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**Creating Politicized Spaces: “Here” and “There”: Lives of Elderly Afghan  
Women in Metropolitan Vancouver**

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**Creating Politicized Spaces: “Here” and “There”:  
Lives of Elderly Afghan Women in Metropolitan Vancouver**

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**Abstract**

Drawing upon an ethnographic study among elderly Afghan women in metropolitan Vancouver (2002-2005), this paper makes a case to recognize research participants as producers of context-specific knowledge. I argue that Afghan women, a disenfranchised population, deploy particular strategies to foreground two interrelated and politicised scripts: the political economy of migration and resettlement, and the remaking of a world. Related through the stance of “the wounded storytellers,” (to reflect the substantive connection between the North (here) and the global South [there]), and everyday life, these scripts bridge the long-standing analytical divide between the political economy and the human agency. Within this blurred space, the women bring forth three themes that speak to policy makers and stakeholders: (a) social provision as entitlement; (b) valorization of the multiple identities of the elderly women; (c) transnational communities that contain but also go beyond the unit of the nation-state. In conclusion, I argue that the anthropologists can bring in analytical and methodological skills that would help us reflexively listen to what the women have to say. This stance has the potential to affect a paradigm policy shift from elderly women as a social burden (the neoliberal paradigm) to persons engaged in claiming their civil rights, here and there.

## Introduction

The year 1978 saw the publication of *Number our Days* by Barbara Myerhoff (1978a). This seminal work profiles the lives of elderly American Jews in the vicinity of a senior center in California. When Myerhoff set up “camp” in this area, as anthropologists are wont to do, she expected these people to live out the last days of their lives uneventfully, barely coping from one day to the next. But she encountered a different scenario. Her research participants had established a vibrant community, living lives filled with meaning and zest. Myerhoff does not attribute their survival struggles to their declining years of life. Structural factors were paramount. Their children had moved away, and they were forgotten by the larger society. Their everyday life accomplishments, however mundane, were remarkable. Their message, conveyed through oral history, murals and the re-creation of rituals, was twofold. First, they left their mark on history in the way of telling the world that their lives were worth remembering. Second, they implicated the society for its indifference and social neglect in a way that would register in the minds of the readers. Who would forget the story of 95-year old Jacob: “He knew how to intensify the present, how to deepen his satisfaction in small rewards and pleasures, how to bring the past into his life for the continuity that gave it intrinsic meaning” (1978a, 172).

Writing in the 21<sup>st</sup> century, Freidenberg (2000) draws a parallel profile of Hispanic/Latino elderly in New York City. Being internally displaced by global capitalism, these individuals had migrated to the United States in their adult years. Contrary to their expectation of a better life, these migrants from Puerto Rico were shortchanged. Like other people from the global South, they were channeled into low-wage work. Growing old under these conditions amounted to being poor. Freidenberg chronicles their daily lives to bring home the face of poverty. Juan, for example, spends the night in a hospital emergency room when his asthma gets worse, due to poor ventilation and the humidity in his basement apartment. Fridenberg does not overlook the multiple ways in which her participants remake their worlds in the very process of living.

The two ethnographies reveal the dynamics of the political economy of migration and resettlement, as well as the remaking of the world, as these impact on the lives of the racialized (read disenfranchised) elderly. The two approaches pose particular challenges. The political economy approach subsumes human agency. But an exclusive focus on the multiple ways in which people remake and engage with the world masks the workings of power. Critical scholars have identified multiple approaches to address this long-standing dilemma. Scheper-Hughes suggests that we should be mindful of not romanticizing resistance to the extent that we become insensitive to “the horrifying

scene of savagery of scarcity and the brutality of political terror” (1992: 508). Yet, she does not dismiss what Das (2003) refers to as the engagement with everyday life.

Working among the sick and the poor in Haiti, Russia and the United States, Farmer (2003) suggests an engaged scholarship to expose the relationship between social injustice and suffering. Failure to make this connection, notes Farmer, implicates us in the global production of inequality. Das and Kleinman (2001) focus on documenting institutional responses towards injustice and suffering. The issue here is to expose how institutions appropriate suffering, reify and fragment it, and then cast a veil of misrecognition over it. Recognizing research participants as producers of context-specific knowledge, Dossa (2004) suggests that we pay attention to the multiple ways in which the participants speak. This includes the dominant discourses as well as alterity (such as the language of everyday life and the language of the body). It is through these media, notes Dossa, that the participants critique the system in their own terms and remake their worlds, always in relation to the larger society.

Our task, as researchers, is to identify structural factors as these come to light in the stories that people tell about their lives. Research accountability requires that we dialogue with the policy makers and the stakeholders who can effect progressive change in concert with specific populations. Towards this end, anthropologists have asked the question: How should we go about addressing the issues of social justice and democratic citizenship as voiced by our research participants? This does not preclude delineation of the political economy perspective.

Drawing upon our research on elderly Afghan women in metropolitan Vancouver, we engage with the above question in relation to the challenges posed by the political economy of migration and resettlement on the one hand, and human agency on the other. Towards this end, we will first examine the politics of exclusion of Afghan elderly women, attributed to two moments of displacement: Afghanistan (there) and Canada (here). Contrary to the common wisdom, we argue that the two moments are interconnected, substantively. Then, we will discuss the women’s take on the political economy-human agency divide. While they implicate the system for not meeting their basic needs, the women also remake their worlds, even if this is a scattered endeavor. Critical to our study is the notion that the social order is never “a single structure of constraint or merely the source of unnecessary forms of human suffering. Rather against the official politics of exclusion and indifference, society is better conceived as sets of multiple potential sources of collective empowerment and as multiple spaces of resistance” (Chuengsatiansup 2001:35). Preliminary anthropological insights on policy implications are noted in the conclusion.

## **Ethnographic Setting**

Between 2002-2005, we conducted field research among Afghan elderly women in two low-income housing locations: Valley View in Burnaby, and Meadows in Coquitlam, B.C. (fictionalized). Four aspects are noteworthy. First, all of our research participants lived in the subsidized low-income housing with their families, with the exception of one woman who lived alone. Second, our call for participants was directed towards older women, 60 plus. But younger women (aged 37 to 59) came forward as well. They stated that they considered themselves to be old. Twenty-five years of war and strife in Afghanistan had taken their toll on them. Furthermore, societal indifference and neglect (lack of social provision) in their country of settlement had left these women with the feeling that they were already retired. Regardless of the number of years in Canada (between 1 and 13 at the time of the study), the women related that they had a restricted number of places to visit. Common places included grocery stores, doctors' offices, schools (to drop off children or grandchildren), makeshift mosques, ESL classes (2.5 hours a day) and near-by parks. We also encountered difficulties in recruiting elderly women owing to restricted Canadian Immigration and Refugee Policy. Perceived to be a burden on the social system, elderly immigrants are not desirable migrants. Their multiple contributions within their families and communities remain unrecognized (McLaren and Black, 2005).

Third, although we had planned to interview the elderly participants as much as was possible, we found ourselves in the midst of families, especially women. Part of the reason was that the younger women were without waged work; they joined in the conversation with the hope that their stories would be listened to and taken seriously. We soon learned that the elderly women wanted to talk about family issues, and not about themselves exclusively. Their painful experiences of ruptured family life, brought about by war and violence, compelled them to prioritize "the family."

Fourth, some of the elderly women did not know their residential addresses. At first, we did not consider this to be unusual. We attributed this to language and an unfamiliar environment. However, our anthropological lens provided a different take. The issue was not that of adaptation, but isolation and alienation caused by structural factors. We may note that the residential address does not have to be an exclusive marker of one's spatial location. Sites and sounds, along with the knowledge of the surroundings constitute one's sense of home. In such a setting, one's place of residence is in relation to other places and other homes, indicative of interconnections. This is the kind of life that our participants were immersed in back at home. "Not knowing their address" can be read as a silent protest to their isolation – a violation of their sense of well-being.

The above characteristics, identified during the initial phase of our fieldwork, served as signposts through which we arrived at an understanding of the lives of our research participants in their new home in Canada.

Contacts were established through service providers and snow-balling strategy. Out of the 20 women/families that we visited, 8 were 60 plus, while the rest were between the ages of 37 and 59. The former group had elementary or no formal education while the latter included professionals (teachers, secretaries, paramedical workers) and homemakers. The participants had come to Canada as refugees or as landed immigrants from a second country (Pakistan, India, Iran, Ukraine and Russia). During our 1 to 2 sessions (2 hours each), the women talked about their lives in Afghanistan, migration to Canada from a second country, their everyday routine, their health status, service and health provision in Canada, and the “story of my life.” We gained valuable insights through participant observation of celebrations such as *Navroz* (New Year), Ramadan (fasting), the two annual *Idd* celebrations, attendance at mosque, and visits to ethnic stores.

### **The Politics of Exclusion: Family Class and Immigration**

It has been well noted that the elderly women and men are disadvantaged by the Canadian Immigration Policy. Their entry into Canada, under the designation of “family class,” renders them into a dependent population, compounded in the case of women who have fewer opportunities under national and global patriarchy. The policy’s emphasis on skilled workers creates two kinds of immigrants: desirable (economic contribution) and undesirable (McLaren and Black 2005). Falling under the latter category, the elderly immigrants are shortchanged on multiple fronts. They receive fewer services, further reduced through the restructuring of the welfare state. Their multiple contributions within the households and in fostering community life are dismissed as insignificant. Elderly immigrants also play a role in nurturing transnational families. As Freidenberg has observed: “Immigrant aging needs to be understood as transnational social mobility...” (2000: 4). The state’s construction of sponsored elderly women as undesirable dependants, renders them vulnerable to familial exploitation.

The above scenario is accentuated in the case of elderly refugee women. To begin with, the host countries “tend to share the premise that refugees are necessarily ‘a problem.’ Not just ‘ordinary people,’ they are constituted, rather as an anomaly requiring specialized correctives and therapeutic interventions” (Malkki 1995: 8). This discourse translates into indifference and societal neglect of people who need social services the most to rebuild their lives.

As a country that has signed on to the UN Convention on refugees, Canada is obligated to accept a certain number of refugees each year. However, this move is framed within a particular kind of discourse: namely, that of the West as the saviour of people fleeing the chaos and violence in their own countries. For example, during the Immigration Refugee Board (IRB) hearing, applicants can only put forward one script: they are escaping persecution from their own countries. A second and an important script is that the West (home of selected refugees) is not an innocent bystander. It is implicated in the displacement of people through economic, political and military interventions, a part of the colonial legacy and of global capitalism. Refugee applicants who would dare spell out this script would do so at the cost of jeopardizing their status (Razack 1998; Thobani 2003). Masking of this script of responsibility and accountability has major implications. It affirms the image of the West as the saviour of the Other. In the process, refugees are constructed as the “problem.” This state of affairs explains the unusually large body of mental health literature on this population. In reality, the system shortchanges refugees. It does not provide them with adequate services to settle down and rebuild their lives. Restructuring of the welfare system has reduced social provision to the bare minimum. This is indeed the case with Afghan refugees. At this juncture, we need to address two interrelated questions: who are the Afghan refugees and what are the conditions that displaced them en mass?

### **Afghanistan: A Wounded Country**

Two moments stand out in the recent history of Afghanistan: (a) the invasion by the former Soviet Union (1979), and (b) the invasion by the United States and its allies (2001). The two events are interconnected. It was the Russian occupation of the country (1979-1989) that brought in United States, a Cold War entanglement. Over a decade, both the powers provided arms and ammunition to different factions to the extent that when the Russians left in 1989, Afghanistan was destroyed and its people incurred deep wounds, physically and otherwise. The United States invasion of Afghanistan is attributed to its war on terror, post-9/11. What has been left unsaid is that the United States along with the Soviet Union was responsible for turning Afghanistan into an armed camp. It supported bin Laden and had a hand in the rise of the Taliban, a regime that brutalized the country from 1995-2001 (Cooley 1999; Goodson 2001; Mamdani, 2004). Through the invasion of the whole country, the United States sought to destroy the monsters that it had created. In the process, Afghanistan was destroyed and its people displaced en mass, a reality reiterated by all the research participants. The women related stories of pain and suffering that they attributed to two and a half decades of war and violence. While local factions were active prior to the two invasions, they did not have the military

capacity to wage internal wars until such time that arms and ammunition were provided by the super powers.

Afghan refugees have been re-traumatized due to societal neglect and indifference in the country of their settlement. One of our participants related that she had to call the police to inform them that her severely depressed husband had a knife. Only then did he receive treatment. Prior to this, her calls for help had been to no avail.

The women in our study expressed surprise that “people from the university” were interested in their stories. As one woman put it: “No one has come by to ask: How are we doing? What have we gone through?” Societal silence impacts on the everyday lives of people as much as social injustice and withdrawal of social provision. Throughout our research, the women emphasized the point that war and violence had made them grow old beyond their chronological age. And upon coming to Canada, the women felt that they were compelled to go into “retirement” at a young age, owing to lack of opportunities for language learning and skills training. Likewise, elderly women were not able to get around owing to financial constraints and lack of familiarity with the language and the surroundings. Younger women repeatedly informed us that war and violence as well as societal neglect had stolen their adulthood, just as a generation of boys and girls did not experience childhood. As one woman expressed it: “When our children were growing up, there was not a single day when they did not hear bombs and rockets.” Consider the situation in Canada. A second woman related that she does not take her children to the malls as “they want to buy things like other children in their school. I do not have the money. I have to keep them home. I do not have the money to take them to a movie. You need money to go out.”

### **The Wounded Storytellers**

The elderly and some younger women listed their health status as “not well.” High cholesterol and blood pressure were common symptoms. Other women talked about pain in particular parts of the body. A number of women (13 out of 20) were depressed that they defined as anxiety, sadness, *parishan* (worried) and being unhappy. Yet, they received poor quality of care. Translators were not available during their visits to the doctors and, in some cases, the medication prescribed was outdated. “When we go to the doctor, we tell him ‘pain here, pain there’ and he gives us pills.” A second woman related that the medication she received for her depression was not effective. She received outdated medication as what was on the market was expensive and not covered by her medical plan. A third woman stated that sometimes her doctor felt sorry for her and he gave her pharmaceutical

samples. It must be noted that the women were actively engaged in self-care such as walking, home remedies and prayers.

As I have shown earlier (2005), Afghan women have a good understanding of the social origins of their ill health. But they do not convey this message “textually.” They adopt the stance of wounded storytellers, as they know that this is an effective and powerful way to get the message across. Stories that emanate from the wounds and the scars are collective stories, testimonials that implicate but also speak to society to elicit a moral response. Consider the following 3 excerpts.

***Excerpt 1***

Our life was spent there in Afghanistan. Our daughters grew up there. They were small. We spent 12-13 years in India. Then gradually we moved out of Afghanistan due to war. We fled. It was war you know. War. We had life. We had our house. We had relatives close to us. Then we fled with 1 son and 3 daughters. We left when the killing started.

I have high blood sugar. Illnesses unknown to me. I got the high blood sugar in India - cholesterol, dizziness. Everything turns around my head.

***Excerpt 2***

So it is all mental anxiety. I am upset. I am sad. The doctors say, it is nothing. All the mental anxiety from back home in Afghanistan.

We had so much happiness, family life. So many parties, nice clothes. Everything we had. Then this revolution and war came. Everything was destroyed. Ruined. Now I am here and nothing is here. Nothing is left. Only far from everyone. Just being lonely (bitter laugh). Crying tears and only tears.

***Excerpt 3***

The rockets came to the houses, just came. We did not know where to go. People died. People were buried under the ground. We had to pull them out. Pull them out. Pull out the hurt. It was one room, one kitchen there. We had to hide. God knows how we got there [in one house]. We hide behind walls, behind things. It was burr, burr, burrrrrrr. Only sound overhead. We cried. It hit, hit, and it hit.

An account of war and the destruction of Afghanistan and its people are reflected in all the narratives, without exception. The women also conveyed the message that their suffering has not abated in their new homeland in Canada. Sixty-three-year old Roshan, for example, stated that she was very unhappy that her son and her widowed daughter had not found work in Canada. She understood that the family has not been in Canada for more than two years. Her concern was that the

job prospects for her children were dim, as they did not have much opportunity to learn the language (2.5 hours of ESL everyday), and that they were not registered in any kind of training program. Her first words to us were: “Will they give a job to my son? Will they give a job to my daughter?”

She filled in the details. Prior to coming to Canada, the family has lived in Ukraine for four years. While they managed to live on her son’s salary, they were worried. As undocumented migrants, they risked deportation. They were accepted into Canada as they were considered to be ‘genuine’ refugees. They received government assistance for one year. What is odd about this scenario is that the family received no information on social services that they are entitled to as refugees. The family is currently on social assistance that they received only after the children produced ‘documentation.’ “They give us papers and we ask for a job. We have to go on the streets. Ask the stores to give us a job. They sign a paper that we asked. When we take this paper to welfare, then we get money” (Rehana, daughter). Furthermore, the family has been asked to pay back the money that the government had loaned them to purchase their air tickets to Canada.

Roshan’s concern is that without jobs, her son and daughter are depressed. “My son is sick. My daughter is sick. What to do. I do not know.” Referring to her daughter, she noted: “She has no husband, no kids. She is sick. Night to morning. She is awake. She has no sleep. Pain in her legs. No sleep in her eyes. Myself too. We sleep in the same room. When she has no kids, no husband, no life. Nothing. Only pain and suffering.” Rehana’s husband was a bomb victim in Afghanistan. Khatoun, the daughter-in-law related: “My husband is sick. He does not talk. He is sad. There is no work. No jobs for him. He has headaches. Doctor says depression.”

Roshan and her family have an additional worry. Her 7-year-old granddaughter was hurt while in Afghanistan. “My daughter was hit by rockets and bombs. Her feet are gone. Half is gone.” She gave a physical demonstration of how one walks with the heels. She repeated: “the front part of the feet are gone. She walks with the heels. I put many socks on top of each other. Socks, socks to make it thicker.” In response to our question on whether her daughter has received any help, Khatoun stated: “When we came, they made her boots, special boots. She needs a wheel chair. Immigration has not approved. We have no money. They said school is two blocks. She can walk. She has pain. My husband carries her.”

It is the condition of her children and grand daughter that has caused Roshan to be sick. She stated that she has a lot of anxiety (*parishani*), stress and sadness. “I know people who talk and cry. Their stomachs get cold. I have cried a lot. My eyes are bad now because of crying.” She continued: “I cry a lot. My eyes are damaged.”

The other elderly women in the study also talked about their suffering, always in the context of family life, here and there. Nargis lives by herself in a one-bedroom apartment. She stated:

Mostly I think of my son who is away from me, far away. Why did this all happen if the situation in Afghanistan did not occur, we had not separated like this. One here, one there. One sister in Afghanistan. One sister in Pakistan. One somewhere else. One brother in Afghanistan. This all makes me suffer. I have a sister. She was like my daughter when she was little.

Other women in the study talked about the suffering of their families in Afghanistan, Pakistan or Iran (over there), and in Canada (over here). Each woman had a story to tell. One woman related that her greatest regret is that she married off her 14-year-old daughter, “otherwise the Taliban would have taken her.” She wants to sponsor her but she has no income to do this. A second woman stated that she was worried about her sick daughter in Pakistan, but she had no money to send her for her treatment. A third woman talked about her separation from her husband; he is in India and she is having difficulties in bringing him over. The family stories speak to the larger issue of the destruction of Afghanistan and its aftermath. As one woman put it:

My husband was killed. My kids would have been killed as well. There was nothing left. My kids had gone to school and they also bombed the schools. So if my kids had got hurt or killed, I would never have forgiven myself. But I did work hard. I had the strength and the money to get out of there, to India. There we had no work permit. There were no jobs either. We had a problem. Our relatives in America helped us. If I did not have them, I could not have managed my life. Many people did not have that help.

As noted above, the elderly women in particular embody the scars and the wounds that tell a larger story. In my earlier work on Iranian and Afghan women (2004, 2005) I show that the body begets speech where language cannot fully capture the experience of pain and suffering. To recognize ‘the body in speech,’ two approaches have been put forward. Representing the first approach, Arthur Kleinman (1988) suggests that the body speaks through the symptoms of illness. Bodily expressions of symptoms, he argues, contain two messages: (a) embodiment of pain and suffering, and (b) transformative possibilities, also referred to as bodily praxis (Lock and Kaufert 1998).

Arthur Frank’s work exemplifies the second approach. This author notes that bodies are communicative by nature and hence they use stories to convey critical messages to the world. Rather than being individual acts of narration, the stories, notes Frank, contain narrative truths suppressed by the dominant language. Stories make it possible for sufferers to position themselves as witnesses to their trauma, inviting audiences to reciprocate by becoming witnesses in turn. This is what gives the story its power.

As Arthur Frank expresses it, “What makes an illness story good is the act of witnessing that says, implicitly or explicitly, ‘I will tell you not what you want to hear but what I know to be true because I have lived it’” (1995, 63). For Frank, reclaiming of a voice begins with the body.

Several features may be identified in the story that emanates from the body. First, it ensures that the self is not constructed exclusively as the victim. Such is the complexity embedded in the story. Second, it brings home the reality of suffering so as to render it socially visible. Third, it tells a collective story. On our part we need to learn to listen and read the language of the body.

We cannot live other people’s pain and suffering, states Veena Das (2003). But we can learn to listen to what the women have to say. It is evident that the elderly women, using a family lens, have made a substantive connection between their lives in Afghanistan and their lives in Canada. While they are relieved that they are not subject to bombing and violence that they experienced in their home country, the women’s suffering has not abated in Canada. They expressed concern that they are isolated and feel alienated from their environment. In response to our question on what life would have been like for her (elderly woman) in war-free Afghanistan, she said: “I would be visiting other people during weddings (a huge affair), birth, and paying my condolences during death. I would be with my children and family (extended). I would be visiting neighbours. I would be going to the stores.” In comparison, she described her life in Canada as being “mostly at home. I wait for the grandchildren to come home from school.”

Our listening must take into account two salient points. First, here (Canada) and there (Afghanistan) must not be discursively constructed as separate. Otherwise, we will perpetuate the Orientalist discourse where the West positions itself as superior and the saviour of the Other world. Here and there are connected. We must recall that the West is implicated in the destruction of Afghanistan. And therefore we are morally responsible for Afghans who have sought refugee and landed immigrant status in Canada. This point needs emphasis, as this connection is not recognized; it has policy implications. The current policy (existent and non existent) is framed along the lines that Afghan elderly (includes other racialized groups) need our assistance, as opposed to the notion that we are assisting them to settle down because we are implicated in their displacement and dislocation. Second, we must recognize the everyday world of people. We argue that it is in this context that we can identify the multiple ways in which people rebuild their lives, despite structural constraints (in this case, the political economy of migration).

### *Everyday Life*

Everyday life is of interest to us as it helps us to problematize what has come down to us as “normal practices.” Women’s care work, for example, falls in this category. It has been assumed that women are “naturally” nurturers. The issue is not the role per se but the way in which such normalization allows us to exploit them – women’s unpaid care work is taken as a given reality. Study of everyday life tells us a lot about the society in which we live. It is the everyday scenarios, such as a child not being able to play outside the house or when an elderly woman is confined to the house that should make us question our taken-for-granted reality. It is also in the realm of everyday life that seeds of change are planted. It is within this space that human agency is exercised, an aspect that is not recognized as we have yet to study the nooks and crevices that constitute this complex world. It is in this context that we will pay a “visit” to Jamila for a glimpse of her life in Canada.

It was 2:00 PM when we arrived at the home of Jamila, a 63-year-old widow. Having visited several families in the Meadows, it did not take us long to find the place. Jamila welcomed us and directed us to sit on the sofa, covered with hand-woven Afghan throw cover. This was one way in which families “covered up” the second hand furniture from welfare agencies. The throw cover also served to provide an Afghan décor to the house, along with Afghan rugs placed on the worn-out living room carpet. Mixed nuts and raisins were placed on the table, a tradition for welcoming guests. Jamila referred to us as “guests” and not as researchers, a shift that re-frames power dynamics in field research. It is through such reciprocal relationship – however momentary it may be – that the research participants create a space in which to tell their story in their terms. Gelya Frank (2000) provides an illustrative example. She notes that Diane, her research participant, introduced her as “my biographer” and not as “my researcher.” This way Diane had some leeway to tell her own story.

We were struck by the way in which Jamila, along with her daughter-in-law (Shenaz), had created a homely atmosphere. This aspect needs to be mentioned as this family of 5 (Jamila’s son and daughter-in-law and their 3 children) live in a 2-bedroom apartment. The family is cramped. The toys were in the closet and on the windowsills; the kitchen was small and there was barely any space for the dining room. Bags of onions and rice were placed tidily under the dining table. Yet, this was an Afghan-Canadian home, revealed by the fact that beside the Afghan wall hangings, there were Christmas lights, as this was the holiday season. The children’s toys were from the local stores. Shenaz wore Canadian clothes (trousers and top). Jamila wore a long dress and she covered her hair with a loose scarf.

It was interesting to note the way in which the Canadian and the Afghan activities and items were woven into each other or juxtaposed. Canadian as well as Afghan and other ethnic programs

(especially Bollywood) were viewed on television. Items bought from the local superstores, for example beans and dried coconut, were used to prepare Afghan foods. Likewise, Afghan recipe and food items were used to make Canadian popular foods like beef sausage and pizza (with *halal* meat). In their everyday lives, older and younger Afghan women endeavored to create a space where they could claim an Afghan-Canadian identity, however fragmented and uneven this may be. For illustration, let us consider three activities that formed part of the everyday life of women: food, prayers and transnational networking.

### ***Food***

All the families in our study consumed Afghan food. This is not unusual. What is of interest is the modification of food from back home; multiple ways were at work. Afghan food was bought at both the superstores and ethnic stores, especially Iranian and Indian stores. Notably absent were a sizable number of Afghan stores, an indication of a displaced and uprooted community. The elderly women went along with family members on their food shopping trips to ethnic stores. This constituted an outing, a form of “recreation” that they looked forward to. During these trips, they would often exchange words with their Afghan peers and acquire a culinary glimpse of Afghanistan.

It is important to note that the elderly women did not merely tag along with families. They played an active role in looking for “authentic” foods that evoked “nostalgic gastronomy” of their homeland. I was struck by the elderly women’s culinary knowledge of the food items displayed on the shelves. But the women were painfully aware of the fact that these items did not come from Afghanistan, once a self-sufficient country. Furthermore, they could not always afford to buy what they needed. Mankekar informs us that “homeland” stores “invoke and produce powerful discourses of home, family and community – all of which are contested, and all of which are gendered in important ways” (2005: 210). The culinary memory of homeland was relished and moaned. While it brought back vivid images of the good times, which the women equated with family celebrations, they also knew that those days were over and it was time for a new beginning.

With the exception of those who were not keeping well, the elderly women in our study cooked part of or the full meal assisted by the female folk in the house. The women had modified their foods (less salt, less fat) in keeping with the advice they had received from their doctors. More importantly, there were certain Afghan dishes that the elderly women were particularly skilled in making. These women also had knowledge on healing foods that they used for themselves and for family members, especially for minor ailments such as colds and stomach pain.

Food preparation is an everyday activity, consuming time on a varying scale. It is also a social activity. Yet, it has not received substantive research attention on a par with other subjects of inquiry. Emerging work in the area reveals symbolic, social and political dimensions. Of interest to our study is the role of the elderly Afghan women. To begin with the topic of food was engaging and meaningful to them. Through food they evoked memories of their native land and of the time when families got together and participated in festivities. It is of interest to note that the women did not talk about days gone by in a nostalgic way. One woman related how she was pulled out of school at the age of 14, as her father wanted her to learn how to cook in preparation of her marriage to her cousin. A second woman talked about having to cook for 12 people for her extended in-laws family at the age of 16.

In Canada, elderly women, not unlike the younger women, are confronted with challenges. The women related how they have to improvise their cooking (use beans instead of meat) owing to financial constraints. Some of the women lamented the fact that they could not get herbs from Afghanistan. As one woman put it: “The soil where we grew herbs has landmines.” There was also the issue of their grandchildren wanting to eat popular Canadian foods. To accommodate their taste, the women made hamburgers and beef sausages from *halal* meat.

Based on the above observations, gleaned from the interview data and participant observation, I would like to make two points. First, through food elderly women negotiated two realms: life as they had known it, and their new life in Canada. Their visits to the shops, their need to eat healthily, financial constraints and their awareness to “cook” Canadian foods for their grandchildren, kept them occupied in no small way. The women had become skilled in looking for bargains. Once, as I was purchasing walnuts from an Iranian store, Fatima (my research participant) suggested that I buy the loose walnuts in a bucket in the corner of the store. They were much cheaper than the ones placed on the shelf. She had worked out the price difference. Second, their experiential knowledge on Afghan cuisine and herbal medicine (although not put into full use) were valued, especially in a situation where the families are scattered and on the move. Many of the elderly women related “food” stories. One woman stated that when her husband was imprisoned in Afghanistan, she decided to do *nazr*, that is feed the poor for seven days. A second woman related how her 12-year-old son was picked up by the army while visiting a grocery store to pick up a food item that she needed for a dish. A third woman stated that her neighbours were having a meal when their house was bombed. “What we saw was rice and bowls beside bodies.” Food lends poignancy to the recall of events. Given its polygon nature (including sensual and visual aspects), it has the potential to soften the harsh reality of life. As one woman put it, “Even if we get ‘dry bread,’ I am going to be grateful. I

have gone through so much pain that I can make something of this dry bread.” Dry bread refers to the bare minimum that the woman was determined to make something of. Her comments are reminiscent of women’s efforts to use affordable ingredients and cook Afghan food and also “Canadian” food, according to their particular circumstances.

Women’s food stories included other contexts. One woman related that the welfare office overlooked giving her child credit. She and her three children had to go hungry for seven months (they could not have three meals a day). A second woman stated that she makes bread and yogurt at home to save money. A third woman related that she never picks up canned food from the Food Bank. She only accepts dried beans so that she can prepare a fresh meal. A fourth woman stated that on multicultural days at school, she makes it a point to take Afghan dishes so that “the Canadians can come to know about our culture.”

A salient theme in the above stories concern women’s agency exercised in relation to particular contexts that are at once political and social.

### *Prayers*

The elderly women in our study stated that they prayed everyday, three to five times a day. The women also read Qur’an-i-Sheriff. At one level, this observance suggests personal and therapeutic time. The women talked about getting solace and comfort from prayers. There are other social and political dimensions to prayers. Some women used prayer time to withdraw into a room, away from the noise in a cramped two-bedroom apartment. A younger woman explained: “when my mother-in-law goes into the other room (shared), no one disturbs her and we always make sure that the TV volume is low.” How elderly women use prayers to withdraw from undesirable situations was revealed to us during the interview process. One woman excused herself in the midst of an interview on the grounds that it was time for her to pray. She did not leave us alone as her daughter-in-law was present. We got the cue: this was her cut-off point from the interview.

Reading or reciting verses of the Qur’an was very satisfying for the elderly women. Not knowing the English language, this was one area where they could claim expertise and feel totally at home. Two aspects are noteworthy. The women related verses in relation to particular situations. They recounted how they would instill values on the children by quoting Qur’anic verses. One woman put it this way: “The children do not always respond right away but they will remember the verses. How can they not? They are so beautiful.” Particular areas that the women identified included: respect for the elderly and guests; kindness and care for others; honesty and being a good Afghan-Canadian. The women did not talk to abstract terms. They cited verses in relation to context-specific

situations. A younger woman summed up the association between the bodies of elderly women and prayers. “Even if they do not say much, the fact that they pray matters to the family. Their presence brings *barakat* (grace and blessings of Allah) to our homes.” This spiritual role contained disadvantages. The elderly women often found themselves at home, alone for long periods of time.

### ***Transnational kin Networks***

The social landscape of elderly women in Canada is thin. The women did not report knowing too many people outside their immediate family. They knew the Afghan families in their building and exchanged greetings and talked a bit when they saw them in the elevator or in the near by park. If friendship was struck, it was only with a couple of families. Their interactions with non-Afghans were minimal or non-existent. Some women reported being approached by Jehovah’s Witnesses who must have noticed their isolation. Ironically, the doctor was mentioned as one person whom they saw a couple of times a week. However, the women interacted actively with their relatives in other parts of the world. Most of the women used phone cards and talked with their kin once or more times in a week. Their conversations, according to the women, included such topics as exchanging notes on life in their respective countries, providing solace in coping with difficult circumstances (this was the order of the day for many families), sharing ideas on “how to keep healthy,” and sharing news on Afghanistan. The elderly women passed on the information they had gathered to their families and peers. Through this regular activity, the elderly women played a role in nurturing transnational families, even if these were ruptured due to war and violence. It is through the elderly women that the younger generations come to know who is who in their extended and transnational families. Elderly women are the repositories of familial knowledge.

### **Policy Implications**

The political economy profile of the women in our study is not unlike the one portrayed in the scant literature on aging immigrant and refugee women in North America (Khan 2002; Moroika-Douglas *et al.* 2004; McLaren and Black 2005, Salari 2001). The Canadian Immigration Policy renders aging women dependent, as they enter the country under the family class category. This socially ascribed dependency status translates into lack of service provision, which impacts on their everyday lives. The women are isolated and they experience ill health, attributed to social origins. It has been well noted that immigrant elderly women are not able to access services on the same scale as younger women and their mainstream counterparts. In the case of Afghan women, insensitive institutional response has resulted in their social invisibility. Their residence in the two cramped low-income

housing complexes, the sites of our study, revealed an ironical situation. They lived near a mall – a social place of consumption. But the products sold were beyond their reach. Their social interactions were also limited; a language barrier and racism are salient. The physical-social split, as encapsulated in the housing complexes, shows how populations can be seen but not noticed. They are socially forgotten, a theme that was reiterated by all the participants of our study, as well as in the two ethnographic examples cited at the beginning of this paper.

Conventional policy implications of this scenario would suggest immediate intervention to achieve a two-fold goal: to reverse the elderly women's sense of alienation and to assist them in dealing with their pain and suffering brought about by warfare and structural violence. My work (2004) with the elderly Iranian women on the North Shore of Vancouver showed that the women were shortchanged on both counts. To achieve the first goal, service providers put into place a weekly two-hour mall-walking program run by volunteers. This top-down cost-effective program, implemented for all the frail elderly, did not serve the Iranian population well. The elderly Iranian women could not afford to buy lunch like their mainstream counterparts. This isolated them further and the language barrier prevented them from having a conversation with the English-speaking young volunteers. The service providers overlooked these aspects. They talked about their accomplishment in giving an outing to these isolated Iranian elderly. Likewise, an English-speaking counselor and a Farsi-speaking translator, the second goal, could not address the women's pain and suffering brought about by the 1979 Revolution, the Iran-Iraq war (1980-1989), and their resettlement experiences in Canada. The counselor placed the onus on the individual women to learn to get on with their lives – to turn the page so to speak.

Interim and long-term policy measures are informed by the neoliberal paradigm. Its focus on the individual body, rather than the body politic, and its emphasis on cost-effectiveness, means that populations are shortchanged, hierarchically. Some service consumers are constructed as deserving while others fall in the category of undeserving. The paradigm does not accommodate such issues as ethics of care, citizenship rights and entitlements. In Canada, the neoliberal policy, informed increasingly by the restructuring of the welfare state, has yet to accommodate the concerns of racialized minorities who fall under the category of the Other, (read, structurally disadvantaged).

An anthropological take would suggest a bottom-up social and health policy, as it comes to light from the narrative data. Three themes are salient. First, the elderly women (and their families) are entitled to social provision on a scale that would help them build a new life in Canada. This must not take the form of ad hoc measures but must be systemic and connect with the everyday lives of women. Social entitlement is an issue brought into relief by the women themselves. Speaking as

wounded storytellers, the women make a connection between here and there, implicating the West for their displacement. But this is not the end point. We have noted the interface between the everyday lives of women and their multiple roles. It is through these roles that the women valorize their contributions in the household. They are the embodiment of *barakat* – a valued term suggesting bountifulness and spiritual and material abundance. Women’s transnational connections with kin suggest social and cultural border crossing with its potential to foster inter-connections, within and beyond the nation state. It may be that the elderly Afghan women – unrecognized and socially invisible – can suggest an alternative base for civic polity. Committed to capturing the local worlds in the context of the global, anthropologists can achieve a two-fold task. Through reflexive listening, they can recognize research participants as producers of context-specific knowledge, and they can foster a dialogue with policy makers and stakeholders. This is what we have attempted to do in a preliminary way.

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