and ‘indecisive’ in life, but small things seemed to be a ‘huge task’ for them after coming to Canada.

I was not able to take any decision . . . I used to keep debating with myself what to do, but it was difficult for me to decide something concrete. It never happened with me before. On each and every step, I had to struggle hard in making decisions . . . should I do this or that . . . due to so many problems at the same time, I was not able to think straight and my self-confidence was lost with my decision making skills . . . it was sad . . . so much deterioration.

Almost all of the participants were stressed due to the cognitive changes which they experienced after coming to Canada. Participants were worried that these cognitive changes which they never experienced them in their home countries added to their settlement hardships and caused further stress and depression in life. In addition to changes in their attention and concentration, many participants elaborated on their difficulties with mental vigilance, retention, memory, reasoning and intuition which were detrimental to their progress in life and mental stability. Most of them were concerned about their difficulties with their decision making processes. They were ‘surprised’ that they had never faced problems with making everyday decisions in life; however, after coming to Canada and experiencing difficulties of settlement, they lost their ‘confidence’ and ‘trust’ in their decision making skills.

5. **Worthlessness: ‘Feeling worthless just like a piece of garbage’**

Participants of the study expressed their feelings of worthlessness and discouragement after immigrating to Canada. All of the participants reported an increased ‘sense of loss’ and feelings of ‘being devalued’ as the result of harsh experiences of acculturation which they faced to settling in Canada. These feelings were not part of their original personality as they reported
possessing positive self-images before coming to Canada. Almost all of the participants explained that they felt ‘degraded’ when they started to connect with the outside world in order to adapt and settle within Canadian culture. Most of them reported that they experienced ‘differences’ between themselves and ‘the others’ in many aspects especially when they started the job search process to become a functioning part of Canadian society. For example, Sara shared her early years of settlement experiences in Canada in which she had no luck in finding a job. Continuous failures in finding a job generated feelings of worthlessness as she did not get a positive response or even a single interview call after sending applications to several places. Her feelings of worthlessness caused depression which further increased difficulties for Sara to stay engaged in her settlement process:

I was getting deep into depression day by day, I used to feel worthless and had no interest in life . . . no one cares here after bringing cream from other countries . . . all they need educated and skilled labourers who can run their machines and pay taxes for the operation of their government . . . I was feeling like a particle of sand . . . valueless being . . . I felt like a crap who had no value . . . it was very stressful and depressing.

Like Sara, many other participants expressed their feelings of worthlessness when they were not surrounded by the supportive environment after their immigration to Canada. Some of them were upset due to the ‘deception’ by Canadian immigration policies which blocked them from seeing the true picture of their life after immigration, before coming to Canada. For example, Fowad, like many other participants, became upset upon seeing the lack of worth and recognition of his skills after immigrating to Canada. He wished that he should have known the Canadian accreditation process of his academic background and professional experience before coming to Canada in order to make an ‘informed decision’ of immigrating to Canada.
I was upset due to the deception . . . when my case was processed for immigration purposes, I was not told that I would not be considered as a professional engineer . . . I will call it a clear deception . . . I felt forced to live the way actually others [Canadians] wanted me to live . . . it is painful to feel yourself so worthless . . . I felt degraded and devalued here [Canada].

Like Fowad, many participants of the study felt forced to live the way others wanted them to live after their immigration and considered themselves as ‘worthless’ and ‘useless’. They experienced their feelings of worthlessness as a cause of their low self-esteem which led to depression and further acculturation difficulties for them. Iman explained his challenges in the following way:

I was sad and depressed to see my hard work and bright academic history were worthless just like a piece of garbage . . . how could I be happy? These thoughts were making me sad day by day. These feelings had damaging impact on my self-respect and self-esteem, I was getting away from my own self . . . it was humiliating for me.

Like Sara, Fowad, Iman, and many other participants, Ali also faced challenges in finding employment in his professional field. As the result of his fruitless efforts, he developed feelings of uselessness which altered his self-identity and self-respect as a professional. Consequently, he became depressed and did not feel any motivation to move ahead in the new country.

My experiences were the same like millions of other professional immigrants who came to this country and lost their identities . . . highly distressful . . . I was feeling like a rolling stone, anyone can roll me anywhere with disrespect . . . I was degraded in my own eyes for being so valueless . . . I did not feel like doing anything.
Many participants who were accepted as professionals for immigration purposes reported that their emotional experiences of worthlessness were accentuated when they faced continuous failures entering their professional fields. These emotional disturbances were so intense that they became depressed and lacked interest in their surroundings. For example, Doctor was hospitalized for weeks seeking treatment for depression as the result of his acculturation challenges and difficulties continuing in his professional field after immigration to Canada. Doctor came to Canada with his parents and siblings and had high expectations for continuing his studies in medicine in order to become a physician. Due to an intense struggle in the early phase of settlement, he became upset that he lost his aim of becoming a doctor. As the result of his emotional disturbances, he was diagnosed with clinical depression and was hospitalized for further treatment.

I had sad mood most of the time . . . lack of interest in my daily life and difficulties in falling asleep. It was terrible to see myself as an unsuccessful person. I came to Canada with high hopes of a better future but as the result of continuous failures and disappointments, I started to mistrust my own abilities . . . I felt as if I was nothing . . . all of these negative thoughts led me to depression and weeks of hospitalization.

All of the men participating in the study reported that they felt discouraged because they were not able to support their families whereas they were the main providers for their families in their home countries. As the result of difficulties in finding employment, changes in family structure, and loss of professional growth and other acculturation challenges, participants were feeling ‘worthless’ due to not meeting their families’ needs. For instance, Fowad’s acculturation hardships led to his lack of self-confidence and feelings of discouragement:
I left a respectable status in my country to come to Canada, and now what types of problems [difficulties with finding employment and housing] I had to face? My whole family was depending on me financially and I had no positive response from anywhere to get an employment. It felt awful. . . I felt so discouraged that I ended up in a hospital as the result of heart attack. I felt like a dead person who had no courage to do anything and no capacity to support his family . . . it is awful.

Some participants were depressed because their feelings of worthlessness led to ‘turmoil in the home’ which caused further challenges in their settlement process. For example, Rahat reported that she felt very discouraged that despite all of her efforts to change her and her family’s situation to settle in Canada, she was unsuccessful. As a result of her feelings of discouragement, she stopped making any further efforts to settle, and this situation generated marital problems and depression in her life. She explained her feelings of distress in the following way:

Most of the time, due to feeling overwhelmed and being hopeless about my future, I used to stay in a bad mood. I had excessive arguments with my husband for bringing us to this country. Actually, I was feeling helpless and a failed person who was unable to meet needs of my family.

Fatima also explained that her conflicts with her husband rose as the result of stress and depression due to constant failure in the post-immigration period:

I used to argue with my husband for every small thing. After having a fight, I used to think that we were supposed to do things together rather than fighting with each other.

Somehow, I was not able to control my anger and irritability. I used to get angry over
everything due to whatever was going on with us as if my blood started to boil . . . what was here for me and my family except shame and disgrace.

Almost all of the participants reported changes in their mood due to feelings of worthlessness which not only negatively impacted their own personalities but also their relationships with their family members. Participants had a strong ‘sense of loss’ when they were not able to achieve the same status as they used to enjoy before immigrating to Canada. As a result of loss of their social status, disturbed family relations and a number of acculturation challenges in a new world, participants were feeling guilty that their decision to immigrate to Canada which caused a great risk for themselves as well as for their families. They held themselves responsible for all of the sufferings during their post-immigration period and felt themselves ‘sinking in depression’ with ‘no hope to come out’ of it. Most of the participants were not sure if they would ever be able to achieve the dreams that they had held before coming to Canada. Amina elaborated on her post-immigration experiences and explained that her uncertainties, hopelessness and fears of a dark future led to feelings of guilt and uselessness:

I was feeling guilty that it was my fault to bring my family to this country. I was so shameful that I was not able to see eye to eye with them. There was a huge gap between what we left back home and what our situation was in Canada. We were not able to go back as if it was more shameful for us to return as failures than staying here. It was like a double edged sword for us . . . my guilt was piling up day by day and bringing me down in my own eyes. It was very difficult to cope.

Similar to Amina, Rita also reported her feelings of guilt after coming to Canada. She talked about the significance of the punishment from God as a result of making wrong choices by immigrating to Canada:
When things like this happen, then I feel that it might be a punishment from God. I was not sure why I was being punished. My parents sent me to Canada willingly and advised me to be patient . . . I was feeling guilty that something was still not right and God was giving me a punishment in this way . . . I felt as if I was a useless and worthless person.

Many participants discussed that their acculturation hardships caused emotional distress and feelings of worthlessness since their former identities were altered after coming to Canada. They were considering themselves responsible for their and their family’s sufferings. All of the participants expressed their deep frustrations, despair, disappointment and guilty feeling in their post-immigration period which eventually led to depression.

6. **Sadness: ‘Having dead heart like a barren land’**

The sub-theme of Sadness: ‘Having dead heart like a barren land’ explains participants’ emotional experiences of sadness due to extensive acculturation challenges in their post-immigration period. Some of them reported frequent ‘crying like a small child’ because they found themselves in the middle of a ‘deep well’ with ‘no way out’ and taking a ‘muddy road’ nowhere after immigration to Canada. These analogies had deep meanings of ‘sadness’ when participants were asked for further explanations during the interviews. They were disheartened that they ‘lost everything’ back home to come to Canada and now they were sad that there was ‘nothing left’ in their lives. For example, they explained that they sacrificed their jobs, financial security, socio-economic status, relatives, motherland and cultural heritage to come to Canada but due to acculturation hardships and depression they were feeling overwhelmed, sad and depressed. For example, Perveen expressed her ‘sadness’ upon her decision to immigrate to Canada. She decided to immigrate to Canada with her family because of political instability in her home country. She was concerned about her children’s safety and their future in her home
country. These worries were intensified when one day there was a terrorist attack in her neighbourhood and as a result many people were killed. She thought that after immigrating to Canada, her family would be safe. However after coming to Canada, she became extremely stressed due to facing acculturation challenges which she never expected in her home country such as cultural differences, racism, financial worries and difficulties in following religious practices in a Western country. Despite her efforts, she was ‘sad’ because it was difficult for her to deal with her acculturation hardships and consequent depression:

It was a ‘disgraceful’ experience for me. We used to financially support others in our country and here we were living on charity money . . . what a life? . . . what a bright future for us in Canada? . . . I never thought that we would be so down . . . it made me very sad and sadness was sitting in my heart like a huge black cloud which was spreading everywhere in my body . . . my heart was sinking with these thoughts.

Feelings of dependency and lack of self-sufficiency led to persistent sadness in Perveen. Like Perveen, Amina was also sad and shared that she felt like a ‘dead person’ and used to constantly worry about future of her family in Canada. She immigrated with her family with high hopes of a better future for her children, but after experiencing settlement hardships, she was sad that she had lost her dreams:

My heart was almost dead; I did not feel like doing anything. My interests washed away with my tears and I was dry and sad internally like a barren land . . . it was very sad . . . I did not feel like doing anything.

Participants of the study were not only concerned about their life changes after immigration but they were depressed due to realization of not having the same future in Canada as they thought before immigrating to Canada. Similar to Perveen and Amina, Sara was also
distressed during the initial phase of her settlement period and considered life a constant struggle. She was upset that due to constant disappointments and challenges in her settlement process, her life was completely changed and she was ‘dropped from top to bottom.’ As a result, she lost interest in her surroundings and stayed sad and unhappy most of her time:

I was very sad and used to cry a lot due to being an unsuccessful person . . . my circumstances were so hard and challenging to deal with . . . due to my sadness, I lost interest in my surroundings and could not pay much attention to what was going on around me . . . I noticed problems with my memory as I started to forget things quickly. I was hardly able to manage my daily routine life with lots of sadness and tears.

Many participants like Perveen, Amina and Sara shared their experiences of sadness which led to further challenges in their settlement process. Participants became sad when they felt ‘unaccepted’ and ‘unrecognized’ after coming to Canada. They felt ‘lost’ because they left their homelands for a better future but due to lack of acceptance in a new land, they were ‘regretful’ over their decision to immigrate. For instance, Iman was accepted for immigration on the basis of his professional background. He expressed that he was feeling ‘deep pain’ and being ‘lost’ because there was no charm in life:

After coming to Canada, my mission and my profession seemed too far to me . . . I used to feel tired all the time. These depressed feelings created a negative impact on the whole household environment and also on my personality. Due to the sadness, I used to cry a lot because there was nothing else I could do except crying.

Like Iman, Rita expressed her sadness due to constant stress and feelings of being unaccepted in Canadian culture, she was under a lot of emotional distress and the future seemed insecure and dark to her:
It was stressful experience for me that I did not have any family members in Canada to support me to face these settlement challenges. Due to stress my mood used to be upset and I was thinking negatively all the time . . . life seemed purposeless and future appeared dark to me. One day, I felt as if my brain was like a world globe, and its outer layer was made of lead. I felt as if the lead had fallen apart into small pieces. These small pieces got into the middle of my brain and had a hole . . . there was nothing left for me . . . all washed away.

Almost all of the participants reported that they were ‘sad’ and ‘worried’ due to their changed lifestyle in Canada. They felt like they were at a ‘dead end’ from where they could not return to their home countries because they left everything behind to come to Canada. Participants expressed that their sadness kept them under a constant stress after their immigration to Canada because they considered their immigration as a great ‘loss’ for them. Constant stress and sadness were taking them ‘deep into depression day by day.’

7. **Hopelessness: ‘Soul flew out of the body, a piece of mud’**

Most of the participants were depressed because there was no or little hope in regaining in Canada what they had possessed in their home countries such as job, financial status, safety net of family and friends and an interdependent family structure. Many participants talked about their experiences of feeling a lack of energy when performing their daily activities after their immigration to Canada. They were surprised about their health deterioration because they had never experienced these problems in their home countries. For example, Sara was sad due to having ‘no hope’ for a life that she thought of before immigrating to Canada. Sara reported that she was too depressed to do anything and was feeling completely hopeless:
Due to constant disappointments everywhere, I was total hopeless . . . it seemed that my soul flew out of the body and just a piece of mud remained on this world, which was lifeless . . . I had no energy and my body used to ache all over. I never experienced this before in my home country . . . there was no hope in life . . . I was completely depressed.

Most of the participants were feeling hopeless when they were not able to attain a bright future in Canada which they had wished before coming to Canada. As a result of acculturation hardships, they became disappointed, hopeless and depressed and future seemed ‘dark’ to them. Many of the participants reported feeling a ‘lack of energy,’ ‘no interest’ and ‘hopelessness’ to continue with their struggle of settlement in Canada. For example, Amna realized within the first few months of immigration that it would be a difficult process for her to ‘succeed’ in Canada. She explained that she made many compromises to acculturate within Canadian culture which made her feeling extremely disappointed and hopeless. She explained her difficulties in the following way:

When I realized a dark future here [Canada] for me . . . it was very stressful and I lost all my energy . . . I felt helpless and hopeless and missed my own country . . . I had no energy do things around the house and I used to lay on the bed complaining aches and pains . . . with no hopes to get out of this dungeon [Canada]. Everything was dark . . . there was no light of hope.

Like Amna, when Amina immigrated to Canada, she was very excited thinking that she would be able to find a bright future in Canada. However due to cultural differences and numerous other acculturation challenges, she became sad after immigrating to Canada. She explained that her feelings of distress led to bodily pain and other health related concerns:
I did not know what was going on with me. I experienced extreme weakness all over my body . . . my heart was broken . . . shattered into pieces . . . there was nothing left for me . . . life was totally a waste . . . there was no hope for anything.

Osman expressed his feelings of hopelessness and depression in the following way:

This was definitely not a life that I wished in Canada . . . I was feeling like a dead man . . . I was crying on my life situation as well as by seeing my children in this miserable condition . . . I wished that it would be better if I were not be alive to see all of this . . . no hope, no charm in life.

Like Sara, Amna, Amina and Osman many participants reported that they were depressed to see that their future was not as bright as they had thought it would be before coming to Canada; consequently, they experienced a number of emotional and physical changes, especially when there was no hope for them to anticipate a positive change in their circumstances. As a result of numerous acculturation hardships, they were ‘completely hopeless’ because future seemed ‘dark’ to them.

In summary, Subjective Experiences of Depression explicate experiences of participants in their post-immigration life which were the result of adverse implications of their immigration processes. Participants reported that they had to make compromises to adapt with the Canadian context and many times these compromises were accepted at the expense of their own and their family’s physical and emotional health. Participants’ responses also revealed that as the result of negative experiences of immigration, they experienced and expressed depression through bodily changes first and then recognized changes in their mental, emotional, social and cognitive processes. Participants used various metaphors to express their experiences of depression such as ‘boiling blood’, ‘sinking heart’, ‘squeezing heart’, ‘going deep into a ditch/well with no way
out’, ‘walking around with a deadly heart’, ‘no self-interest’, ‘no self-respect’, ‘being in a dark well and no way out’, and ‘living within a double edged sword.’ They felt hopeless believing that there were no obvious signs of relief and that each day was taking them further away from their dreamland which they created before immigrating to Canada. All of the participants explained that their negative experiences of immigration and depression were inter-related; for example, if one was increased, the other one was also increased with a spiralling effect.

Even though participants talked about their experiences of acculturation challenges and depression, they also shared turning points and coping strategies which helped them to address their post-immigration adversities and depression. They became aware of their inner capabilities and external resources to cope with their challenges when they experienced their turning points. As a result of these moments of realization, they felt encouraged to use various coping strategies to attain their immigration goals. I discuss these turning points and coping strategies in detail in the next section.

**B. Turning Points**

The category Turning Points describes those ‘moments of realization,’ which encouraged participants to face their challenges and emerged from their depression after their immigration to Canada. Participants’ responses revealed that there were moments of consciousness and awareness which led to significant changes in their thinking as well as in their ways of handling their acculturation challenges and consequent depression. Even though participants faced numerous challenges and mental health issues after immigrating to Canada, they also talked about their turning points which encouraged them to think ‘differently’ in a more ‘optimistic’ manner. Consequently, these changed thoughts and ways to deal with their issues helped them to enhance their coping capabilities and motivated them to continue their efforts in dealing with
their acculturation challenges during their acculturation and integration process in Canada. Two types of turning points have been revealed by participants’ responses: Internal Turning Points and External Turning Points (see Figure 9) which are explained through participants’ excerpts in the following section.

**Figure 9. Sub-themes Related to Turning Points**

1. **Internal Turning Points**

   Many participants discussed their internal experiences of realization, which led to changes in their thinking and empowered them to take charge of their life circumstances. Three categories emerged under Internal Turning Points, which include: Rediscovering oneself: ‘I have to change’; Standing up for Others: ‘Seeing loved ones fail’; and Restoring through prayers: ‘God will protect me’ (see Figure 10).

**Figure 10. Categories Related to Internal Turning Points**
a.  *Rediscovering oneself: ‘I have to change’*

Many participants explained that there were turning points in their lives which encouraged them ‘to look inside’ and to rediscover their inner strengths. For example, Sara shared that she was feeling depressed and there was no charm in her life after her immigration to Canada. However, her life was changed when she was engaged in the self-analysis process which changed her thinking. She called it a ‘turning point’ which helped her to re-gain her personal strengths and encouraged her to think positively. As a result, she felt more self-reliant and self-empowered to face harsh experiences of immigration after coming to Canada:

One day I was feeling overwhelmed with my problems . . . I was looking through my old photo album . . . it refreshed my old memories . . . I started thinking about myself . . . I decided to stand up on my own feet to become the same person as I used to. After having this change in my thought processes, gradually I felt as if I have re-gained my internal power . . . it helped me to be courageous to face life challenges and to find my path to success [settlement].

Like Sara, Sunny was feeling depressed because he failed in school and was wasting his time in the company of bad friends. He was sad that he was not able to fulfill his dreams of a bright future in Canada which he had before leaving his country. One day, he was wandering around in a street and met with his old friend from his home country. Sunny never met with this friend after immigrating to Canada. Sunny felt ashamed seeing his old friend because Sunny was a shining star in his school in his home country and everyone had high expectations of Sunny; however, after coming to Canada and facing numerous acculturation challenges he was unable to be this shining star. After meeting with his old friend, he wanted to become the same person as he was in his home country. Sunny called meeting with an old friend a turning point in his life:
When I saw my old friend and the way he looked at me, I became ashamed of myself . . . I was completely changed after coming to Canada . . . I could never forget that moment when I met with my friend . . . after meeting with him, I decided to become the same as I used to be . . . After that I started working on myself to explore my capabilities.

Sunny explained that after meeting with his friend, his approach towards dealing with his problems changed. He felt motivated to work on his challenges to achieve his goals in life. Some participants shared that when they realized the negative impact of acculturation difficulties and consequent depression on their overall health, they experienced a moment of awareness which led to rediscovery of their capabilities to bring positive changes in their lives. Participants called these moments of realization ‘turning points.’ For instance, Perveen shared that when she realized the ill-effects of lack of self-care and gradual deterioration of her health, it was a moment of consciousness for her and she decided to do ‘something’ to bring her ‘life’ back to where she was before coming to Canada:

One day when I looked into a mirror . . . I was shocked to see . . . It was not me . . . It seemed that I was looking at someone who was 50 years older than me . . . I was completely changed . . . my skin seemed pale and lifeless . . . I realized that something was changed inside of me after looking at my reflection into the mirror . . . I wanted to bring back the same energy and glow on my face that I used to enjoy before coming to Canada. During that moment, I felt a strong change in me to rediscover myself to improve my life circumstances.

Perveen decided to re-discover her inner capabilities to bring back the same life that she had had before coming to Canada when she experienced the moment of realization which she
called a turning point. Iman explained that reading a self-help book was a turning point for him which changed his approach to deal with his problems:

I had nothing to do in those days or did not feel like doing anything due to depression . . . Just to kill my time, I went to a public library and borrowed a self-help book . . . this book changed my life . . . After reading that book, I realized that it was important to discover and acknowledge my capabilities and trust on myself that things would be improved . . . I felt a new energy and enthusiasm after reading that book.

Like Sara, Sunny, Perveen and Iman, many others explained that when they had turning points in their lives, they felt a new energy in their bodies which encouraged them to look inward and to ‘re-explore’ and ‘re-discover’ their inner qualities. This process of inner discovery was like a ‘spark’ in their lives, and they became determined to find their innate strengths to cope with their acculturation challenges and depression in order to settle and adapt in Canada.

b. Standing up for Others: ‘Seeing loved ones fail’

Many participants reported that affection for their loved ones was instrumental in making them reach a turning point. Furthermore, these participants explained that when they realized that their loved ones were in a difficult situation, they wanted to stand up for them and to protect them from any further hurt and pain. Thus, participants called these moments of realization turning points in their lives which not only encouraged participants to stand up for their loved ones but also empowered them and boosted their energies to resolve their and their family members’ challenges. For instance, Amina shared that her family responsibilities ‘opened’ her ‘eyes’ to be strong to take care of herself as well as her family members:

When I saw my husband was going down, then I decided to put everything together and to take charge of things going around me. I made up my mind to trust on my skills and
capabilities . . . I knew myself . . . if I decided to do something; I would go for it devotedly.

It definitely helped me to start working on our situation rather than sitting still and feeling depressed.

Like Amina, Ali also explained that his sense of responsibility, as a head of the family to ‘protect’ his family from acculturation adversities, was instrumental in bringing ‘change’ in his thinking process. After realization of his role and strong sense of protection for his family, he decided to stand up for his family. This eventually led him to trust his capabilities to safeguard his family members from any further challenges:

When I saw my children suffering and every day their condition was getting worse . . . I realized my responsibilities towards my family, I fastened my belt to keep going ahead . . . it re-awakened my trust on my abilities and I started to make every effort to settle here [in Canada] for the sake of my family . . . it was amazing.

Similar to Amina and Ali, many other participants explained that they ‘put themselves together’ to face their acculturation hardships after seeing their loved ones fall. For example, Rita explained that she immigrated to Canada alone, but she was in a regular contact with her family members in her home country especially with her parents. One day, Rita telephoned her father who told her that her mother was continuously sick due to Rita’s sufferings in a ‘strange country.’ Rita called that moment ‘a moment of realization’ for her when she became aware of the negative impact of her sufferings on her loved ones. Rita decided that she would stand up for her mother and other loved ones. This was her ‘turning point’ and it motivated her to face acculturation hardships and to deal with her depression:

I felt something was broken inside of me after listening about my mother’s sickness . . . my mother was so worried about me . . . I decided to take a stand . . . no more . . . no more . . .
I cannot let this happen to my family . . . to my mom . . . that was a turning point in my life . . . after this I did not feel myself a loser.

As Rita decided to change for her mother so that Rita could protect her mother from any further worries about Rita, Perveen also related her experience with her daughter as a turning point which made her realize the bad effects of her acculturation stress and depression on her daughter:

My daughter was very sad when she returned home from school . . . she told her brother that we were nothing here [Canada], very poor . . . we could not buy things as we used to in our home country . . . why did we come here. When I heard her saying this to her brother, I started crying and something was broken inside of me which took away the clouds of hopelessness . . . I felt myself strong to provide the same life to my children as they used to enjoy before coming to Canada.

Many participants reported that they became emotionally disturbed to find their loved ones in pain and wanted to protect them from any further damage. As a result of experiencing their turning points, these participants felt energized to protect and to provide their families the same lifestyle which they were enjoying before coming to Canada.

c. **Restoring through prayers: ‘God will protect me’**

Many participants considered their deep connection with the Supreme Being through prayers as a turning point for them. This deep connection helped to uplift their moods and to be hopeful for their future. For instance, Doctor explained that he was feeling depressed after experiencing numerous challenges to settlement and adaptation in Canada. Doctor was hospitalized after being diagnosed with clinical depression. He reported that one day he was sitting in his room having no hope in life and considered himself as a ‘total failure’, when
suddenly, he realized that it was prayer time; he felt an ‘internal urge’ to pray at that time and be emotionally connected with God. He called this moment a turning point in his life:

On that day when I started to pray and asked for God’s blessings, I felt deeply connected with God . . . a great relief after praying and connecting with Him . . . Since then, I continued praying regularly and there was a tremendous change in my thinking . . . I became more hopeful towards my future . . . my doctors were excited to see me improved drastically.

As Doctor’s deep connection with the Supreme Being changed his thinking, Rahat also shared that her strong connection to God through prayers was a turning point for her. One of Rahat’s friends discussed with her the importance of regular prayers which could lead to the ‘shower of God’s blessings’ and ‘support’ in her difficult times. Rahat followed her friend’s advice and started praying to God, and asked for His blessings regularly. One day, when Rahat was praying as usual but somehow she felt a deep emotional connection with God as if He had created a special ‘shield’ of protection around her. After getting a strong sense of protection from God, she felt relieved and called this moment of realization a turning point in her life:

On that day while praying something inside of me was changed . . . I felt different as if God had surrounded me with His protection . . . it was amazing and life seemed different to me as if a Greater Power had empowered me and would take me out of the problems.

Like Doctor and Rahat, Osman reported that he was completely disappointed with his life after immigration to Canada. He went to a mosque for his Friday prayers. After the prayers, the Imam made a speech on God’s miracles and support and hope for His followers. Furthermore, the Imam talked about hopelessness as the biggest sin in Islam. Osman felt very emotional while listening to the Imam’s speech and asked for God’s forgiveness for being so hopeless in life:
I started to cry when the Imam told that those Muslims who were hopeless were committing the biggest sin by negating His power of doing miracles. I felt sorry for being so hopeless . . . I asked for God’s pardon and begged Him to change my life too. I was crying heavily at that time and my tears cleaned up my heart and my mind . . . I felt as if I took a new birth . . . a new sense of empowerment and hope aroused in me and I felt deeply connected with God.

Osman considered his deep connection with God and newly emerged sense of empowerment as a turning point, in his life which made him hopeful towards his future. Through his deep connection with God, he felt energized to deal with his acculturation hardships because after experiencing his turning point he was confident that God would support him. Like Osman, many other participants expressed that the deep connection with God was a moment of realization in their lives which brought a significant change in their thinking and approach to deal with their problems. For instance, Rita explained that her mother advised her to perform special prayers to God and to ask for His blessings every day. Rita reported that she followed her mother’s advice to pray regularly, and her life changed when she experienced a deep connection with God which brought a significant realization and awareness to her:

As usual, I took my prayer mat to my room and started to pray . . . on that day, I was very sad and during prayers I kept on crying for hours and asking for His support . . . while praying and crying for God’s help, I fell into asleep . . . I saw an old man in the dream who was consoling me and ensuring me that God would take care of me . . . when I woke up I felt myself a different person . . . I felt light and deeply connected with God . . . I had full confidence that He would protect me and my family . . . after that I never felt alone in my efforts to make a positive change in my life.
Rita called the moment of a deep connection with God a ‘turning point’ in her life as it changed her thinking as well as response towards her acculturation challenges. As a result of this turning point, she started to feel a ‘deep connection’ and trust in God that He would protect her from any adversities in life.

2. External Turning Points

In addition to Internal Turning Points, many participants talked about External Turning Points, which encouraged them to have positive perceptions of their circumstances and external world. These External Turning Points encouraged them to access environmental support and empowered them to move forward in the process of coping with their acculturation challenges and depression to settle and adapt in Canada. Two categories emerged under External Turning Points, which include Following the Example of Others: ‘I can also do it’; and Getting Canadian Credentials and Finding employment: ‘Hopes for a better future’ (see Figure 11).

**Figure 11. Categories Related to External Turning Points**

<table>
<thead>
<tr>
<th>External Turning Points</th>
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<tbody>
<tr>
<td>Following the Example of Others</td>
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<tr>
<td>Getting Canadian Credentials and Finding Employment</td>
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</tbody>
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a. Following the Example of Others: ‘I can also do it’

Many participants considered Following the Example of other individuals who were going through challenges and emotional turmoil in their lives but were determined to face their hardships courageously, as a turning point for them. They explained that observing others in a similar condition was a moment of realization for them. In addition, they realized that they were
not alone facing challenges and emotional difficulties as many others were also going through the same process. Participants reported that as a result of experiencing these turning points, they experienced a positive energy and hope for the future. For example, Fatima explained her experience of meeting with a friend who was also struggling to get her accreditation to practice as a medical professional in Canada. Fatima reported that her friend was hopeful that she would be able to attain her accreditation to practice in Canada. Seeing her friend so optimistic about her success was a turning point for Fatima; consequently, Fatima also felt empowered to continue her struggle in making efforts to attain her goals in life rather than feel depressed and consider herself a failure:

My friend visited me from Montreal . . . we went to school together in our home country. After coming to Canada, she was struggling in the same way as I was struggling. However, she was very strong and hopeful that she would be able to attain her goals . . . by seeing her so hopeful I realized a change in me . . . I became hopeful too for my future.

After meeting with her friend, Fatima was inspired by her positive approach and motivation to do ‘something’ in life and called this meeting a turning point to move ahead with her struggle for achieving her accreditation in Canada. Like Fatima, Amna was also depressed due to acculturation hardships especially raising her daughters in a Western culture. Due to a strong concern about her daughters’ upbringing, Amna drastically limited her social life. One day she went with her husband to a mosque where she met with a woman who had four daughters. Despite being born and raised in Canada, these girls were very religious. Amna expressed her worries about the upbringing of her daughters with the woman. In response, the mother of the girls shared her experiences of raising four daughters in Canada. After talking to that woman, Amna’s thinking changed significantly and this became a turning point in her life:
I was fearful that my daughters would be spoiled in the Western culture. I was scared of going out and meeting with others because I did not want my daughters to get any bad influence . . . When I met with that woman and her four daughters in the mosque, I was greatly impressed and that was a moment of realization for me that I could still do a lot for the better upbringing of my daughters and it made me relaxed to move ahead in my journey of settlement.

Amna called meeting the woman and her four daughters a moment of realization which changed her thinking and shattered her worries about her own daughters. As a result, she felt motivated to explore opportunities in her neighbourhood; to settle and adapt in Canada. Fowad also considered meeting with someone in his apartment building a turning point:

I met with someone who recently moved to our building . . . one day, he told me that he had a virus attack a few years ago and doctors lost hope for his recovery . . . but he was hopeful that he would be able to survive . . . when I shared my problems with him after immigration to this country [Canada], he started laughing . . . he told me, nothing is a problem unless you make it a problem for yourself . . . I do not know what was in his words that I started to feel different . . . I thought that I could do something to stop thinking about my problems all the times and to be optimistic about my future.

Meeting with that person who was so optimistic and courageous to “fight off” a deadly virus was a turning point for Fowad. As a result, he decided to change his approach towards handling his problems. He decided to deal with his issues with fresh energy and confidence which started to extend in every aspect of his life. Many other participants shared the same feelings after meeting with people who were courageous despite having so many difficulties in
their lives. For example, Rahat reported that she realized a huge ‘internal change’ after meeting with a stranger in a local public transit and called that moment a turning point in her life:

I was travelling in a subway and there was another female sitting next to me. We started talking . . . I was astonished to hear her story that in a terrorist attack her whole family was killed in her home country and she moved to Canada as a refugee . . . she was working as a volunteer with an international peace organization to bring peace and harmony in the world. I was amazed to see that woman was still determined after losing her children, relatives and everything . . . she was still hopeful that she could bring change in this world. During that meeting, I felt that something changed in me . . . I felt empowered and decided to be strong to face not only my own problems but also to support others.

Fatima, Amna, Fowad, Rahat and many other participants also shared that after seeing others in difficult situations but with positive mind frames, they became hopeful and decided to face their acculturation hardships and mental health issues with new energy and enthusiasm.

b. Getting Canadian Credentials and Finding Employment: ‘Hopes for a better future’

Many of these participants became hopeful for their future and/or their children’s future in Canada after attaining success either to get employment in their professional fields or to get further training in their fields, which they called turning points. For example, like many other participants, Iman explained that when there was a possibility of acceptance of his professional credentials in Canada, he became hopeful about his future. He also expressed that the hope to return to his professional field was instrumental in finding his way to settlement:

When I started to prepare for professional registration examinations to get my pharmacist’s license, I became hopeful for my future in Canada. At least, I was starting from
somewhere, and it was the beginning of my positive energy which changed my perception and helped me to settle in Canada.

Rahat was sad due to her acculturation challenges after her immigration to Canada. When she started university classes in Canada to upgrade her qualifications, she became hopeful that she would be able to settle and adapt:

I was very sad those days . . . walls were getting tighter and tighter around me due to so many problems after my migration to Canada . . . I got new hopes and new ambitions to give a fresh start to my life when I started going to the university . . . this hope brought a new spirit and a new energy in me . . . I felt strengthened to cope with my life challenges in order to settle here.

Like Rahat, Doctor also became hopeful for a bright future in Canada when he started working towards his master’s degree in Pharmacy:

When I was accepted for the master’s program . . . I became hopeful that it was a beginning of my bright future . . . my other problems would be resolved too . . . I realized that with my new hopes problems around me started to shatter . . . I became hopeful which encouraged me to move ahead in my journey of settlement in Canada.

Further to finding an opportunity to be connected with upgrading their academic and professional fields, those who were able to find employment expressed ‘boost of energy’ and ‘new hopes’ when they felt recognized and financially stronger in Canadian society. Perveen expressed her happiness when she got a job as a settlement counsellor as it was her first office job after immigrating to Canada; otherwise, she had been working in survival jobs to financially support her family:
My life changed after getting this job [settlement counsellor]. Before this I was very depressed, and thought as if nothing would change in my life. I started feeling happy in Canada and this happiness brightened me from inside out with new hopes . . . things seemed different around me. I felt energetic and hopeful to deal with my life circumstances which helped me to settle in Canada.

In addition to finding employment for themselves, some participants shared their ‘joyfulness’ when someone else from their family was able to find work, especially partners. It was a source of ‘aspiration’ and ‘hope’ after seeing their partners or family members become financially independent to continue their efforts to settle in Canada. For example, Amina expressed her happiness as follows:

When my husband got a job . . . I felt very happy and empowered that our future would be bright in Canada . . . I felt energetic . . . felt a connection with Canada which eventually helped me to overcome my acculturation challenges and depression to settle here [Canada].

Most of the participants reported that getting involved in the process of attaining Canadian credentials and/or finding a job were significant turning points for them. All of the participants stated that they acquired positive energy when they became hopeful for their and their children’s future in Canada. As a result, this positive energy and hope instigated a new energy in them to face hardships and other challenges of life. For instance, Ali was not happy with his life after immigration but after getting a job, when he saw his children getting a better future in Canada, he became hopeful for his settlement:

First generation is a burning generation . . . after getting a survival job, I became hopeful that things would turn good for my children . . . these thoughts kept me going, and I
started to come out of depression. As the result, I became hopeful for my children’s bright future in Canada which motivated me to settle here [Canada].

Ali felt motivated to settle in Canada when he realized that as the result of attaining a job, he would be able to meet some of his family’s needs. Many participants were hopeful for their future when they started to notice a slight improvement in their personal and professional lives after immigrating to Canada. All of the participants talked about turning points which occurred when they were in the midst of disappointment and hopelessness. As the result of experiencing these moments of awareness, their thoughts and approaches to handling their problems were changed. These turning points led to a flow of hope and positive energy; consequently, participants felt empowered to explore coping strategies with regards to their acculturation hardships and depression. I discuss these coping strategies in detail in the next section.

III. **Coping and Becoming Acculturated: Settlement and Belonging**

All participants explained that after experiencing various turning points, they felt empowered to make positive changes in their lives to resolve their problems. As a result of these changes, participants felt motivated to use a number of coping strategies to face their acculturation adversities and depression. These coping strategies helped them to be resilient and to deal with their acculturation hardships and mental health challenges collectively, rather than addressing them in a linear fashion. For example, one participant reported seeking professional mental health services from a psychiatrist, while others preferred to use their traditional, religious and cultural coping strategies (e.g., seeking support from family members, friends, religion, prayers, social networking and religious congregations) to face their acculturation challenges. Thus, multiple coping strategies on the whole helped participants to develop their resilience to deal with their overall acculturation challenges and depression. Therefore, it is
difficult to conclude which coping strategy was more empowering than the other; however, all of them had a collective impact on participants’ resilience and coping capabilities allowing participants to continue their struggle for settlement in Canada. As the result of using coping strategies, all participants became hopeful for their future and/or their children’s future and reflected on a process of internal growth and empowerment arising from their sense of belonging and becoming acculturated and settled in Canada. In the section of ‘Coping and Becoming Acculturated: Settlement and Belonging,’ four themes emerged as key variables: Becoming Empowered; Finding Strength in Religion; Extending Social Connections; and Reaching out to Community Resources (see Figure 12). These themes address how participants coped with their depression which further helped them to deal with their acculturation challenges.

**Figure 12. Themes Related to Coping and Becoming Acculturated: Settlement and Belonging**

![Diagram of themes]

- **Becoming Empowered**

  Participants’ responses revealed that there were a number of coping strategies which helped them to become empowered and continue making efforts to settle and adapt in Canada. Three sub-categories emerged under the category of Becoming Empowered which include ‘Looking inside and exploring strengths’ led to moving ahead; ‘Having closeness to cultural
roots’ like a Food for Soul; and ‘Learning the English language will help you reduce depression’ (see Figure 13).

**Figure 13. Sub-themes of Becoming Empowered**

![Diagram](image)

i. ‘Looking inside and exploring strengths’ led to moving ahead

The sub-category of ‘looking inside’ captures participants’ personal characteristics and process of self-analysis that promoted their self-confidence to be resilient and hope for a better future. After their turning points, nine participants discussed how ‘looking inside’ boosted their self-reliance and self-confidence in order to come out of depression and to feel energized to acculturate themselves within the Canadian context. They explained that the process of ‘looking inside’ generated further trust in their personal capabilities in order to find solutions to their problems to overcome their challenges. Participants’ self-reflections not only helped them to depend on their inner strengths, but also to continue making efforts for a better life in Canada. For example, Rita explained that when she experienced numerous challenges after coming to Canada, she became depressed. After going through a process of ‘inner observation,’ she realized her capabilities to explore her options of settlement in a new land. She reported that the process of self-analysis was an ‘eye-opener’ for her, and she became aware of her strengths that she always possessed but due to difficulties in her post-immigration life, they were ‘pushed behind.’ As the result of recognition of her personal strengths, her self-trust and self-reliance
were increased, and she became determined to face her acculturation challenges and depression courageously. Thus, she reported a ‘positive change’ in her life as the result of ‘self-realization’ of her ‘inner strengths’ which encouraged her to stay persistent with her struggle:

Sometimes you do not remember what qualities you have, but by looking inside you can explore your strengths. This is what happened to me when I was going down . . . when I realized my inner strength, it worked as a light at the end of a tunnel . . . it motivated me to continue my efforts to settle here [Canada].

Like Rita, most of the other participants explained that their persistence and self-reliance generated a cognitive shift, which helped them to re-connect with their internal strengths to cope with their post-immigration life challenges. As a result, this cognitive shift generated resilience and further enhanced participants’ coping capabilities. For instance, Osman explained that when he realized that he was still the same person who had previously been able to cope with his challenges before, his thinking style was changed.

After facing so many challenges, initially, I thought as if I was a total failure . . . my life in my home country was full of courage, then I realized that I could use the same skills to find my way in Canada . . . I continued working hard with patience despite the fact that there were so many hardships in my way . . . I persistently kept on moving forward which boosted my energy to face post-immigration challenges in Canada in order to settle here [Canada].

When Osman realized his internal strength, he felt empowered to deal with his challenges after immigration to Canada. When participants realized their personal capabilities through the process of self-reflection, they started to trust themselves and noticed changes in their thoughts.
which eventually brought positive changes in their abilities to deal with post-immigration challenges.

Almost all of the participants shared that their process of ‘looking inside’ was instrumental in uplifting their internal psyche. As a result, they became motivated and received positive energy to face their life challenges ‘courageously.’ They reflected on a process of internal growth that was driven by their self-reliance and self-confidence to trust in their capabilities in the face of acculturation stress and depression.

ii. ‘Closeness to cultural roots’ like a Food for Soul

The sub-category ‘closeness to cultural roots’ explicates the way participants’ community identification and togetherness contributed to a positive health state of newcomers. They stressed that by staying close to their ethnic communities they were able to seek their ethnic identification in the Western culture. Many participants reported ‘community support’ and ‘closeness to roots’ were very important to them. Participants associated their closeness to their ethnic communities with their strength which helped them to come out of their mental and emotional distress. Closeness with their ethnic community provided them a platform to be proud of their ethnicity, cultural heritage and traditional roots. For example, Fatima detailed a period of mental and emotional stress which she dealt with after connecting with her own community group. She was quite overwhelmed at that time due to her post-immigration stresses. She discussed the sense of hope and resilience that emerged as the result of her cohesiveness with her ethnic community:

I will highly recommend newcomers not to leave their cultural roots and stay close to their communities . . . not to lose your identity by getting indulged into this environment [Western culture] around you. Thank God, I was able to get involved in my own
community activities. I was decaying and fading day by day due to stress caused by the settlement process until I got connected with my own people . . . it helped me to face challenges and to stay strong in my struggle to get settled here [Canada].

Many other participants shared Fatima’s views that community cohesiveness played a critical role in developing their coping skills to address their challenges. For example, Fowad shared his views as follows:

I was very pleased when I came to know people from my community. It was very difficult to survive without nourishment and support from my community. I think we can live without food, but not without our community. Since the time I started to live close to my own community, I was able to find myself closer to my roots; otherwise I was very stressed and depressed due to so many problems here [Canada] . . . finding support from my community was instrumental in helping me to settle here [Canada].

For Fowad, staying close to his ethnic community was both a source of ‘nourishment’ and a way to lead to settlement in Canada. Like Fowad and many other participants, Ali spoke highly about connectedness with his culture and living within its guidelines and parameters which helped him to overcome his depression:

Culture is like a circle; within this circle a person lives his life. For example, as Muslims and Pakistanis, certain boundaries are explained to us and we cannot go beyond these boundaries . . . after coming to Canada, my culture and my ethnic affiliations helped me to come out of depression and to bounce back in face of adversities.

In addition to the contribution of the ethnic community, participants talked about ethnic community leaders who contributed to their self-confidence to face hardships and mental health
issues after coming to Canada. For example, Sunny expressed his thanks for the support from his community leaders who helped him to face challenges and get settled in Canada:

Thank God we have our community here. If anyone has any problem, community leaders try to support, this is like a mentorship program . . . Personally, whenever I asked for any assistance [from leaders] . . . I was blessed with it. It helped me to cope with settlement challenges after coming to Canada . . . I am really thankful to them [leaders].

Sunny appreciated the support and mentorship from his community leaders, which boosted his ‘self-esteem’ to buffer against the challenges of life. Like Sunny, Perveen admired the community leaders’ support which not only helped her emotionally, but also inspired her to extend the same support to many others who were in need:

It was so supportive to have someone from your community whom you can look up to . . . you can spend time and get emotional support to keep your hopes high. Through support of a community leader, my whole life was changed and I became hopeful to achieve my goals here [Canada] . . . now, I try to support others in the same way as I was supported in the time of need, when I was a newcomer.

Those participants who were able to connect with their communities and community leaders were thankful that their support made a positive difference in their settlement process in Canada. Almost all of the participants considered closeness to their cultural roots as a food for their soul which empowered them to cope with their acculturation stress and depression. Through this closeness, they felt well-grounded into their culture roots which empowered them further to deal with their challenges and to get settled in Canada.
iii. ‘Learning the English language will help you reduce depression’

Learning and developing competency in the English language emerged as an important element of facing their acculturation hardships and depression. Many participants explained that they gained self-confidence and felt themselves empowered by learning the English Language. The English learning process had a two-fold benefit: participants gained self-confidence and enhanced their opportunities to integrate into Canadian society. This way, learning the English language was an added benefit for these participants, and this ultimately helped them to deal with their acculturation challenges and mental health issues.

Many participants discussed learning English language as one of the main contributors to their coping capabilities which led to their settlement in Canada. Sunny started attending high school after immigration. He had difficulties doing his work as well as communicating to others due to problems with English language competence. He reported improvement in his studies and in his overall settlement process when his language skills improved:

This is a fact wherever you go; you need to learn the language of that country. If you do not know the language, then you are lost . . . when my English language skills were improved, then I noticed myself strong enough to deal with my challenges . . . My interest in studies and school performance were improved after picking up the English language, and it helped me in my settlement process.

Fatima came to Canada after completing her degree in medicine. At the time of her immigration, she had no difficulty with the English language. However, she expressed difficulties with the North American accent which lowered her confidence level. She explained, “it was a great help when I picked up the accent. It helped me to boost my confidence to deal with my problems to acculturate here [Canada].”
After her immigration to Canada, Amna stayed home most of the time. Her life was confined within the ‘four walls’ of her house. As a result, she felt isolated and depressed and was hopeless about her future. Her views about learning the English language highlighted the way she gained a sense of self-confidence as well as being able to establish social connections with other new immigrants.

My life changed when I started to learn English through a community centre . . . learning English language helped me a lot . . . while learning English, I was able to develop a social circle . . . mostly people in that circle were facing the same challenges and offered support to each other. I will recommend this to every newcomer to go out and learn the English language . . . this will help you to reduce your depression as it helped me.

Thus, the process of learning English language enveloped most of the participants in an environment of empowerment, which they believed was a buffer against depression. They felt themselves confident and integrated after gaining competency in English and developing friendship through social networking during the process of learning English. Therefore, learning English helped in coping with depression and this eventually led to positive acculturation.

b. Finding Strength in Religion

Both words, ‘religious’ and ‘spiritual,’ were used interchangeably by the participants to explain the support that they gained from a higher power based on their Islamic faith and prayers to the Supreme Being. Two sub-themes emerged under Finding Strength in Religion, which include ‘Having faith in God strengthened me emotionally to face life challenges’; and ‘Praying to God made me strong to face the life circumstances courageously’ (see Figure 14).
Figure 14. Sub-themes Related to Finding Strength in Religion

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Finding Strength in Religion

Having Faith in God

Praying to God
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i. ‘Having faith in God strengthened me emotionally to face life challenges’

Faith was described as one of the main support mechanisms which helped participants to resist and cope with acculturation stress and mental health issues. All of the participants discussed that their strong faith led to a deeper connection with the Supreme Being, and this strong connection eventually strengthened them to cope with their acculturation challenges and depression. Rita explained the way her relationship with a higher power provided her emotional strength:

Mental satisfaction and religion go hand in hand. If you hold onto your religion and stay strong, then I think you are able to overcome your depression. My religion and faith strengthened me to face adversities of the settlement process by staying connected with God . . . it gave me hope and strength.

Rita felt emotionally strengthened as a result of her faith in God, similarly Fowad also shared his strong religious beliefs which sustained him emotionally to cope with his acculturation challenges and depression:

My belief in God supported me. I am a Muslim person. I get my religious and moral support through my faith in God. It helps me to awaken my internal abilities that God has
given me. When I came to Canada, I became very depressed to see so many problems around me. Then, my strong faith in God helped me to face life challenges.

As Fowad explained, by connecting with God, his faith was strengthened and consequently he felt empowered to face challenges of life. Many other participants described that their strong devotion and faith helped them in developing a close connection with God and a better understanding of life which helped them to face any upcoming life challenges. Perveen explained that her strong faith not only helped her but also prompted her to motivate many others to stay hopeful for the blessings of God during their stressful time:

My belief in God and strong faith that only He [God] could take me out of difficulties kept me hopeful . . . As God has explained in the Holy Quran the life of our Prophet Mohammed (Peace Be Upon Him-PBUH) was full of these kinds of examples but God protected him (PBUH) from all evils . . . My strong belief on God and teachings of the Holy Prophet (PBUH) helped me to cope with my challenges.

Similar views to Perveen’s were shared by many other participants who described examples from the last Prophet’s (PBUH) life where he and his followers faced hardships, but he always advised them to stay hopeful for God’s blessings. All of the participants considered hardships in life as a test of their faith in God, and if they passed this test, then they would be successful in life; otherwise, they would never be able to get out of this ‘tornado’ [difficult life circumstances]. For example, Ali shared how he was able to keep thinking positively because of his strong faith in God’s blessings:

I have a strong belief that God is a Supreme Being and can do whatever He likes to do.

We should keep a strong belief that He [God] would give us whatever we deserve.

Sometimes we are tested . . . problems after immigration were a test for me but as there is a
hope to see a day after a dark night... my faith in God kept me strong during the dark
days filled up with stress... There are many Quranic verses which guide us in this regard.
... I always encouraged my family members and other friends to have a strong faith in
God’s blessings.

Fowad had similar views to Ali and believed that participation in religious ceremonies and
meeting with other Muslims offered him strength to come out of depression:

Religion helped me to come out of depression. Actually, spiritual and religious support is
everything. If we get religious atmosphere, then automatically we feel empowered. This is
the only support which can take us out from darkness to the brightness of life. It
strengthened me to face acculturation hardships and depression after coming to Canada.

Many other participants also explained that they became hopeful when they ‘diverted’ to
religion with a strong belief that God would protect them and take away their life challenges.
They considered that ‘trust’ and ‘hope’ were contributing factors to cope with their acculturation
challenges and depression and to attain their goals of settlement. For example, Sara expressed
her views as follows:

I must say that Religion helped a lot... Even though I faced so many difficulties after
coming to Canada, my strong belief on God and regular prayers took my mind away from
those problems... they kept me hopeful that it [acculturation stress] was just a phase and
not my destination.

In summary, all of the participants expressed that their strong faith in God helped them to
develop a deeper relationship with the Supreme Being in order to cope with their acculturation
challenges and depression. Participants highlighted a connection between their strong faith in
the Supreme Being and emergence of abilities to cope with their acculturation stress and
depression after immigration to Canada. Thus, strong faith in God contributed in their abilities to cope with acculturation stress which eventually reduced depression and prevented further experiences of depression.

ii. *Praying to God made me strong to face the life circumstances courageously*

In addition to having a strong faith, most of the participants highlighted the importance of praying to the Supreme Being which worked as a protective shield to support them to settle and adapt in a new land. For Muslims, it is mandatory to pray five times a day. Many participants shared that their religious commandments helped them to feel relieved and to attain peace of mind. Many participants described a link between increased involvements in their prayers as a coping strategy to fight against their acculturation stress and depression after immigration to Canada. For example, Osman talked about his connection with the Supreme Power through regular prayers which relieved him from many worries and he felt protected that God would take care of him:

> My regular prayers helped me to come out of depression and to deal with settlement challenges . . . Prayers helped me to feel internal satisfaction and peace of mind . . . there is a Supreme Power which is holding the whole world and keeps things moving and that Supreme Power takes care of me and my family in every moment.

Some participants were not regularly praying five times a day before coming to Canada; however, when they faced acculturation challenges and constantly were under stress and became depressed, they felt an internal desire to stay connected with the Supreme Being through regular prayers of five times per day. Like Osman, some participants also shared that their family members and friends were instrumental in motivating them to establish their link to God by praying regularly. Like many other participants, Rahat also explained that by following her
prayers and other religious guidelines, she felt strong which gave her courage to confront her problems as many Prophets have also gone through these tests of hardships, especially the last Prophet (PBUH):

In the face of settlement difficulties and stress, my closeness to God as well as prayers helped me to understand the details of life. When I realized that I was not the only one who faced all of this... God has tested his Prophets through many hardships and helped them to come out of them... my faith in God as well as my prayers became more deep... this made me strong to face life circumstances courageously after coming to Canada.

All of the participants reported that they felt themselves close to God through their prayers and this connectedness made them feel strong and protected to face the adversities of life. Through their prayers, participants established a connection with God to ask Him for blessings and support in face of acculturation stress and depression. They had full confidence that God would give them whatever they deserved and their prayers were a way of leading to God’s blessings. This connection gave them hope and motivation to cope with their challenges in a new land.

**c. Extending Social Connections**

The category, Extending Social Connections, refer to the support that participants received from their family and friends as well as from their religious and cultural communities during their process of acculturation in Canada. All of the participants shared that support from their family members, friends and connections to the larger Muslim community was instrumental in helping them to see their life circumstances positively. Participants’ strong connection with their social networks eventually helped them to cope with their acculturation challenges and stress effectively. From participants’ responses two sub-themes emerged under Extending Social
Connections which include Receiving Support from Family and Friends: ‘Reduced isolation and a source of moral and emotional support’; and Networking with a larger Muslim Community ‘takes us out from darkness to the brightness of life’ (see Figure 15).

**Figure 15. Sub-themes Related to Extending Social Connections**

i. **Receiving Support from Family and Friends: ‘Reduced isolation and a source of moral and emotional support’**

Most of the participants explained that they received ‘encouragement’ and ‘support’ from their family and friends during their process of acculturation in Canada. For example, participants explained that they received a boost from their family and friends within their socio-cultural context to uplift their mood and to empower them to face life challenges after immigration to Canada. All of the participants, whether having relatives living in Canada or overseas, shared that support from their family and friends was instrumental in helping them to see their life circumstances positively; otherwise, it would have been difficult for them to face these hardships during their post-immigration period. They reported that this support was immensely helpful for them to move forward in the journey of settlement in Canada.

With regards to support from family and friends, all of the married participants appreciated their life partners’ support to ‘uplift’ them from depression and to face post-immigration
difficulties courageously in finding their goals in life. For example, Amna described that support from her husband was indispensable to deal with acculturation stress and to get settled in Canada:

When I came here, my husband provided me support at each and every step. Whenever I was feeling down emotionally, my husband empowered me to pull myself to go ahead. He always encouraged me to take the positive perspective of things and to view challenges as a temporary phase of life. It helped me to feel myself strong to move ahead.

Fatima also appreciated her husband’s support and considered his support helpful not only in going through the settlement hardships but also strengthening her marital relationship:

My husband’s support helped me to look at the good things in Canada . . . His [husband’s] attitude and support, I can never forget . . . it enhanced my trust on him and further rooted our marital relationship which eventually helped me to come out of depression and to work towards settling in Canada.

In addition to partners, many participants were thankful that their family members including parents and siblings helped them face life challenges during their acculturation process. For example, Sunny immigrated to Canada with his family and described how his parents and siblings supported him in leaving a high school gang. He was thankful that through their support he was able to return to school, which had a positive contribution to his settlement process:

As a new immigrant, I wanted to fit in and to look like the other teenagers in a high school . . . I got involved in a bad company . . . Eventually, I stopped going to school and wasted my time here and there. My family helped me to gather myself and to boost my
self-esteem to go back to school. Thanks to my family members who offered me support to cope with the pressures and hardships of my life.

Those participants who had no relatives in Canada to support them, tried to stay in touch with their overseas relatives through long distance phone calls. For example, like some other participants, both Perveen and Sara had no relatives living in Canada and explained that they relied on their overseas relatives for emotional support. Both Perveen and Sara reported that overseas relatives’ support promoted their sense of inner strength despite the challenges and barriers that were in the way of their settlement. They both stayed in close contact with their families through long distance phone calls and considered their support as ‘very essential’ for them to deal with depression and acculturation stress in order to adapt to the Canadian lifestyle. Perveen spoke highly about the presence of extended relatives in addition to her immediate family members in order to settle in a new land.

It makes a difference if you have a family here or not. If you have a family member here, then you can get support . . . your family [both immediate family and relatives] keeps your hopes high. Me and my husband always missed the presence of our relatives and consulted them [relatives] overseas for moral and emotional support. Their support was indeed a great help for us in difficult times.

Also, Sara had no family member or relative living in Canada, and she missed their presence in her life after coming here, which led to her depression. When she started communicating with them over the phone, she realized that her regular contact with her family members overseas gave her strength, encouragement and hope to stay strong in face of harsh experiences of immigration in Canada:
Even though they [family members and relatives] were not here [Canada], they provided me full support to get out of the stress. I had a phone with me all the time and that was my main mode of contact with my family . . . I had to contact my family back home every day before going to bed to explain details of my day. In case of emotional stress or low mood, I used to consult them for my immediate support and it helped me a lot in my settlement process in Canada.

In addition to gaining support from spouses, family members and extended relatives, participants also appreciated receiving support from their friends. They considered their friends’ support as instrumental in reducing their emotional stress and depression as a critical aspect of their positive post-settlement adjustment. For example, Ali had no relatives living in Canada, and he considered a support of a friend could be a great help to cope with acculturation challenges and depression:

If you have a good friend, someone from your own country who can speak to you in your own language, then it is a great help. Definitely, this friend can help you to come out of depression . . . If someone is here who can guide you, then your time is not wasted. Luckily, I had a friend who helped me so much. I am thankful to her from the bottom of my heart.

Like Ali, Rahat discussed the way she gained her confidence to start a new life in Canada and to reduce her isolation and to come out of depression:

My friends and my husband’s friends and their wives helped me to reduce my isolation to come out of depression. They were very helpful . . . otherwise, one feels depressed by staying home, feeling isolated. Through their help I came out of depression and started to think about my future positively . . . it helped me a lot.
In addition to personal support, many participants talked about friends’ helping in social networking and in their social integration into Canadian society. Osman described that he was mentally and emotionally ‘down’ due to ‘isolation’ and ‘stress’ after coming to Canada and his friends’ support helped him to face harsh experiences of immigration:

My friends helped me . . . I do not have any relatives here, but now my friends are my relatives. We have left our countries behind as well as our relatives. We socialize together through small family functions such as birthday parties which help us to come out of depression and to develop relationships with each other. If I did not have support of my friends, then I would have ended up in a mental hospital. Their support helped me to be resilient to face difficulties and stress after coming to Canada.

Similarly Osman, Iman also outlined the significance associated with having friends who helped him to stay connected with cultural roots as well as offered him a supportive environment to face life challenges after immigration to Canada:

We have friends here . . . we have created a Pakistan like environment here . . . without this it was difficult to breathe here. Many times, I thought to leave everything here and go back. But my friends gave me strength to face adversities of life with open eyes and open mind. Their support offered me a supportive environment and social networking opportunities which eventually facilitated my struggle of settlement in Canada.

Participants like Osman and Iman not only emphasized the importance of friends in regaining their internal strength but also in helping them to socially integrate with others in their post-immigration life. Many other participants like Doctor described the important role of friends in his life after immigration. Doctor was hospitalized for the treatment of depression and
described a negative correlation between his friends’ support and depression (i.e., lack of friendship means high depression and presence of friends leads to reduced depression):

I was very scattered soon after coming to Canada and it seemed as if I had lost the route to my destination . . . I was diagnosed with clinical depression and was hospitalized for many days… I noticed after getting to know a few people here and developing friendship with them, my mood started to change. Friendship offered me an opportunity to be a part of social networking and to see others in the same boat of settlement with me. . . All of us supported each other. Indeed, it was a great support to come out of depression.

Almost all of the participants spoke highly of their spouses, relatives and friends’ support regardless of whether these supporting figures were living inside or outside of Canada. In summary, participants reported that family and friends’ support fostered a sense of hope that they could achieve their immigration goals in the future, which helped them to overcome their acculturation challenges and depression.

**ii. Networking with a larger Muslim Community ‘takes us out from darkness to the brightness of life’**

This sub-category, Connection with a larger Muslim Community, illustrates interpersonal support and emotional and religious strength that participants gained through religious gatherings. Most of the participants, either they had family and friends living in Canada or not, described that networking with a larger Muslim community was an additional support for them. Thus, all of the participants explained that the connection with other Muslims was instrumental in bringing them closer to the larger Muslim community in Canada. During stressful times, the religious gatherings and places of worship such as mosques, were sources of social connection for them. Many participants expressed that these social connections acted as integral part of their
religious integration and positive adjustment in their post-immigration period in Canada. For example, Fowad explained that the religious identification and togetherness contributed to his positive healthy state; otherwise, he was depressed due to constant failures and stress after his immigration:

After meeting with other Muslims, I felt myself connected with the larger Muslim world. My strong belief on God and company of other Muslims helped me to keep myself together in order to face hardships of settlement. I was able to share my experiences and hardships with them [other Muslims] and they [other Muslims] always gave me support and encouragement to face my challenges. Without their support, it was difficult for me to settle here [Canada].

Many other participants had similar views to Fowad that after connecting with their religious groups and visiting mosques regularly for prayers, they were able to socially relate with other Muslims and were successful to seek support from their peers through religious activities which had a healing effect on their depression. For example, Perveen considered religious congregation as an opportunity for her to perform her prayers and to network with other Muslims:

Through attending activities of mosque, I got socially and religiously integrated with other Muslims which helped me to come out of depression and to work towards my settlement in Canada . . . through my connection with other Muslims; I was able to perform my prayers in a group and also developed social contacts with them. All of this helped me tremendously to reduce my depression and to face my acculturation hardships.

In addition, many other participants explained the invaluable social and religious atmosphere at a mosque which inspired them to not only come out of their own depression, but
also to be a role model for their children. Some participants decided to work as volunteers to support other newcomers to make positive changes in their lives. For example, Amina explained changes in her life through religious networking:

After getting connected with a mosque, I was blessed with emotional and religious support... my feelings of sadness and loneliness were gone as the result of networking with other Muslims. Also, I started doing volunteer work there [mosque] which was beneficial for many others in the community... it helped me too to deal with my stress and depression after coming to Canada.

Almost all of the participants explained that their connection with other Muslims uplifted their mood to face life challenges with a new spirit and enthusiasm. Social networking with other Muslims not only helped participants to cope with their challenges through their religious beliefs, prayers and connections with other Muslims but also they felt motivated to continue their involvement with other Muslims by doing volunteer work and be role models for their children as well as for others who were still in the process of acculturation and settlement.

d. Reaching out to Community Resources

‘Reaching out to Community Resources’ has emerged as one of the contributing factors which led most of the participants of the study to overcome acculturation stress and depression during their settlement and integration process. Participants illustrated the way in which they became aware of their community resources after reaching their turning points, which made a positive difference in their well-being and overall adaptation to the Canadian lifestyle. The Canadian social structure, free schooling and health services were appreciated by all participants and helped them to achieve their goals and foster personal growth. After comparing facilities offered by the Canadian government with their home countries, they realized the differences in
the standard of living between a developing country (i.e., country of origin) and a developed country (i.e., Canada). This ‘realization’ encouraged them to value their decision of immigrating which also generated their ‘sense of belongingness’ with Canada. The theme of Reaching out to Community Resources includes two sub-categories: Community Organizations: ‘A vehicle to integrate with the Canadian lifestyle’; and Canadian Government Supports Newcomers: ‘Sense of belonging, security and growth’ (see Figure 16).

Figure 16. Sub-categories Related to Reaching Out to Community Resources

i. Community Organizations: ‘A vehicle to integrate with the Canadian lifestyle’

The sub-category of Support from Community Organizations explains the way newcomers received help from non-profit community-based organizations. Eleven participants made positive comments about the services that they received personally or one that their family members received through community organizations. However, two of these participants noted limitations of community organizations in supporting newcomers to find employment in their professional fields. Otherwise, all of them were happy with the settlement assistance that they had received to integrate with the Canadian lifestyle such as information and referral services, children’s services, language classes, form filling, affordable housing, financial support, and community connections. Almost all participants were happy to get connected with community organizations; however, some of them were concerned that they had been aware of the existence
of these community organizations earlier on in their settlement process which could have saved efforts and time in their acculturation struggle as well as in overcoming depression. They were thankful to the funders who were supporting community organizations which provided free settlement services to newcomers.

Most of the participants talked about the services that they had received from community organizations and how these services helped them to understand the Canadian lifestyle and to adapt to changes in their post-immigration life in Canada. For example, Osman came to Canada as a refugee with limited English competency. Due to language difficulties, he faced a number of challenges in his post-immigration period, especially when he had to fill out forms and to correspond with various offices regarding his refugee case. He started working as a labourer and living within his own ethnic cultural group. He was frustrated when his limitation in the English language was causing delay in his immigration case. As a result, he started spending money to hire agents to do his paperwork. However, very soon it was difficult for him to afford these expenses within his minimum weekly income. He was thankful that someone referred him to a community centre where he was able to get a full package of services free of charge:

When I came here, it was impossible for me to go back to school to learn English. I had to work hard to earn money for our survival . . . it was hard for me to afford expenses for completing the paperwork for my immigration case . . . one of my friends told me about a community center nearby . . . whenever I received any letter in English, I used to take it there and they were able to help me for everything without any charge. This help supported me to deal with many of my problems during my settlement process.

Like Osman, Fowad was also thankful for the personal support that he had received from a community organization which helped him to face his acculturation challenges:
I became sick, and there was no one who could financially support me . . . someone told me about a community center . . . I asked a community worker for help. Through a community worker’s support, I came to know about some financial resources which helped me to survive during my tough time . . . got me out of depression.

Many other participants also considered support from community centers as an important part of their settlement process, particularly in supporting them during their job search process. For example, Perveen shared her views about the support that she received from community organizations in finding a job:

Community organizations help newcomers in many aspects. They helped me to understand the Canadian system and how to look for a job. It was difficult for me to proceed further in my settlement venture without their support . . . they helped me a lot and I am thankful for their support which eventually led to stress reduction and coping with depression.

Sara also thanked a community centre, which helped her to find a survival job to get some financial stability during her post-immigration period:

I got support during my difficult time . . . I was not aware of many of the community services at that time. There was a community worker who encouraged me to look for various opportunities and not to compromise with factory jobs only. I can’t forget her support . . . a great help was offered . . . I will recommend others to go to community centres for help.

Many participants shared that community centres offered them individual support as well as an opportunity for social networking. Thus, support from community organizations helped participants to face acculturation challenges and to cope with depression which eventually
opened more possibilities of social networking for them. For instance, Perveen provided an example of the way in which her social networking garnered solace to deal with acculturation hardships and depression:

Gradually, when I started going out, I realized that it was not the same as I thought before. I was apprehensive before going out that something bad might happen to me and my family. . . Thanks to the worker at the community centre who helped me completing my application forms and also motivated me to join the support group. When I started to interact with others, my life situation and circumstances changed in a positive way. It definitely brought confidence, new hope and new energy in me; otherwise, staying home all of the time was pulling me towards depression.

Similar to Perveen, Fatima described the connection between her social contacts and the positive changes in her life. She also noted that the confidence and empowerment that was engendered by her contact with the greater Canadian community:

You need to have social contacts; otherwise, there is too much isolation here [Canada] for newcomers. After talking to my friends and getting socially involved, I was able to get information about opportunities for me in life . . . it helped me so much to uplift my mood and face life challenges courageously; otherwise, I was staying home and thinking there was nothing left in my life anymore.  I liked the social networking groups offered by the community centre.

Iman also found that his social contacts through a community organization enhanced his ability to manage stress during the process of adjustment in Canada. For example, he talked about the way his counsellor encouraged him to extend his social networking so that it had
affected him positively, such as sharing feelings, getting ideas for settlement and receiving moral support:

My counsellor registered me for a group programme which led to a great experience of social networking . . . one of the significant ways which help newcomers to survive . . . life was very dull when I had no contacts; social networking was like a breath of fresh air which brought new life and new hopes . . . also individual settlement services helped me to deal with my acculturation hardships which eventually helped me to reduce depression.

All of the participants who used services from the community organizations considered social networking as an integral part of their coping strategies. In addition to offering individual settlement services, participants attended information sessions and support groups for newcomers, which eventually helped them to find support from their external world to face acculturation hardships and mental health issues. Three participants reported no direct use of community organizations’ services; however, their family members made use of them and appreciated the services received. In addition, two participants highlighted the limited role of community centres in certain service areas, especially in finding employment in professional fields. Overall, those who received settlement services appreciated that community organizations contributed positively in their settlement process. For example, Ali immigrated under a professional independent class and was desperate to look for employment in his profession. Despite his efforts and support from various community organizations, he was not successful in achieving a job in his own professional field of engineering. However, he appreciated the support of community organizations in providing overall settlement services which helped him as well as his family to acculturate within Canadian culture:
These community organizations are helping but everything is not within their control. They have their own limitations especially when it comes to job search for professionals . . . they were not able to help me for employment purposes; otherwise, they offered us great services to connect with available community resources. I am very thankful for their support because it kept me moving forward.

Ali appreciated the settlement services provided by community organizations, even though he was not able to get much help in his job search efforts in his profession. Rahat was also looking for a job in her professional field. She was disappointed when she was not able to access her desired employment through community services; however, she noted that these organizations were helpful in offering emotional and social support to newcomers which could potentially lead to job opportunities:

I could not get much help from community organizations to find a job in my field; but they offered many other programs which helped me to know about my neighbourhood and to develop contacts with others . . . their information generated new pathways of social connections and hope for me . . . it helped me to work on many of my issues and to enhance my coping capabilities to deal with hardships after coming to Canada.

All of those participants who received services from the community organizations admired funders who were offering financial support to community organizations to help newcomers. Like many other participants, Rita admired the free services offered by the community organizations:

A friend told me about a community centre but I was reluctant to go there because I had no money to pay the fees. Later, I came to know that the services were free . . . I was amazed to hear that there were government organizations which fund these community centres.
Also, the workers were very supportive to help newcomers. After getting connected with a community organization . . . gradually my depression started to disappear.

Almost all of the participants appreciated and valued the settlement services (both individual and group services) offered through these organizations despite their limited scope in finding work for newcomers in their professional fields. Overall, support from community organizations was considered highly valuable for fostering positive feelings and to support in newcomers’ settlement process. Eventually, these positive feelings led to developing a sense of belonging in newcomers which further empowered them to deal with their acculturation stress and depression to settle in Canada.

ii. Canadian Government Supports Newcomers: ‘Sense of belonging, security and growth’

Support from the Canadian Government emerged as one of the main contributing factors for most of the participants of the study to cope with their acculturation hardships and depression. Participants illustrated the way support from the Canadian Government made a positive difference in their ability to settle and adapt to Canadian living. All of the participants appreciated the government support in developing a ‘sense of belonging,’ ‘security’ and ‘growth’ in newcomers by offering them free schooling and many health and social services which helped them to achieve their goals and foster personal growth in Canada. The Canadian infrastructure was appreciated by almost all of the participants which inspired them to pursue their and their families’ future in Canada. For example, Sunny appreciated the availability of resources in Canada which in comparison with his home country were in abundance:

Canada is a good country… there are so many resources for newcomers … especially if I compare it with my own country where law and order are big issues . . . after feeling
Canada my home, I felt strengthened to deal with my settlement challenges and depression . . . it helped me to get grounded here.

Almost all participants explained that they not only accepted but also appreciated their decision to immigrate to Canada when they realized the opportunities and the resources available to them within the Canadian system. Through the realization of these opportunities and resources, they felt supported to deal with their acculturation challenges and depression. For instance, Fowad developed cardiovascular complications as the result of stress and depression due to acculturation hardships after immigrating to Canada. During his hospitalization period, he was impressed with the care and support he received from the staff which made him understand that his decision of immigration to Canada was ‘not wrong’:

Here [Canada] medical services are free of charge. When I became sick, everything was provided to me in the hospital including food and medications. System is good here; education is free which are the plus points of Canada. When I noticed these good things here, I started to take my stress and acculturation challenges as minor road blocks to a better future which eventually helped me to get settled here [Canada].

In addition to the Canadian social structure, all of the participants admired Canadian polices to support newcomers in their settlement and adaptation process. Like many other participants, Amna explained that her fears were diminished after receiving a warm and supportive response from the ‘Government welcome policies for newcomers’ which helped her to integrate into Canadian society:

I felt amazed to see that the government has provided great facilities for newcomers to attend information sessions with childminding services. This kind gesture built up my
confidence . . . I started to feel different . . . I was glad to come to Canada and these feelings of happiness helped me to settle here.

Amna was impressed with the welcome programmes offered to newcomers. Similarly, Perveen also expressed her gratitude for the available resources for newcomers which facilitated the process of her integration into Canadian culture:

I was very isolated after coming to Canada and was feeling stressed after seeing problems and challenges around me . . . gradually, I came to know services available for newcomers which were offered through the Canadian government . . . as I started to use them . . . they helped me to buffer against the challenges of integration in Canada.

Many participants, over time, detailed a process in which they developed great appreciation for the Canadian infrastructure and social system especially, when they compared these with their home countries. Due to political instability and other economic challenges of the developing world, all of the participants decided to immigrate to Canada for a safe and secure future for themselves as well as for their families. They appreciated the Canadian policies and structure which promoted their ‘sense of belonging’ and ‘opportunities for personal growth.’ For example, Doctor expressed his appreciation in the following way:

I admire the efforts of the Canadian government in laying out the rules and regulations to help newcomers . . . If we want to study here, we can apply for OSAP or bursaries for support because the Canadian government supports newcomers to study. Also, there is financial and social support to encourage newcomers to settle here . . . overall, I am inspired by the efforts of the Canadian government to support newcomers. After realizing all of this, I felt good about my decision to immigrate . . . these feelings further strengthened my connections with Canada and helped my settlement process.
All participants of the study were thankful to the Canadian government for offering support to newcomers which helped them to feel ‘welcomed’ and to be treated with ‘respect and dignity.’ Consequently, this support made them to feel ‘good’ about their decision of immigration to Canada and to work towards their settlement.

In summary, after experiencing their turning points, participants of the study became empowered to use various coping strategies to deal with their acculturation hardships and depression. Participants discussed a combination of various coping strategies which boosted their self-esteem and empowered them to continue their struggle to settle in Canada. In addition, when participants realized the availability of resources and opportunities for a better future in their new homeland, they became hopeful about their and their children’s future. This hope had a positive impact on them which encouraged them to face acculturation challenges and depression. These coping strategies not only helped participants to face their acculturation stress and depression but many of them were motivated to be role models for others and were willing to offer support to other newcomers in their settlement and adaptation process. Almost all of the participants preferred using their traditional, cultural and religious coping strategies (faith, prayers, religious congregations, family members, friends, ethnic cohesiveness), which combined with available community resources for newcomers made them hopeful towards their future.

Moreover, in the process of sharing coping strategies, participants also made some suggestions to facilitate newcomers’ settlement process in Canada. Participants recommended that information sessions should be offered to prospective immigrants to inform them about Canadian aspects of life before coming to Canada such as accreditation of degrees, job search process and the Canadian job market trends, opportunities of internship, English language competency, transportation and health systems, childcare arrangements and other community
resources for newcomers to facilitate their settlement process. Finally, participants talked about feelings of belongingness and being acculturated in Canada which further helped them cope with their acculturation hardships and depression. Participant’s views are discussed in detail in the next chapter.
CHAPTER 5

Discussion

This study investigates the process of acculturation and coping for South Asian Muslims living in the GTA. It specifically targets those individuals who had immigrated to Canada in the previous three to five years at the time of participation in the study. Another aspect of the participation criteria was that participants had experienced depression during their acculturation process but overcame their depression, and at the time of participation in the study, were not feeling depressed. Themes emerging from participants’ responses to the semi-structured questions indicate that during the course of acculturation hardships and depression, participants experienced moments of realization which are called turning points. The combination of both internal turning points (rediscovering oneself, standing up for others and restoring through prayers) and external turning points (following the examples of others and getting Canadian credentials and finding employment), empowered participants to use various coping strategies to settle and adapt. These coping strategies included becoming empowered (looking inside and exploring strengths, closeness to cultural roots and learning the English language), finding strength in religion (having faith in God and praying to God), extending social connections (support from family and friends and networking with a larger Muslim community) and reaching out to community resources (community organizations and support of Canadian government to newcomers). These coping strategies helped them to deal with acculturation challenges and depression and to settle and build a sense of belonging in Canadian society.

This multi-faceted process of acculturation and coping revealed through participants’ responses helped me to derive a midlevel theory of acculturation and coping for South Asian Muslim immigrants living in the Greater Toronto Area. I used the grounded theory method to
analyse participants’ interviews which led to the emergence of a grounded theory of acculturation and coping (Strauss & Corbin, 1998).

The tri-fold process of acculturation and coping for South Asian Muslims living in the GTA includes (I) Acculturation Challenges, (II) Becoming Depressed and Coping and (III) Becoming Acculturated: Settlement and Belonging. I discuss each of the parts of the acculturation and coping process in the subsequent sections of this discussion. Following that I summarize the research findings and sketch an overview of the literature in the area. Finally, I outline the midlevel grounded theory that has emerged from my research, and share a number of my reflections on the findings. I also discuss the limitations of the study and make recommendations for the future.

I. Acculturation Challenges

The first domain of the acculturation and coping process is characterized by pre-immigration hopes and expectations, as well as hardships faced by South Asian Muslim immigrants during their acculturation and settlement process in Canada. According to the United Nations (2002) there are 175,000,000 people worldwide living outside of their countries of origin. Research studies exploring acculturation processes show that as a result of acculturation, intercultural relationships develop which lead to changes both at individual and social levels. Both the individual and social level changes can have positive and negative impacts. The positive changes may include contact with diverse cultures, expansion of skills, broadening of horizon and enhanced awareness of world issues (Ward & Masqoret, 2008); however, the same changes can be negative if perceived as threatening and overwhelming by individuals who are immigrating to a new land (Noh & Kaspar, 2003; Simich, Hamilton, & Baya, 2006). In the present study, participants shared both negative and positive aspects of their acculturation
experiences. Negative aspects led to acculturation stress and depression and positive aspects helped them to cope with their acculturation challenges and to settle and adapt to Canadian society. Before I explain the acculturation experiences of the participants of the study, it is important to mention their intentions for immigration which included high expectations and hopes for having a ‘dream world’ in Canada. When participants in the study were not able to find the ‘dreamland’ of their expectations, but instead were faced with numerous setbacks and acculturation challenges, they felt disappointed and disheartened and consequently many became depressed. All participants explained that political and religious instability in their homelands and its traumatic effects were some of the main reasons for their immigration. Sher (2010) also explained that sociocultural and political problems in the country of origin and concerns about the immigration policies of the host country negatively impacted the acculturation process (Sharma, 1989).

All participants in this study reported that they were excited to immigrate to Canada as they considered it a land of opportunities (Maraj, 1996); a place where it would be possible to have a safe and secure future (Khan & Watson, 2005). They saw coming to Canada as a way to gain an improved quality of life (Asanin & Wilson, 2008; Statistics Canada, 2007). All of the participants reported that their acculturation hardships were more difficult than they had thought they would be before immigrating to Canada; those who had the highest hopes and expectations for their immigration became the most upset when they were not able to find or build for themselves the kind of lifestyle they had imagined before coming to Canada. This supports the findings of Khan and Watson’s (2005) study, which concluded that immigrants come to Canada with high hopes and expectations for a bright future. However, as a result of high hopes and lack of prior knowledge of the Canadian cultural context, they get disappointed and experience
mental health issues (Sher, 2010). These unfulfilled high hopes and expectations may lead to stress that can turn into depression in newcomers. This claim is also supported by the findings of the present study, which indicates that all participants became depressed when their expectations of immigration were not fulfilled.

As the result of acculturation hardships, most of the participants felt like outsiders in Canada because of being surrounded by unfamiliar cultures and unfamiliar faces. Thus, they preferred to stay home most of the time, feeling isolated and segregated from the rest of the world and this multiplied their difficulties in developing social networks within the mainstream population (Jibeen & Khalid, 2010; Potochnick & Perrerira, 2010; Schwartz, et al., 2010). In addition to isolation and segregation, they developed a strong sense of loss of social status and considered themselves ‘valueless’ due to their lower position in the social hierarchal order in the Canadian context following their immigration. Many ethnomedical research studies also suggest that there is a strong connection between individuals’ place within the social hierarchy and prevalence of depression (Nemade et al., 2007; Rahman & Rollock, 2004; Sonderegger, Barrett & Creed, 2004).

Thus loss of social status was considered a significant loss for participants (Khan & Watson, 2005) and concerns about being different and ostracized for that difference led to social isolation, which further reduced their confidence to interact within the larger Canadian society (Jibeen & Khalid, 2010; Schwartz, et al., 2010). Therefore, participants felt more protected when living in their own ethnic neighbourhood because they could protect their cultural and religious identities. This supports Berry’s (1980, 2006) findings that discrimination from the mainstream population encourages immigrants to stay closer to their own ethnic communities.
Lee (2002) conducted a study to explore the impact of ethnic identity on psychological well-being of Korean Americans and highlighted a close relationship between self-esteem and ethnic identity i.e., ethnic identity was positively related to self-esteem and negatively related to depression. Rumbaut (2008) used the term ‘reactive ethnicity’ to explain this process when immigrants hold onto their cultural heritage and resist adaptation of the host culture due to lack of acceptance in the new land. The findings of the present study also support the same findings that many newcomers prefer living in ethnic neighbourhoods, which not only offered them a comfort zone but is also important for their ethnic identity and in order to foster social networks, religious connections and supportive allies. (Phinney & Ong, 2007; Schwartz et al., 2006; Stepick, Grenier, Castro, & Dunn, 2003).

In addition to feeling different in unfamiliar cultures and around unfamiliar faces, participants of the study reported difficulties in adjusting to multicultural and diverse community living in Canada because they were used to living in Muslim saturated areas in their home countries (Central Intelligence Agency, 2010; The Hindu, 1999). All participants experienced intense differences between themselves and other Canadians at the time of religious celebrations such as Eid celebrations and fasting during the month of Ramadan. They had a strong desire to enjoy their festivities as they had celebrated in their home countries but due to unfamiliar surroundings, lack of religious and cultural support and absence of relatives and friends, they were not able to do so. Lack of opportunity to enjoy their cultural and religious festivities made them further isolated and distressed. Many studies highlight that cultural adjustment difficulties lead to mental health issues (Pumariega et al., 2005; Yeh, 2003). Thus, all of the participants considered a Muslim neighbourhood important for their personal development as well as for their children’s upbringing according to their religious and cultural values.
Islamic teachings have a great influence on the way Muslims organize their social gatherings. Since the present study focuses on Muslims’ settlement issues in Canada, all of the participants expressed their difficulties interacting with ‘the others’ due to the fear of attending mixed-gender gatherings, Western attire and the inclusion of alcohol and pork as they were not accustomed to these things in their home countries. Keeping in view the guidelines of Islamic teachings, Muslims from India and Pakistan prefer celebrating at social events with separate arrangements for males and females. Thus, it was challenging for many participants of the study to attend mixed gender gatherings which they considered ‘too open’ for themselves within the context of their cultural and religious values. Many cross-cultural studies show that those who immigrate across cultures where there is a great disparity between the host, and their original culture, experience more stress than those who do not face a huge cultural difference (Berry, Kim, Minde, & Mok, 1987; Finch, Kolody, & Vega, 2000; Pumariega et al., 2005; Young & Evans, 1997).

Participants’ religious concerns were not only limited to social settings, but were extended to other areas of their lives including food, attire, neighbourhood and ethnic and religious celebrations. All participants described a link between their food restrictions (Halal food) and restrained integration with Canadian society. In addition, all female participants expressed challenges arising from wearing Islamic attire in a Western society; in particular the two female participants who were using the Hijab felt challenged. They explained that wearing the Hijab restricted their opportunities for social networking, finding jobs and career advancement. Male participants did not experience the same level of distress because clothing styles were not much different from their homelands. In addition to wearing Islamic attire in a Western country, participants highlighted that Canadian liberalism, as evidenced by more
revealing Western clothing norms, had a deleterious effect on their acculturation process, thereby limiting their social interaction with the mainstream population. Furthermore, they explained that they were pressured to wear Western clothing in order to assimilate with others, especially at work. Female participants felt ‘strange’ and ‘uncomfortable’ in Western clothing which was comparatively ‘open’ for them. They felt that being forced to wear Western clothing created stress in them and negatively impacted their self-esteem during the initial stage of acculturation. Thus, differences of food and attire created further hardships for participants especially for Muslim female participants as they felt themselves ‘misplaced’ in a Western society.

In addition to feeling different, most of the participants expressed that they felt as if they were being excluded from the mainstream population. For example, limited English language proficiency was considered by all of the research participants to be another great barrier to finding employment and functioning in their day to day life. Not only the four participants who had limited or no English skills, but also nine foreign trained professionals who had English language competency expressed communication difficulties due to their accents after immigrating to Canada. Torres (2010) conducted a study on levels of English proficiency and depression in Latino immigrants in the United States and found that difficulties resulting from lack of English competency are one of the main causes of high levels of depression. Many other studies have also recognized challenges to newcomers due to language difficulties (Choudhry, 1998; Cloud, Genesee & Hamayan, 2000; Harris & Jones, 2005; Nicassio, LaBarbera, Coburn, & Finley, 1986).

Another acculturation challenge experienced by participants during this domain of the process of acculturation and coping was a lack of acceptance of their foreign qualifications and professional experiences. These participants were sad that they had never been informed about
this aspect of the Canadian job market in their home countries. When these participants came to
Canada, they were astonished to see a great disparity between immigration rhetoric and the
realities of the Canadian job market. They found themselves between a ‘rock and a hard place’
as they were required to gain ‘Canadian experience,’ ‘professional references,’ and ‘social
connections’ to find work. Even though their foreign degrees were considered up to the standard
of acceptance for Canadian immigration purposes, foreign trained professionals who participated
in the study were disappointed to find that their qualifications were evaluated at a much lower
level by Canadian accrediting institutions. These professionally trained immigrants were upset
that it was ‘almost impossible’ for them to gain entry into their professional fields in Canada due
to difficulties with accreditation, lack of Canadian experience, no social connections, increased
family responsibilities, and few supports available to help them make this transition.

Professionally qualified participants considered a lack of acknowledgement of their
degrees as a subtle form of discrimination. These experiences of discrimination are consistent
with Ghosh’s (2008) study of young adult South Asian-Indian participants, who reported
experiences of low self-esteem, anxiety and depression due to discrimination experienced in the
host country during their process of acculturation and adaptation in a new land. Many
professionals became disappointed as there was neither an opportunity for them to complete an
internship to gain Canadian experience nor was anyone willing to give them a job in their
profession without Canadian experience and professional references.

A number of studies also reveal that since immigrants are less likely to find employment
at the level of their education in the host country, in order to meet their livelihood needs they
may take on low-wage jobs (Aycan & Berry, 1996; Espiritu, 1999; Khan & Watson, 2005).
Thus, most of the educated immigrants in the study were forced to take survival jobs, for
example as taxi drivers, factory workers and pizza delivery drivers, and many had to spend their savings to meet their basic needs in Canada. Some even had to request money from their relatives overseas in order to survive after immigration. Only two participants stayed focused on their own career development, but they were also unhappy. One such participant called this process a ‘waste of time’ and said it was a ‘deception’ to invite foreign qualified professionals only to have them to work for low paid manual jobs and to be forced into ‘reverse gear’ in their professional fields. Sher (2010) also highlights that in order to protect immigrants from mental health issues there is a strong need for the full recognition of their professional qualifications, and for their social acceptance and respect for their vocational and cultural aspirations (Khan & Watson, 2005).

Participants felt they were treated differently than the ‘mainstream’ population due to religious and cultural differences. Many studies reveal that Muslims are targeted with intense racism and discrimination, particularly in Western countries following the September 11, 2001 e.g., ‘terrorist attacks in the US’ (Seddon, 2003). Kalek et al. (2010) found that Muslims in Australia have experienced an increase in threats and prejudice directed at them following the September 11, 2001 incidents, and that as a consequence they face increased psychosocial adjustment problems as well as mental health issues. Many other studies have found that hate crimes against Muslims have multiplied after the September 11 incidents (Hernández, 2007; Seddon, 2003).

During the process of facing acculturation hardships, all of the study participants shared that changes in their family structure and gender roles caused disruptions in their family life after immigration to Canada. Participants perceived the changes in the family structure and in gender roles as being in oppositions with their cultural practices. In general, South Asians prefer a joint
family system in which they are surrounded by large families and extended relatives with clear identification of gender based roles. When the family structure is changed as the result of immigration, they experience a great ‘sense of loss’ due to a new lack of safety net in their lives (Nesbitt, 1993; Segal, 1991). Many studies on immigrant experiences show that they may feel depressed because of leaving their relatives and friends behind which also may limit their social networking opportunities in a new land (Jibeen & Khalid, 2010; Khan & Watson, 2005). Jibeen and Khalid (2010) conducted a study on Pakistani immigrants living in Toronto and highlighted a sense of coherence and social support as coping resources for Pakistani immigrants and also revealed that an absence of these coping resources played a significant role in generating mental health issues.

Many other studies on immigrant experiences also indicate that changes in family structure may add to acculturation stress for immigrants (Kurian, 1986, 1992; Pumariega et al., 2005; Segal, 1991), and that family support and cohesiveness promote resiliency and ability to deal with hardships (Yee et al., 2007). All of the participants in the present study expressed grief and sadness due to changes in their family structure and missing their relatives and loved ones back home. Following their immigration, it was difficult for them to function without a close knit family and social support network, as they were not used to a secular family structure (i.e., single family household). Most of the participants preferred the joint family system (i.e., living with immediate and extended family members), which helped them to meet their personal as well as social obligations. After immigrating to Canada, participants felt isolated and tried to maintain regular contact with their relatives through long distance phone calls and other forms of communication.
Even though all of the participants of the study considered the presence of their immediate family members (spouses and children) as a great source of support, some participants who were heads of families reported that challenges to meet family responsibilities caused guilty feelings. These feelings were mainly expressed by the male participants because they felt obligated to ‘provide’ for their families. This conflict can be compared to an approach-avoidance conflict as they appreciated the presence of their family members, but at the same time were feeling ‘bad’ for not fulfilling their family responsibilities due to lack of financial resources and inability to spend quality time with their families. This emotional dilemma was common within the family structure of South Asians in which the head of the family is responsible for providing for the entire family. As a result of deep love and a strong sense of obligation to their families, the heads of families were under acute pressure to find employment. They felt that their families were depending on them, and they held themselves responsible for bringing their families up from the ‘bottom to the top.’ However, all of the participants considered the presence of family members to be a great source of moral support for them in a new land.

In addition to changes in the family structure, participants in the study were stressed due to changes in gender role expectations after immigrating to Canada. These differences in gender roles required significant lifestyle changes, challenging because they were contradictory to their cultural and traditional lifestyles (Das & Kemp, 1997; Dasgupta, 1998). South Asians have clear gender role differentiation in their home countries; for example, females are expected to stay at home and take care of children, while men are expected to earn money to support their families. All of the study participants, and in particular the nine who were married, experienced stress when their gender roles changed, and this strained their marital relationships. Some of the female participants were working before coming to Canada but explained that they worked due to
personal preference and never felt ‘obligated’ to meet the financial needs of their family in their home countries. However, after coming to Canada female participants felt pressure to financially support their families (Wittebrood & Robertson, 1991). Yakushko and Espin (2010) conducted a study to explore the unique challenges of immigrant women due to acculturation stress and the concurrent transformation of identities. These researchers also observed that change of gender roles and changed self-identities due to their newly formed gender roles were significant reasons for mental illness in immigrant women’s lives (Talbani & Hasanali, 2000).

Many participants in the present study also confirmed that gender role changes in which they stepped out of the assigned roles inherent in their traditional cultural frameworks were stressful for both men and women. Data from the interviews indicate that participants felt ‘constrained’ and ‘confused’ when their gender roles started to blur (mainly due to financial pressures). They became depressed when they felt forced to undertake roles which were opposite to their cultural expectations.

Almost all of the participants were worried about their future as well as their children’s future in a Western society. As the result, participants explained that they tried to be strict with their children to adopt their cultural and religious values of their home culture. Previous studies conducted with the South Asian population support the finding that South Asian parents enforce a strict parenting style, raising their children to follow their cultural and religious values especially if they are surrounded by dominant Western population (Ahmed, 1999; Gupta, 1999). These findings are also supported by the present study, which found that South Asian Muslim parents were fearful that Western society would take their children away from their cultural traditions and religious values. A number of studies have highlighted that immigrants experience psychological distress which not only negatively impacts their acculturation and
settlement process, but also may lead to severe mental health disturbances (Casado, Hong & Harington, 2010; Pumariega et al., 2005). Participants were worried about the ‘family distance’ that was created between parents and children following their immigration to Canada, which they associated with the negative aspects of the Canadian acculturation process (Hwang, Wood & Fujimoto, 2010). As the result of disturbances in family relations, participants considered themselves a ‘complete failure’ and eventually ‘lost heart’ to move ahead with life.

All of the participants in the study who had children attending school were concerned about the social and moral development of their children as the education they were receiving in the school was contradictory to their own religious and cultural values. Consequently, participants thought that it had a negative impact on their children’s ‘spiritual development,’ ‘cultural affiliation,’ and ‘psychological growth.’ They explained that their children were not as respectful as they were supposed to be in their home countries. In addition, participants considered that the Western school system was taking them away from their religious and cultural values and expectations. Durvasula and Mylvaganam (1994) explain that South Asian parents consider that their goals and ideals for their children, as well as their childrearing practices, are contradictory to those of Western parents. South Asian parents want to teach their children family values, interdependence, and to follow the collective demands of their families rather than the individualism and independence encouraged by Western society (Ghuman, 1994; Segal, 1991). Similarly, study participants preferred living in Muslim neighbourhoods so that their children could follow Muslim values and ways of life through observing other Muslims rather than being influenced by the Western teachings of independence.

In addition to concerns for the moral development of children, nine participants shared their concerns that their children were not as academically strong as children of that age were
supposed to be in their home countries. They found limited choices for choosing their children’s schools as their children were allotted schools based on their postal codes. Many participants were concerned that the standard of education in highly populated neighbourhoods for newcomers was compromised. These findings are supported by Pumariega et al. (2005), who report that most newcomers live in inner city areas where schools are overpopulated and education standards are compromised as compared to other areas where people are more settled. This factor creates a further cycle of complications for newcomers. Participants were fearful that low standards of education would lead to poor education, and eventually their children would fall into the ‘trap of poverty’ and experience ‘lack of opportunities’ for the rest of their lives. Also, parents’ acculturation hardships and mental health issues directly and/or indirectly impact the school performance of their children (Almquist & Broberg, 1999; Orfield & Yun, 1999).

After immigrating to Canada, all of the study participants were stressed due to differences in their financial position between their pre and post-immigration state, which limited and influenced almost every aspect of their lives. Many other studies also support the finding that newcomers experience a number of financial challenges during their acculturation process which confine their scope of settlement in a new land (Pumariega et al., 2005; Rogler, Malgady, & Rodriguez, 1989). Further to financial hardships due to employment difficulties, participants shared their challenges in finding suitable housing within their budgetary limits. Firstly, it was hard for most of the participants to find suitable accommodation due to high rental rates. Secondly, they were not familiar with the rental system as they were used to living in a shared family structure in their home countries where they were not expected to pay independent rents.20 Thirdly, they were often required to show evidence of a secure job and name a guarantor

20 In addition to this, living independently without the presence of family members was a new and difficult experience for them.
to rent a dwelling. Since these participants were new in Canada, it was difficult, and at times impossible, for many of them to fulfill all of these requirements in order to access the rental housing market. Participants in the study were upset that 80-90 per cent of their income was being spent on monthly rent. Thus, finding affordable housing is often a barrier for newcomers’ settlement and adaptation in Canada (Pumariega et al., 2005). According to the Toronto Star (2008), “In Toronto, the dire shortage of affordable housing is leading to increased evictions, food bank use and illegal flop houses, many of them occupied by new immigrants who can't find better places.” Participants’ responses in the study revealed that their harsh experiences of immigration were interconnected. For example, they were not able to find decent jobs in their professions and were forced instead to take on low-paying work; as a result, they were not able to afford appropriate housing, which caused further stress. Overall, the domain of acculturation challenges played a critical role in the evolution of an emerging midlevel theory of acculturation and coping which set a stage for the development of the second domain of the theory i.e., becoming depressed.

II. Becoming Depressed

The second domain of experiences study participants reported in their acculturation and coping processes includes both subjective experiences of depression and turning points. Participants’ responses reveal that acculturation challenges led to subjective experiences of depression, and all participants became hopeless for their and their children’s future in Canada. However, when participants reached their turning points, they became empowered to deal with their depression and acculturation hardships. In the following section, I discuss findings of the study in regards to participants’ subjective experiences of depression as well as their moments of
realization ‘turning points’ which encouraged them to use various coping strategies to settle and adapt in Canada.

a. **Subjective Experiences of Depression**

Participants’ interviews reveal that they experienced numerous acculturation challenges which led to mental health issues. These findings are consistent with many other studies that report that new immigrants experience a number of health challenges as the result of acculturation hardships (Ali, 2002; Maddern, 2004; Potochnick & Perrerira, 2010; Pumariega et al., 2005; Steel & Silove, 2001).

Some of the commonly reported physical difficulties described by participants were: lack of energy; headaches; dizziness; body aches/pain; diabetes; hypertension; and cardiovascular issues. None of the participants reported experiencing these physical complications or health concerns in their home countries and attributed them to acculturation challenges after immigrating to Canada. Many studies also reveal that as immigrants stay longer in a new land, their health state starts to decline (Dean & Wilson, 2010; Newbold, 2005). Dean and Wilson (2010) conducted a study on the health state of immigrants’ living in the GTA to explore their perception of health changes and their determinants over a period of time. These researchers have used a holistic concept of health including physical, mental and social aspects of life and found that the health declines in immigrants were mainly due to migration stress and the aging process. This supports the findings of the present study that South Asian Muslim immigrants’ mental, social and physical health state declined after immigration.

In addition to pain and other somatic changes, participants of the study shared their experiences of emotional turmoil. They were surprised at these changes as they were foreign to their personality and had no connection to the lifestyle they had enjoyed before immigrating to
Canada. For example, all of the married participants in the study reported that they started having fights with their partners and with other family members due to accumulated stress and irritability. Participants associated their mood changes with depression and reported that these mood changes negatively impacted their overall functioning in life. Most of the participants shared that they were too depressed to be motivated for any social engagement or to be involved with their family members. Hwang et al.’s (2010) study also confirms the findings of the current study that acculturative family distance [family distance created due to acculturation challenges in a new land] is associated with increased depressive symptoms and risk of developing clinical depression in immigrants. Many other studies also indicate that social support is associated with lower levels of depression, and absence of social support with increased levels of depression, which may lead to other mental health and drug addiction challenges in newcomers (Jang, Kim & Chiriboga, 2006; Sonderegger, Barrett, & Creed, 2004). Participants in the present study also indicated that depression was a cause of their lack of family involvement, distance from social life and lack of motivation to move ahead on their settlement journey. As the result of reduced family and social involvement, they became more depressed, which generated further difficulties for them to settle in Canada.

All of the participants noted that they had no desire to enjoy anything around them. They felt as if they were living like a ‘dead person’ with no hopes and wishes, and they were not able to share their feelings with anyone either due to unavailability of a safety net of relatives or due to feeling ashamed to tell their friends and relatives personal stories of being ‘failures’ in their chosen world. Nine out of 13 reported that they started to feel helpless and hopeless in regards to their future and found no solution to their problems except crying over small issues. Ahmed, Mohan and Bhugra (2007) conducted a study in the United Kingdom and found a much
higher rate of self-harm in South Asian women as compared to their White counterparts. They associated their mental health issues with levels of acculturation, cultural conflicts, stigma and difficulties in interpersonal relationships, which caused distress and eventually led to depression and increased rates of self-harm (Jha, 2001). All of the participants expressed changes in their mood using various psycho-somatic and socio-cultural analogies such as ‘sinking hearts,’ ‘crying like small children,’ ‘fallen into a deep well,’ ‘loss of dreams,’ ‘no hopes of a better life,’ ‘fearful of a dark future,’ and ‘sinking into depression slowly and gradually every day.’

Participants also discussed their experiences of absent-mindedness, which caused difficulties with attention, retention, concentration and decision-making skills. They believed these issues came about as results of their acculturation challenges and depression. They explained that their cognitive skills were diminished due to acculturation adversities and they were feeling helpless about making any changes in their living circumstances. All participants reported that they were feeling sad and ‘blaming themselves’ for making the decision to immigrate to Canada. They compared their post-immigration life with the life that they used to enjoy in their home countries. For example, those participants who immigrated under professional categories regretted that they had had to resign from their jobs and sell their belongings in their home countries in order to immigrate to Canada. Ten out of 13 considered that the only hope for their survival was to go back to their home countries, but they were not sure if this would be a safe move. These worries cultivated even more depression in these participants because it was not an easy option for them due to shame, fear of starting over and/or financial difficulties to make arrangements to return to their home countries. They considered immigration to Canada as a ‘dead end’ which only let them enter there was no ‘exit door. This is consistent with the findings of many other research studies (Berry 1997; Costa, 2008). Thus,
indecisiveness about whether to stay in Canada or to return to their home countries caused further cognitive and emotional difficulties for participants, and they became more depressed and less motivated to make efforts to settle in Canada.

All of the study participants reported that as a result of acculturation stress, they started to feel worthless and valueless as compared to the ‘others.’ They were feeling ‘hopeless’ about the possibility of any change in their future, and they were seeing themselves ‘falling down’ every day. All of the participants reported that they became frustrated and depressed because the acculturation stress was too intense for them to cope with. They used various analogies to express their emotional experiences of depression, such as ‘boiling blood inside,’ ‘going deep into a ditch with no way out,’ ‘walking around with a deadly heart,’ ‘no self-interest,’ ‘no self-respect,’ ‘being in a dark well,’ ‘living within a double edged sword’ and one called himself a ‘wandering ghost.’ They saw no obvious signs of relief and each day was taking them further away from the dreamland they had imagined before immigrating to Canada. In addition, participants were sad that there was no hope of recovery for whatever they lost as an expense of coming to Canada. Thus, a sense of loss and feelings of imprisonment were prominent features of their depressive experiences during the process of acculturation, which generated a threat to their personal identity. This is consistent with previous studies (Pumariega et al., 2005; Rogler, Cortes, & Malgady, 1991; Ward & Styles, 2003).

b. Turning Points

The second domain of the acculturation and coping process that emerged from the data was a combination of mixed emotions where participants were depressed and then became encouraged after reaching their turning points. The transition between feeling depressed and becoming empowered made these participants resilient to explore their internal and external
resources for coping with their challenges after immigration to Canada. All participants reported that these turning points were instrumental in changing their thought processes as well as their ways of dealing with their acculturation challenges and mental health issues; consequently, they felt motivated to use various coping strategies in order to belong in Canada.

All participants reported that they experienced a combination of internal turning points (rediscovering oneself, standing up for others and restoring through prayers) and external turning points (feeling encouraged to observe others and getting Canadian credentials and finding employment), which led to significant changes in their thinking and ways of handling challenges. For example, the process of rediscovering their inner strengths was instrumental in reinstating their self-confidence to deal with hardships as it was not new for them to deal with challenges in life. After having subjective experiences of rediscovery of their inner qualities, many participants of the study felt empowered and self-reliant, assured that they could face challenges in the same way that they had in the past. In addition to rediscovery of their inner qualities, many participants expressed that when they saw their loved ones ‘falling down’ due to harsh life experiences in Canada, they decided to stand up to support and to protect their families from any further damage. Thus, a strong sense of love and protection for their family members turned into a moment of realization for many participants which encouraged them to protect their family members facing acculturation challenges and mental health issues. In addition to observing others, all of the participants noted that their deep connection to the Supreme Being through prayers restored them from any further damage because they developed feelings of ‘deep belongingness’ and a strong ‘sense of protection’ after handing themselves over to the care of the Supreme Being. Eventually, their deep connection with the Supreme Being led to significant
changes in participants’ thinking, and they felt energized to use various coping strategies to move ahead on their settlement journey.

For some participants in the study, following examples of others in similar situations was a source of encouragement to face challenges and hardships in life. Participants explained that when they saw others behaving courageously when facing their hardships, then they decided to do the same to make changes in their lives. Thus, participants became empowered to make a significant ‘difference’ after seeing others coping with these challenges, rather than feeling like a ‘loser.’ Reivich and Shatté (2002) also highlight that following others as role models can promote resilience in dealing with adversities. In addition, when there were opportunities for getting Canadian credentials and/or finding employment, participants felt motivated to use several coping strategies to settle and adapt.

All of the participants shared that they felt a significant ‘change’ after having their personal experiences of turning points, which uplifted their mood and got them encouraged to be resilient in facing their hardships. As the result of internal changes in participants, they started noticing the positive aspects of their immigration which eventually helped them to develop a sense of belonging in and connection with the Canadian world.

III. Coping and Becoming Acculturated: Settlement and Belonging

The third domain in the emergence of the acculturation and coping theory, Coping and Becoming Acculturated: Settlement and Belonging, explains how after experiencing turning points, participants of the study used a variety of coping strategies to face adversities of the acculturation process and consequent mental health issues. In this section, I discuss these coping strategies and their significance for South Asian Muslim immigrants.
Participants described various interrelated processes which helped them to cope with their acculturation challenges. Firstly, participants described their personal characteristics and self-reflection process which encouraged them to cope with the acculturation stress and depression. The second process was finding strength in religion and developing a deep connection with the Supreme Being, which made them feel protected and think positively about their future. The third, parallel process that helped to bolster them against acculturation stress and depression was support from their family and friends and their connection with a larger Muslim world which strengthened them to extend their social connections to deal with their challenges. The fourth process was reaching out to community resources in their neighbourhood and seeking support from community organizations. As the result of reaching out and using various coping strategies, participants realized the positive aspects of their immigration and appreciated the way the Canadian government provides support to newcomers to settle and belong in Canadian culture. The results indicate that participants did not follow any specific steps or stages in using these coping strategies nor was there any evidence that one strategy was better than another; however, these strategies worked globally and inter-connectedly in bringing overall positive change in their thinking, behaviours and emotions in order to face acculturation stress and depression. Following is a detailed description of the coping strategies used by the participants of this study.

Ten out of 13 participants during the second domain of the process of acculturation and coping, Subjective Experiences of Depression, indicated that when they were in the midst of despair and depression after coming to Canada, through looking inside and exploring their strengths, they felt empowered to face their challenges as they recognized this was not their first time dealing with difficulties in life. They reflected on their past experiences and the strategies
they had used to deal with those hardships. All of the participants engaging in the process of self-analysis reported that they felt empowered to regain their self-confidence and self-esteem, and they felt motivated to explore their way to success (i.e., settlement) in Canada. Consequently, their self-reliance and self-confidence brought positive changes in their thinking in re-energizing their efforts in taking care of themselves, undertaking responsibilities with regard to their families and taking necessary steps towards their acculturation and integration in Canada. Prior to this, they were feeling hopeless, but after feeling empowered through their self-reflection process, their internal psyche was uplifted. Consequently, they started working towards dealing with their acculturation challenges and depression in order to settle and adapt in Canada.

In addition to self-exploration, all participants spoke highly about their ethnic cohesiveness which helped them tremendously to feel empowered and contributed to their positive health state. The results of this study complement those in other studies that reveal that ethnic identity and ethnic cohesiveness are associated with better psychosocial outcomes (Lin, 2004; Pumariega et al., 2005; Nasim, Corona, Belgrave, Utsey, & Fallah, 2007; Umana-Taylor, Gonzales-Backen, & Guimond, 2009). Similarly, many participants in the present study reported that ‘community support’ was instrumental in bringing positive change to their mental health state and in making them resilient in dealing with their acculturation hardships. All of the participants agreed that ethnic cohesiveness offered them a platform to feel proud of their ethnicity, cultural heritage and traditional roots while building their existence and survival in a new land (Schwartz et al., 2010). Furthermore, the participants of the present study appreciated living in or close to their own cultural and ethnic neighbourhoods where they could share and practice the same cultural and religious values. They considered that such neighbourhoods offer ethnic cohesiveness and a way
to transmit their religious and cultural values to the next generation. Many other studies support the claim that immigrants prefer living in ethnic enclaves where they feel protected in the company of other immigrants from the same ethnic, religious and cultural backgrounds. Such ethnic enclaves help in preserving ethnic, cultural, linguistic and religious heritage and values which can therefore be transmitted from generation to generation (Phinney, 1996; Schwartz et al., 2006; Stepick et al., 2003).

Further to ethnic cohesiveness, the results of this study also demonstrate that 8 out of 13 participants admired the support of their ethnic leaders who empowered participants to be strong and resilient in dealing with their challenges. These ethnic leaders played a significant role in improving their self-confidence and encouraged them to make every effort to get settled in Canada. Thus, these ethnic leaders were the ‘significant others’ who inspired participants to volunteer their services for the support of other newcomers. Reivich and Shatté (2002) also discuss the importance of significant others in promoting resilience.

Many participants indicated that they felt empowered when they acquired English language competency and the Canadian accent. The participants who attended English classes explained that those classes helped them to gain language skills as well as to enhance social networking with other classmates. Seven participants noted that they wanted to attend English classes but due to the obligations of meeting their family’s financial needs, they were not able to. However, all of them reported that after some time living in Canada, they improved not only their English language competency but also became more fluent and learned the Canadian accent by using English at their jobs and/or in performing their day to day activities. English language skills helped them to be more independent and to feel self-confident in their daily functioning. These findings highlight the importance of English language (both fluency and competency) for new
immigrants; otherwise, it is difficult for them to make use of various community resources available to them.

All of the participants talked about their strong religious faith and regular prayers which helped them to stay hopeful through their deep connection with the Supreme Being to address their acculturation challenges and depression (Mazhar, 2000). Thus, their faith allowed them to be empowered and stay hopeful that they would be able to attain their settlement goals.

All of the participants reported that they felt a stronger need to perform regular prayers to establish a deep connection with the Supreme Being and to attain His blessings which in return helped them to deal with their depression and acculturation hardships (Mubbasher & Saeed, 2001). To facilitate their deep connection with the Supreme Being, participants used the examples from the Holy Quran as well as from the life of the Prophet Mohammed (PBUH) who stood fast in his struggle despite experiencing many adversities in his life (Mazhar, 2000). Four of the 13 participants in the study explained that they were neither religious nor regular in performing their prayers in their home countries, but after immigrating to a Western country they felt protected and comforted by establishing a connection with the Supreme Being through strong faith and regular prayers. Two female participants started to wear the Hijab regularly in Canada, though they had never worn in their home countries. They claimed that the Hijab represented deep involvement with their religion by following Islamic attire. By having faith in God and regular prayers, they felt a strong connection with the Supreme Being, which encouraged them to follow Islamic values and teachings in a Western society.

Further to feeling empowered and finding strength in religion, many participants shared that their family and friends were instrumental in extending their social connections. These connections, in turn, helped them to cope with their acculturation hardships and depression. In
general, the South Asian culture is an interdependent culture where both immediate and extended family members support each other, leading to family cohesiveness (Schwartz et al., 2010) and social integration, which eventually leads to lowering rates of depression. Similarly, in the present study, after spending some time in their new land, participants realized that they could still maintain contact with their relatives living overseas via telephone and internet. The ability to maintain contact with overseas relatives was a consoling factor for them, allowing them to realize that they still belonged to the same ‘family net.’ In addition to maintaining contact with their relatives living overseas, participants became closer with their immediate families who immigrated with them. In the beginning stages of immigration, participants were fearful that they might lose their family support due to structural changes in their family. However after some time living in Canada, they were able to maintain their family relations which eventually reduced their apprehensions of losing their ‘safety net’ of family connections.

In addition to establishing close contacts with family members and relatives, participants within the first few years of immigration were able to form new friendships in Canada which further enhanced their social circle. As Osman (a male research participant) explained, “I do not have any relatives here, but now my friends are my relatives.” Similarly, many other participants in the present study explained that when they started to establish trusting relationships, they noticed a positive change in their social life. Consequently, their mood started to improve, and they became hopeful for their and their children’s future in Canada. Their hope for the future resulted in social integration and motivation to achieve their goals for settlement.

Many participants reported that connection with a larger Muslim community brought positive changes in their social and religious life, and they felt empowered by belonging to a
larger Muslim community rather than feeling isolated and segregated in their homes feeling no connection to the outside world. Prior to their affiliations with mosques and a larger Muslim community, participants were worried that their children would not be able to follow their religious and cultural values in a non-Muslim land. However after socializing with other Muslims, participants were hopeful that their children would be able to develop social connections and friendship with other Muslims; as a result, their children might feel proud of their ethnic and religious belonging rather than losing their ethnic and religious identity by mixing with the Western culture. Previous studies on settlement and integration processes of new immigrants also support the present findings that community networks and opportunities for community support lead to positive psychosocial outcomes which help new immigrants to face their harsh experiences of immigration with resilience (Al-Issa & Tousignant, 1997; Khan & Watson, 2005; Stepick et al., 2003). All participants reported an overall change in their thinking and emotional response as a result of deeper involvement with their religion and a larger Muslim world, which brought a positive change to their self-confidence and social life. Furthermore, participants were thankful to the Imams and other Muslims who supported them by sharing quotes from the Holy Quran and Hadiths (sayings) of the Prophet Mohammed (PBUH), thereby inspiring them to stay resilient in facing adverse experiences of immigration and depression. Seven of the 13 participants reported that the Holy Verses worked like ‘anti-depressants’ for them, and they felt energized and motivated after reciting and/or hearing them to pursue their goals for settlement. In addition, Imams and Muslim leaders worked as role models of perseverance and strong connection with God which encouraged almost all of the participants to stay resilient in facing their challenges. Thus, participants’ strong faith, regular prayers and religious affiliations brought changes in their thinking processes and motivated them to be
volunteers and role models for others who were facing the same challenges. Through their volunteer contribution, participants were hopeful that God would give them rewards for their good deeds sooner or later, which further empowered them to help others.

All participants shared that they gradually started to reach out to the community resources to explore what facilities were available to new immigrants. Most of the participants appreciated the support of the community organizations which were helping newcomers in their settlement and adaptation process. Those participants who had limited or no English language skills and were not familiar with the Canadian official form filling processes considered assistance from community organizations as a ‘blessing.’ However, two out of 13 foreign trained professionals noted that community centres had limited scope in making job arrangements for newcomers. Most of the participants agreed that community-based organizations were helpful in providing settlement and integration services to newcomers; however, new immigrants needed immediate financial stability to support their families rather than spending time in getting training. As a result, two foreign trained participants were not satisfied with their job search support through community organizations as they had wanted direct referrals into the job market (which was beyond the scope of these organizations).

Overall, all of the participants who used services from community organizations appreciated their support in developing community connections and opening doors to future possibilities, and this support played an important role in their settlement and integration process.

Furthermore, all participants shared that they started to admire the Canadian social structures and policies that helped newcomers to settle and adapt in Canada such as funding for newcomers settlement programs. Most importantly, they talked about political safety in Canada as compared to in their homelands and about their hope for a safe and secure future, which was
one of the main reasons for most of the participants leaving their homelands. Moreover, they admired the free healthcare, schooling, English classes, libraries and other recreational and sports clubs which were expensive and difficult to afford in their home countries. After seeing available resources and opportunities for growth, they realized what some of the differences were between living in a developed and a developing country and started to see the positive aspects of their immigration.

Many of the participants appreciated the way the Canadian government welcomes new immigrants and invites people from all over the world to consider Canada as their future homeland. However, participants suggested improvements in the settlement and acculturation process so that immigrants could use their talents and skills in attaining their settlement goals in a cost-effective manner. By gaining recognition of professional experience, social acceptance and respectable status in Canada, immigrants may be able to use their time and energy effectively and protect themselves from mental health issues (Sher, 2010). All of these strategies supported participants towards positive changes that helped them to overcome their acculturation hardships. Eventually these positive changes had a spiral effect and promoted a deep sense of belonging in Canada, resulting in their feeling acculturated and settled. Moreover, the sense of belonging made positive changes in their health and well-being.

Participants in the study also recommended using the pre-immigration period for preparing new Canadians for the Canadian lifestyle and for getting their groundwork done in their home countries, such as accreditation of qualifications and certifications, preparing resumes, and sending job applications. Yijälä and Jasinskaja-Lahti (2010) conducted a study to explore pre-immigration acculturation attitudes among potential ethnic immigrants from Russia to Finland and noted that pre-immigration is an important stage for immigrants. They also found that the
two most important pre-immigration aspects of potential immigrants were: (1) how informed they were about the host country’s attitudes about immigrants’ cultural maintenance and (2) contacts with host individuals. Thus, the present findings point to policy implications that the Canada Immigration and Citizenship authorities should start working with prospective immigrants in the pre-immigration stage when they are still in their home countries and planning to come to Canada (Khan & Watson, 2005). Eventually, this information will be cost effective for the Canadian government as it will be able to use immigrants’ knowledge, talents and skills to strengthen the Canadian economy, and new immigrants to Canada will be able to take advantage of their move to the new land without unnecessary delay in their settlement and adaptation process.

The close examination of participants’ responses indicated the possibility for emergence of a midlevel theory of acculturation and coping. The analysis process allowed for a consideration of the acculturation challenges, subjective experiences of depression and turning points and coping and becoming acculturated that impact the overall acculturation and coping process of immigrants. Thus, a theory grounded in the experiences of thirteen South Asian Muslim immigrants living in the GTA was developed. These immigrants faced intense acculturation challenges after their immigration to Canada, and described struggles with changes in family structure, cultural and religious differences, and feelings of isolation and segregation in a new land. All participants experienced depression in their subjective ways that caused mental health issues which further caused difficulties in dealing with their acculturation challenges. When they felt depressed and hopeless towards their future, they experienced several turning points (internal and external) which encouraged them to use multiple coping strategies to settle and adapt. Thus, the emerging midlevel theory illustrates three complementary and intersecting domains:
acculturation challenges; subjective experiences of depression and turning points; and coping and becoming acculturated (see Figure 17).

**Figure 17. Midlevel Theory of Acculturation and Coping for South Asian Muslim Immigrants living in the GTA**

The theory of acculturation and coping illustrates that those immigrants who experience intense acculturation hardships, go through a process of acculturation and coping (A) to settle and adapt in a new land. Three intersecting processes of acculturation and coping (C) interact to help these immigrants to settle and belong. For example, immigrants who experience
acculturation challenges and get depressed due to intense hardships after their immigration become disappointed and lose hope for a better future. Their emotional state is changed when they meet with their turning points, which empower them to use various coping strategies to face their acculturation hardships and depression. As a result, these immigrants become hopeful for their future and feel motivated to settle and adapt in a new land. However, some immigrants settle and adapt without going through the process of acculturation and coping in a new land (B).

Considering there is very little research related to the South Asian Muslim immigrants living in the GTA, this study offers an opportunity to consider information about their issues, challenges and coping strengths. In summarizing, inter-connectedness and transition between the three domains led to the emergence of a grounded theory of acculturation and coping for immigrants. In the next section, I will discuss the details of the implementation of the study as well as how the emerged grounded theory can be applied in the theory and practice of counselling, psychology and mental health.

Implications of the Study

No single research investigation can comprehensively address every aspect of the tremendously complex experience of immigrants. By focusing on the coping strategies of South Asian Muslim immigrants living in the GTA when faced with acculturation challenges and depression, this study offers an opportunity to consider a small but critical aspect of the rich experiences of these immigrants. Through the use of a qualitative research design the study provided more detailed experiences of acculturation and depression, turning points and coping strategies to overcome hardships and mental health issues. Participants demonstrated how during a 3-5 year period they coped with the acculturation challenges in the midst of depression;
eventually, leading to settlement and belonging in Canada. Based on the grounded theory that emerged from this data, I discuss the implications of the study below:

Implications for the Theory and Practice of Counselling, Psychology and Mental Health

The present study highlights the following implications for the theory and practice of counselling, psychology and mental health:

- The findings of this study clearly indicate that South Asian Muslim immigrants use religious and traditional ways of coping to deal with their acculturation challenges and depression. These various cultural strategies and the ways in which South Asian Muslim immigrants use them are important to consider in building a framework for understanding how individuals from these communities think about health and healing. This knowledge would enhance the theory of counselling practices and other mental health practices in order to offer culturally appropriate services to South Asian Muslims.

- This study shows that many South Asian Muslim immigrants understand and experience depression in a culturally constructed way using a body mind schema. For example, participants talked about ‘heart is falling down,’ ‘sinking heart,’ ‘holding heart tightly,’ and ‘having a dead heart.’ This awareness and understanding is critical for counselling theory building and for mental health practices.

- Participants described their acculturation hardships and experiences of depression within the current Canadian multicultural context. This study showed that the coping strategies that the immigrants used were embedded in their current socio-cultural and socio-political context. This knowledge and understanding of how they perceived, understood, interpreted and coped with their acculturation stress and depression is critical in psychology theory-
building in order that therapists become aware of these culturally appropriate strategies to deliver culturally inclusive and culturally sensitive services.

- The findings of this study indicate the importance of immigrants maintaining connections with their immediate and extended relatives living in Canada and overseas. Thus mental health professionals need to include the immediate and extended family members while offering support to South Asian Muslim immigrants. This additional support will further help South Asian Muslim immigrants to maximize their capacity to cope with their acculturation hardships. In addition, mental health professionals can include strategies to reduce the family distance by improving family interactions to establish a support network for immigrants to deal with their settlement challenges.

- It is important for mental health professionals to understand the pressure South Asian Muslims face due to changes in their gender roles after immigrating to Western society and to offer them needed support while accepting and acknowledging their newly established gender roles within their cultural and religious context. This support will help them to develop necessary coping mechanisms and action plans to deal with their gender issues rather than internalizing this stress and becoming further depressed.

- The results of the present study emphasize that mental health professionals should help newcomers to connect with English language learning resources as well as to develop a pool of educational material in different languages to support the target population.

- This study indicates that treatment of mental health issues should be embedded within culturally specific coping strategies so that clients can personally relate with them and implement them within their cultural context. There should be professional development
training for professionals to incorporate culturally appropriate coping strategies when offering appropriate mental health services.

- It is recommended that mental health professionals should understand three domains of the emerging theory of acculturation and coping for South Asian Muslim immigrants: (a) acculturation challenges; (b) becoming depressed (subjective experiences of depression and turning points); and (c) coping and becoming acculturated. Mental health professionals should use this midlevel theory of acculturation and coping to offer culturally sensitive support to immigrants specifically those from South Asian Muslim communities.

**Implications for Future Research**

Based on the outcomes of the present study, the following implications for future research are made:

- The present study highlights the support of family members during their settlement and integration process; however, the heads of families were concerned about bringing their family members with them when the heads of families were not personally settled in Canada. Future research is recommended to study the positive and negative impact of having the presence of family members at the time of immigration when the head of the family himself/herself is struggling to settle in a new country.

- Further studies are necessary to specifically investigate the impact of racism and discrimination on Muslims’ overall health status and to explore further their coping strategies to deal with racism and discrimination in order to settle in a Western country.
• There is a strong need to understand the challenges and coping strategies of refugees who are forced to immigrate due to political and/or religious instability in their home countries as compared to those who willingly decide to move to a new land.

• Overall, the findings of the present study indicate the policy implication that in order to have a successful acculturation transition, South Asian Muslim immigrants need to be connected within their cultural community. Future studies are recommended to study if South Asian Muslims immigrating to a Muslim country experience the same acculturation challenges and mental health issues while interacting with the local/mainstream population. In addition, these future studies will help to understand if Muslims are experiencing acculturation challenges due to cultural differences even though sharing the same religious connections or not?

• Moreover, it is imperative to investigate acculturation stress and mental health issues of those foreign trained professionals who have job arrangements before immigrating to Canada as compared to those who struggle after their immigration. Based on the findings, information about the Canadian job market and job search strategies should be provided to these professionals before they move to Canada in order to save their time and effort and to protect them from preventable mental stress.

• Further research is recommended to explore culturally sensitive outreach strategies to inform newcomers about available resources for addressing their acculturation needs, such as subsidized housing; the Canadian education system; opportunities for settlement services; resources for ethnic food; and social networking.
Further research is needed to explore strategies to decrease overall health deterioration of new immigrants by providing better opportunities for health promotion and healthy strategies for stress management; otherwise, it will cost millions of dollars to the Canadian government in the form of health care expenses and reduced chances of new immigrants to effectively take part in the Canadian economy.

Additional research comparing those who faced acculturation stress and depression resiliently with those who lost their hopes and suffered from severe mental health issues, will help mental health professionals to know further details of how to help newcomers in a culturally sensitive manner.

Longitudinal research work is recommended to explore the impact of years of residence on the settlement process. Also, further research should include South Asians from other religious groups such as Christians, Sikhs, and Hindus to compare their use of similar or different coping strategies to Muslims.

The present study included only first generation immigrants. It may be interesting to include second generation South Asian Muslims to see if there are any similarities and/or differences in their experiences and coping strategies because many of the participants showed concerns for future generations and had fears that they might leave their cultural, religious and traditional values in Western society.

Future research is recommended to explore possibilities of introducing aspects of the Canadian lifestyle to prospective immigrants during their pre-immigration period to support newcomers’ smooth transition into Canadian society.
Limitations of the Study

In interpreting the findings of this study, the following limitations must be considered:

- The participants in this study were not representative of all South Asian Muslim immigrants living in the GTA. While participants were volunteers who were comfortable expressing their experiences of immigration and depression, they were not randomly recruited. They chose to participate in the study as they were comfortable talking about their experiences. There are many South Asian Muslim immigrants who may have experienced acculturation stress and depression in a similar or even more intense way than this study’s sample but did not feel comfortable in participating in the study. A more random selection may have changed the results of this study.

- Due to purposive sampling, the results of this study may not be generalized to all South Asian Muslim immigrants in the GTA or for that matter in Canadian society. The findings in the present study included a small sample of immigrants who experienced depression in the face of acculturation hardships and eventually were able to settle and adapt to Canadian culture and society. The study did not include those who might have experienced the same acculturation challenges but did not become depressed.

- In this study, eight of the participants were referred from community organizations whose services were being used, and with whom the participants were still affiliated. Those individuals who did not contact or could not continue their affiliations with community organizations due to lack of satisfaction were not included in the study.

- Another limitation of the present study is that participants were asked to recall their experiences of immigration and depression. When someone is asked to recall their
experiences, there is always a chance that they might not be recalled exactly as they were experienced.

- Based on the limitations of the inclusion criteria of the current study (participants between 18 and 55 years old were included in the study), the age at the time of immigration may have affected the level of acculturation and ethnic cohesiveness. More research can provide further information on the interconnection between age at immigration, ethnic cohesiveness and the acculturation process, which was beyond the scope of the present study.

- The present study focused only on participants living in the GTA, so it cannot be generalized to South Asian Muslims living in other parts of Canada nor other parts of the world.

**Conclusion**

The present study shows that immigration and acculturation is a complicated process which affects every facet of South Asian Muslim immigrants’ way of life. Participants’ responses established a midlevel theory of acculturation and coping which illustrates that when immigrants experience acculturation hardships leading to subjective experiences of depression, they fall into intense mental health difficulties thereby limiting their ability to settle and adapt. When these immigrants experience internal and external turning points, they become empowered to use a combination of various coping strategies to deal with their acculturation hardships and subjective experiences of depression and to settle and adapt in a new land. It should be noted that there is a possibility that some immigrants settle and adapt in a new country without experiencing the acculturation and coping process (see Figure 17).
The findings of the present study highlight the way that Muslims face additional challenges in Western countries due to their religious affiliations and the fact that they are unable to participate due to ‘Halal and Hijab’ and other racist emotional experiences with the mainstream population, especially following the incidents of September 11, 2001. In addition, the present study affirms that there are some gender-based challenges that the target population faces in Canadian society. Muslim males experienced gender issues very differently from their female counterparts. For example, males were overtly stressed to financially provide for their families as the ‘head of their families,’ while females experienced more gender role changes if they were expected to financially support their families. Females also experienced discrimination due to observing Islamic traditions in their attire, specifically the Hijab.

The research findings indicate that there is a strong need to organize public education campaigns to promote diverse and multicultural understanding in both host and immigrant communities, so that they can understand each other’s cultural and religious values, traditions, attire, food, and way of life in order to live in peace and harmony according to the Canadian Charter of Rights. Information sessions on diversity and multicultural issues will help newcomers to understand as well as to deal with their internal conflicts between their own values and values of the host society. For example, newcomer parents in the study were apprehensive about the information that schools were providing their children with. In addition, newcomer parents perceived the information provided at schools as contradictory to their religious and cultural values. Even though the Ontario curriculum and education policy is available to all parents, the new immigrants interviewed found it difficult to access this information in their vernacular languages. Access to this information could bridge the communication gap between newcomers and schools, enabling the two groups to work harmoniously to support the healthy
development of children. All of the participants recommended that the Canadian government should include the pre-immigration stage as part of the settlement process. During the pre-immigration period, efforts should be made to share information material with prospective immigrants to prepare them for Canadian culture and society.

The prospective immigrants can be encouraged to undertake some of the important settlement-related tasks in their home countries before they immigrate to Canada, such as learning the English language, having comparative evaluation of educational documents, preparing resumes and job applications, seeking internship possibilities, gaining familiarity with the Canadian lifestyle, housing market, school system, and resources for ethnic food. This knowledge and understanding of Canadian culture will reduce the impact of acculturation hardships and perhaps the rate of resultant depression.

Based on their harsh experiences of immigration, participants in the study suggested having job arrangements made for new immigrants, especially those who have immigrated based on their professional backgrounds. Furthermore, participants suggested offering internship and job placement opportunities to increase opportunities for foreign trained professionals to work in their professional fields and therefore protect them from experiencing low self-esteem and lack of satisfaction in life. Without such opportunities, they feel useless and their discouragement impacts the rest of the family and results in mental, emotional and physical problems for the whole family. These strategies will also be effective for the Canadian economic climate in the long run as Canada will be able to benefit more from the foreign trained professionals (Khan & Watson, 2005).

It is interesting to note that the only one participant out of 13 reported using mainstream Canadian psychiatric support, whereas all of the other participants used their own traditional,
cultural and religious coping strategies to overcome acculturation stress and depression. The one participant who used psychiatric services combined it with his traditional, cultural and religious support. Canadian statistics show that only one-third of Canadians who need mental health support access mental health services (Statistics Canada, 2002b) and ethnic people use these services even less than the main stream population. Many other studies support the findings that immigrants underutilize mental health services, which are based on Western values (Moodley & Lubin, 2008; Tieu, Konnert, & Wang, 2010). Keeping in mind additional barriers for the ethnic population in approaching mental health services as mentioned above, there is a strong need for mental health professionals to understand the cultural and religious support mechanisms of the target populations and include them as part of counselling and mental health care. The present study supports Sue et al’s (1992) model for delivering culturally sensitive services which suggests that mental health professionals should have knowledge, skills and attitude to understand their clients’ cultural dynamics in order to deliver culturally sensitive services.

In summary, the findings of this study show that professionals should understand the cultural, religious, and social backgrounds of clients in order to offer culturally appropriate services to South Asian Muslim immigrants. There must be co-ordination and harmony of psychological approach and cultural context; otherwise, clients from the target population will not be able to relate to their psychological treatments, and this will result in non-compliance and early withdrawal from therapy. In addition, clients from ethno-specific communities may feel themselves ‘distant’ and ‘unfit’ for those psychological services which do not have any connection with their cultural context, which may result in a lack of rapport and poor therapeutic alliance with mental health practitioners (Moodley & Lubin, 2008).
By offering culturally sensitive services and having openness to traditional healing practices, Western mental health services will be inclusive of all clients within a multicultural society. This may be achieved through counsellors being aware of the religious, cultural and ethnic traditions of all immigrant groups. In some cases psychologists and counsellors may choose to collaborate with traditional healers to learn about their healing practices, and vice versa. What seems most critical from this study is that mental health practitioners need to be socio-culturally and socio-politically sensitive with new immigrants. It is only through these efforts that counselling, psychology and mental health practices can claim to be non-oppressive and culturally inclusive.
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APPENDICES
Appendix A
Glossary of Terms

(a) Acculturation

Acculturation is a process of adaptation to another culture that involves learning, development and competence in adjusting to the new culture and facing new challenges. In other words, it is a modification of a culture as a result of contact with other cultures. In the present study, the acculturation process of South Asian Muslim immigrants is investigated to explore their acculturation hardships, challenges and other cultural contrasts between the original culture and host culture.

(b) Acculturation Stress

During the process of acculturation, if individuals experience somatic, cognitive, social and psychological changes/difficulties then they are referred as experiencing acculturation stress. In most cases, it is noted that if there is a clash of values or difference in cultural norms between immigrant and host cultures, then more acculturation stress is experienced.

(c) Depression

Depression is a term commonly used to explain if someone is feeling low or sad; however, clinical depression can significantly affect most aspects of life. According to the American Psychiatric Association (2005) depression has a variety of symptoms, but the most common are a deep feeling of sadness or a marked loss of interest or pleasure in activities. Other symptoms include: changes in appetite that result in weight loss or gain unrelated to dieting, insomnia or oversleeping, loss of energy or increased fatigue, restlessness or irritability, feelings of worthlessness or inappropriate guilt, difficulty thinking, concentrating, or making decisions, thoughts of death or suicide or attempts of suicide. In the present study, subjective experiences of depression of South Asian Muslim immigrants are explored. These were self-reported experiences of depression described by the target population and no psychiatric diagnosis was used for the participation in the study.

(d) Coping/Resilience

Coping/resilience is an ability to bounce back and to effectively deal with adversities. Resilience skills prepare people to deal with adversities, reach out for opportunities, establish healthy relations and be less inclined towards depression. In the present study, coping strategies of South Asian Muslim immigrants are studies which help them to deal with their acculturation hardships and depression.
My name is Saadia Akram and I am a doctoral student in the department of Adult Education and Counselling Psychology at OISE/UT. You are invited to participate as a recruitment partner in a research study to investigate resilience in the context of acculturation and depression in the South Asian Muslim immigrants living in the GTA. As a recruitment partner, you will be requested to post a flyer in your institution to inform prospective participants about the research study. These prospective participants will be asked to contact the researcher for any further information and clarification about the research study. Later, based on the findings of this study, recommendations will be made to mental health practitioners for culturally sensitive services. This is a dissertation research project for a doctoral thesis at the University of Toronto under the supervision of Dr. Roy Moodley (roymoodley@oise.utoronto.ca).

WHAT IS THIS STUDY ABOUT?

Immigration, adaptation and acculturation to a new culture is a complexed process. In this study, I am interested to explore sources of resilience in the South Asian Muslim immigrants living in GTA while dealing with acculturation challenges and consequent emotional difficulties. For this study, I will be interviewing 20-25 participants.

I am looking for individuals who:

- Are first generation immigrants from India or Pakistan
- Are Muslim males or females
- Have been to Canada for more than two years and less than 5 years
- Have experienced symptoms of depression
- Have managed their depression during the specified period of time
- Are residing in the Greater Toronto Area (GTA)
- Are within the age range of 18-55 years
- Are Canadian citizens, landed immigrants, convention refugees, refugee claimants
- Able to communicate in Urdu, Hindi, Punjabi or English

DO I HAVE TO PARTICIPATE?

Your participation in this study is completely voluntary. If you agree to participate, you will be provided copies of a flyer to post in your institution. You will be asked to refer any further inquiries related to the study to the researcher. If you do not feel comfortable to participate in
posting the flyer and choose not to reply to this request, you are under no obligation to participate.

ARE THERE ANY RISKS AND BENEFITS TO PARTICIPATING?

There are no foreseeable risks involved in your involvement in this study. If you or prospective participants need more information about the study please contact the researcher.

There are several benefits of supporting the study:

- By exploring the acculturation challenges of South Asian Muslims living in the GTA and how they cope with them, mental health practitioners can better understand coping strategies of this particular community.
- Mental health practitioners will be better able to identify symptoms of depression in the South Asian Muslims living in the GTA as described by them.
- With culturally sensitized professionals, the community will simultaneously benefit to deal with mental health issues.
- By investigating resilience factors used by South Asian Muslims dealing with acculturation challenges and mental health issues, this study will help mental health professionals become aware of the resilience strategies used by the population. It will also help them incorporate existing resilience strategies into mental health services.
- As a result of professional development based on the findings of this study, counselling services for South Asian Muslims living in the GTA will become more culturally sensitive.
- This study will generate a theoretical basis on which to understand resilience, acculturation, and depression in other communities based on social dimensions other than ethnicity and religion (eg. sexual orientation, race, gender, ability, class, etc.).

WHAT WILL HAPPEN TO THE INFORMATION AFTER PARTICIPATING IN THE STUDY?

The research information will be completely confidential and a pseudonym will be used to identify research participants. During class discussions, meetings, public presentations, or book/journal articles, their identity and other personal details will not be released. All of the interview recordings will be erased after two months of the interview. The other related research information will be stored under lock and key at a secure and confidential place at OISE for 2 years after the study. This information will be accessible by only the principal researcher. Tapes and electronic files will then be erased and hard copy materials will then be destroyed and disposed of in a confidential waste.

Should you like to have a copy of the summary of this research, please complete the information below and I will be delighted to make this information available to you via mail or e-mail.

Should you have any questions about your rights as a recruitment partner, you may contact the Research Ethics Review Office by e-mail (ethics.review@utoronto.ca) or phone (416-946-3273).
If you like to participate in the study as a recruitment partner, please contact me via e-mail or phone. Should you have any questions to participate in this study, please do not hesitate to contact me.

With best regards,

Saadia Akram
Ph: 416-317-0439
saadia.akram@utoronto.ca

Date:

Request to Receive Summary of Results

◊ I would like to receive a copy of the summary of the main findings?

◊ Yes   ◊ No

If yes:

Name:
Address:
E-mail:
Appendix C

You are invited to participate in a research study

A Qualitative Study of the Process of Acculturation and Coping for South Asian Muslim Immigrants living in the Greater Toronto Area (GTA)

You can participate in this study if you:

- Are first generation immigrants from India or Pakistan
- Are Muslim males or females
- Have been to Canada for more than 2 and less than 5 years
- Have experienced hardships and symptoms of depression during adaptation phase in Canada
- Residing in Greater Toronto Area (GTA)
- Are 18 years of age or over
- Are presently having Canadian citizenship, landed immigration, convention refugee status, refugee claimant status
- Able to communicate in Urdu, Hindi, Punjabi or English

Participation in the study is completely voluntary:
If you choose not to participate, you are free to withdraw from the study at any time with no negative consequences.

Benefits of the Study:

- By exploring the acculturation challenges of South Asian Muslims living in the GTA and how they cope them, mental health practitioners can better understand coping strategies of this particular community.
- Mental health practitioners will be better able to identify symptoms of depression in the South Asian Muslims living in the GTA as described by them.
- With culturally sensitized professionals, the community will simultaneously benefit to deal with mental health issues.
- By investigating resilience factors used by South Asian Muslims dealing with acculturation challenges and mental health issues, this study will help mental health professionals become aware of the resilience strategies used by the population. It will also help them incorporate existing resilience strategies into mental health services.
- As a result of professional development based on the findings of this study, counselling services for South Asian Muslims living in the GTA will become more culturally sensitive. For more information please contact Saadia Akram (doctoral candidate at OISE/UT) 416-317-0439
Appendix D

TO BE PRINTED ON OISE LETTERHEAD

Research Study
A Qualitative Study of the Process of Acculturation and Coping for South Asian Muslim Immigrants living in the Greater Toronto Area (GTA)

Saadia Akram, doctoral candidate, OISE, University of Toronto, Ph: 416-317-0439, e-mail: saadia.akram@utoronto.ca

My name is Saadia Akram and I am a doctoral student in the department of Adult Education and Counselling Psychology at OISE/UT. You are invited to participate in a research study to investigate resilience in the context of acculturation and depression in the South Asian Muslim immigrants living in the GTA. Later, based on the findings of this study, recommendations will be made to mental health practitioners for culturally sensitive services. This is a dissertation research project for a doctoral thesis at the University of Toronto under the supervision of Dr. Roy Moodley (roymoodley@oise.utoronto.ca)

WHAT IS THIS STUDY ABOUT?

Immigration, adaptation and acculturation to a new culture is a complexed process. In this study, I am interested to explore sources of resilience in the South Asian Muslim immigrants living in the GTA while dealing with acculturation challenges and consequent emotional difficulties. For this study, I will be interviewing 20-25 participants.

I am looking for individuals who:

- Are first generation immigrants from India or Pakistan
- Are Muslim males or females
- Have been to Canada for more than two years and less than 5 years
- Have experienced symptoms of depression
- Have managed their depression during the specified period of time
- Residing in the Greater Toronto Area (GTA)
- Are within the age range of 18-55 years
- Are Canadian citizens, landed immigrants, convention refugees, refugee claimants
- Able to communicate in Urdu, Hindi, Punjabi or English

DO I HAVE TO PARTICIPATE?

Your participation in this study is completely voluntary. If you do not feel comfortable responding to any of the interview questions, you are free to let the researcher know and you are under no obligation to answer. From the time of interview to the analysis of data you can change your mind and decide to withdraw from the research by informing the researcher. In short, if you choose not to participate, you are free to withdraw from the study at any time with no negative consequences.
WHAT WILL I BE ASKED TO DO?

You will be invited to take part in an interview which will last about 60-90 minutes. In this interview you will be asked some questions related to your demographic information, your experience as an immigrant and how are you coping in regards to adjustment to Canadian culture and emotional feelings associated to it. The interview will be audiotaped with your consent, and that you are free to stop the tape recorder at any time during the interview, if you need more information or change your mind to participate in the study. The interview can be conducted in Urdu, Punjabi, Hindi and English languages and you can choose the language that is more comfortable for you.

Should you decide to participate, please contact me and I will arrange a suitable time to meet with you and answer any question you may have about the research study. Once you decide to participate in the study then we can schedule a meeting for the actual interview.

ARE THERE ANY RISKS AND BENEFITS TO PARTICIPATING?

There are no foreseeable risks involved in your involvement in this study; however, in the unlikely event that you should feel upset as a result of talking about negative immigration and acculturation experiences or flashbacks, you can inform the researcher so that help/counselling support can be arranged.

There are several benefits of participation in this study:

- By exploring the acculturation challenges of South Asian Muslims living in the GTA and how they cope them, mental health practitioners can better understand coping strategies of this particular community.
- Mental health practitioners will be better able to identify symptoms of depression in the South Asian Muslims living in the GTA as described by them.
- With culturally sensitized professionals, the community will simultaneously benefit to deal with mental health issues.
- By investigating resilience factors used by South Asian Muslims dealing with acculturation challenges and mental health issues, this study will help mental health professionals become aware of the resilience strategies used by the population. It will also help them incorporate existing resilience strategies into mental health services.
- As a result of professional development based on the findings of this study, counselling services for South Asian Muslims living in the GTA will become more culturally sensitive.
- This study will generate a theoretical basis on which to understand resilience, acculturation, and depression in other communities based on social dimensions other than ethnicity and religion (eg. sexual orientation, race, gender, ability, class, etc.).
WHAT WILL HAPPEN TO THE INFORMATION AFTER I HAVE PARTICIPATED IN THE STUDY?

The research information that you provide will be completely confidential and that a pseudonym will be used to identify you. During class discussions, meetings, public presentations, or book/journal articles, your identity and other personal details will not be released. All of the interview recordings will be erased after two months of the interview. The other related research information will be stored under lock and key at a secure and confidential place at OISE for 2 years after the study. This information will be accessible by only the principal researcher. Tapes and electronic files will then be erased and hard copy materials will then be destroyed and disposed of in confidential waste.

Should you like to have a copy of the summary of this research, please complete the information under the section “Request to Receive Summary of Results” of the consent form and I will be delighted to make this information available to you via mail or e-mail.

Should you have any questions about your rights as a participant, you may contact the Research Ethics Review Office by e-mail (ethics.review@utoronto.ca) or phone (416-946-3273).

If you like to participate in the study, please read and complete the enclosed consent form. Should you have any questions to participate in this study, please do not hesitate to contact me.

With best regards,

Saadia Akram
Ph: 416-317-0439
saadia.akram@utoronto.ca
Appendix E

TO BE PRINTED ON OISE LETTERHEAD
Research Study

A Qualitative Study of the Process of Acculturation and Coping for South Asian Muslim Immigrants living in the Greater Toronto Area (GTA)

Saadia Akram, doctoral candidate, department of Adult Education and Counselling Psychology, OISE, University of Toronto, Ph: 416-317-0439, e-mail: saadia.akram@utoronto.ca

You are invited to participate in a research study to investigate resilience in the context of acculturation and depression in the South Asian Muslim immigrants living in the GTA. Later, based on the findings of this study, recommendations will be made for mental health professionals to offer culturally sensitive services. This is a dissertation research project for a doctoral study at the University of Toronto under the supervision of Dr. Roy Moodley (roymoodley@oise.utoronto.ca). Your participation in this study is completely voluntary. Should you choose to accept to participate, you are free to withdraw from the study at any time with no negative consequences.

Please read this form carefully. If there is anything you do not understand please feel free to contact the researcher.

◊ I understand that this research is to study resilience in the context of acculturation and depression in the South Asian Muslim immigrants living in the GTA.

◊ I understand that I am being invited to take part in an interview which will last about 60-90 minutes.

◊ I understand that the interview will be audiotaped with my consent, and that I am free to stop the tape recorder at any time during the interview, if I need more information or change my mind to participate in the study.

◊ I understand that during this interview I will be asked questions about my immigration, settlement and acculturation experience and my reaction to the process of adaptation to Canadian culture, emotional feelings and coping strategies associated to it.

◊ I understand that if I do not feel comfortable responding to any of the interview questions, I am free to let the researcher know and I am under no obligation to answer.

◊ I understand that my participation to this research is voluntary and from the time of interview to the analysis of data, if I change my mind and decide to withdraw from the research, I can do so by informing the researcher.
I understand that the information that I provide will be completely confidential and that a pseudonym will be used to identify me. During class discussions, meetings, public presentations (i.e. conferences, symposiums) or book/journal articles, my identity and other personal details will not be released.

I understand that all of the interview recordings will be erased after two months of the interview. The other related research information will be stored under lock and key at a secure and confidential place at the OISE for 2 years after the study. Tapes and electronic files will then be erased and hard copy materials will then be destroyed and disposed of in confidential waste.

I understand that there are no foreseeable risks involved in my involvement in this study; however, in the unlikely event that I should feel upset as a result of talking about negative immigration and acculturation experiences or flashbacks, I can inform the researcher so that help/counselling support can be arranged.

I understand that possible benefits of this study may include opportunities:

i. By exploring the acculturation challenges of South Asian Muslims living in the GTA and how they cope them, mental health practitioners can better understand coping strategies of this particular community.

ii. Mental health practitioners will be better able to identify symptoms of depression in the South Asian Muslims living in the GTA as described by them.

iii. With culturally sensitized professionals, the community will simultaneously benefit to deal with mental health issues.

iv. By investigating resilience factors used by South Asian Muslims dealing with acculturation challenges and mental health issues, this study will help mental health professionals become aware of the resilience strategies used by the population. It will also help them incorporate existing resilience strategies into mental health services.

v. As a result of professional development based on the findings of this study, counselling services for South Asian Muslims living in the GTA will become more culturally sensitive.

vi. This study will generate a theoretical basis on which to understand resilience, acculturation, and depression in other communities based on social dimensions other than ethnicity and religion (eg. sexual orientation, race, gender, ability, class, etc.).

I understand and agree with the above information.

A copy of the consent form is provided to me.

Name: Signature:

Date:
◊ I would like to receive a copy of the summary of the main findings?

◊ Yes ◊ No

If yes:

Name:
Address:
E-mail:

**Researcher’s declaration:**
I have provided all of the related information to the research participant to the best of my knowledge and have provided the research participant with a copy of this consent form.

Name: Signature:
Date:
Appendix F

DEMOGRAPHIC INFORMATION FORM

A Qualitative Study of the Process of Acculturation and Coping for South Asian Muslim Immigrants living in the Greater Toronto Area (GTA)

Saadia Akram, doctoral candidate, department of Adult Education and Counselling Psychology, OISE, University of Toronto, Ph: 416-317-0439, e-mail: saadia.akram@utoronto.ca

1. Participant’s Name:

2. Participant’s Pseudonym:

3. Gender
   ◊ Male
   ◊ Female

4. Immigration Status at the time of migration to Canada

5. Socio-economic Status (Annual Household Income Range):
   Below $10,000
   From $10,000 to $20,000
   From $20,000 to $30,000
   From $30,000 to $40,000
   From $40,000 to $50,000
   More than $50,000

6. Marital Status:

7. Children: Yes  No  if yes (how many)

8. Country of Origin:

9. Preferred language: ◊ English ◊ Hindi ◊ Punjabi ◊ Urdu

10. Length of stay in Canada

11. Relatives or friends in Canada/GTA

   Thanks for your time and support.
Appendix G

DEPRESSION CHECKLIST
A Qualitative Study of the Process of Acculturation and Coping for South Asian Muslim Immigrants living in the Greater Toronto Area (GTA)

Saadia Akram, doctoral candidate, department of Adult Education and Counselling Psychology, OISE, University of Toronto, Ph: 416-317-0439, e-mail: saadia.akram@utoronto.ca

☐ DURING THE ACCULTURATION PROCESS

☐ PRESENT

1. Sadness      ☐ 2. Loss of Interest  ☐
3. Pessimism    ☐ 4. Worthlessness  ☐
11. Punishment Feelings ☐ 12. Concentration Difficulty ☐
15. Self-Criticalness ☐ 16. Tiredness or Fatigue ☐
17. Irritability ☐ 18. Suicidal Thoughts or Wishes ☐
19. Crying ☐ 20. Indecisiveness ☐
21. Agitation ☐
Appendix H

INTERVIEW QUESTIONS
A Qualitative Study of the Process of Acculturation and Coping for South Asian Muslim Immigrants living in the Greater Toronto Area (GTA)
Saadia Akram, Doctoral Candidate, department of Adult Education and Counselling Psychology, OISE, University of Toronto, Ph: 416-317-0439, e-mail: saadia.akram@utoronto.ca

I. (Experiences of Acculturation)
1. How would you describe your migration experience?
2. What challenges and hardships did you face after migration?
3. What did contribute more into these challenges? (prompt(s): children, family to support, language barriers, housing difficulties, employment issues, and cultural differences)

II. (Experiences of Depression)
4. What happened to you when you were facing all of these challenges and hardships?
5. Did you experience depression, sadness… (prompt(s): emotional symptoms: feeling depress, sad, guilty why did you migrate, leave everything and go back; somatic symptoms: bodily pain, low energy level, headache, heart pain)
6. How are you feeling now after facing all of these challenges and hardships?

III. (Experiences of Coping)
7. How come you handled the experience so well ... turning points (internal/external)/ what did you do to cope?
8. Did anything help you to cope with these challenges? (prompt(s): personal characteristics, religious beliefs and values, social networking, language, family support, community support or any other support)
9. Did you seek any support to get help? (prompt(s): friends, religious services, community centers, professional mental health services and so on)
10. What were your experiences?
11. If you want to add anything else

Thanks for your time and support.
Appendix J

Urdu Translation

A Qualitative Study of the Process of Acculturation and Coping for South Asian Muslim Immigrants living in the Greater Toronto Area (GTA)

Saadia Akram, doctoral candidate, department of Adult Education and Counselling Psychology, OISE, University of Toronto, Ph: 416-317-0439, e-mail: saadia.akram@utoronto.ca

I.

II.

III.

IV.

V.

VI.

VII.

VIII.

IX.

X.

XI.

XII.