"HOW WILL THIS REFLECT ON THE FAMILY"

LOKEEN KEE KEHAN GAY?

INDO-CANADIAN PARENTS AND ADOLESCENTS:
INTERGENERATIONAL DIFFERENCES AND HEALTH FACTORS

by

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ABSTRACT

In this study, intergenerational conflict or disagreement between Indo-Canadian parents and their daughters was examined. The purpose was to elicit participants' perceptions of conflicts or disagreements as experienced within the context of their culture and as described by themselves, to identify health problems which participants believed to be related to the issues, to identify processes that families use to seek solutions, and to identify implications for nursing, health practice and research.

The questions were addressed through a qualitative ethnographic approach. The study was guided by the writings of Anderson (1985, 1990), Kleinman, (1978) and Leininger (1978,1991) and Kleinman's Explanatory Model Framework of the Socio-Cultural Context of Health (1978).

For data collection, two sources of data were used. In-depth semi-structured interviews with Indo-Canadian parents and with Indo-Canadian adolescents and young women were conducted over a period of ten weeks. Participant observation at three Indo-Canadian youth and parent symposia provided another rich source of data. The researcher actively participated in discussion groups of parents and adolescents and young women at the symposiums. Field notes were written at the symposia and shared with the participants for purposes of validation and in order to assist the group to write a report and recommendations from the symposia. The data from the field notes and the interview transcripts were analyzed through a qualitative process of content analysis as described by Lindlof (1995) and Hammersley & Atkinson, (1992). From this analysis, the participants' explanatory framework was identified. The two main concepts of this framework which explain the perspectives of the participants were Bridging Two Cultures and Lokeen Kee Kehan Gay, "What will the community think?" or "How will this reflect on the family?" Within
these, other themes emerged: family and cultural values, issues from the perspective of daughters and mothers and primarily related to gender issues, living in two cultures, learning and negotiating boundaries, working out conflicts, health problems, and access to help.

The interdependence of Lokeen Kee Kehan Gay and living in two cultures was examined in relation to the function of gender roles in women's lives.

Implications for nursing and health practice, education and research concluded this study.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABSTRACT</td>
<td>ii</td>
</tr>
<tr>
<td>TABLE OF CONTENTS</td>
<td>iv</td>
</tr>
<tr>
<td>LIST OF TABLES</td>
<td>vii</td>
</tr>
<tr>
<td>LIST OF FIGURES</td>
<td>viii</td>
</tr>
<tr>
<td>ACKNOWLEDGEMENTS</td>
<td>ix</td>
</tr>
<tr>
<td>CHAPTER ONE: INTRODUCTION</td>
<td></td>
</tr>
<tr>
<td>Background to the Study</td>
<td>1</td>
</tr>
<tr>
<td>Immigration Statistics</td>
<td>1</td>
</tr>
<tr>
<td>Settlement and Adjustment Issues</td>
<td>2</td>
</tr>
<tr>
<td>Adolescence and Intergenerational Conflict</td>
<td>5</td>
</tr>
<tr>
<td>Conceptualization of the Problem</td>
<td>9</td>
</tr>
<tr>
<td>Perspective of the Parents</td>
<td>9</td>
</tr>
<tr>
<td>Perspective of Professionals and Service Delivery Agencies</td>
<td>12</td>
</tr>
<tr>
<td>Perspective of the Media</td>
<td>12</td>
</tr>
<tr>
<td>Perspective of Indo-Canadian Adolescents</td>
<td>15</td>
</tr>
<tr>
<td>Problem Statement</td>
<td>17</td>
</tr>
<tr>
<td>Purpose of the Study</td>
<td>17</td>
</tr>
<tr>
<td>Research Questions</td>
<td>18</td>
</tr>
<tr>
<td>Theoretical Framework</td>
<td>19</td>
</tr>
<tr>
<td>Definition of Terms</td>
<td>26</td>
</tr>
<tr>
<td>Significance of the Study</td>
<td>27</td>
</tr>
<tr>
<td>Chapter Summary</td>
<td>28</td>
</tr>
<tr>
<td>CHAPTER TWO: REVIEW OF THE LITERATURE</td>
<td></td>
</tr>
<tr>
<td>Intergenerational Conflict and Health</td>
<td>30</td>
</tr>
<tr>
<td>Adolescence</td>
<td>30</td>
</tr>
<tr>
<td>Acculturation</td>
<td>31</td>
</tr>
<tr>
<td>Intergenerational Conflict and Families</td>
<td>33</td>
</tr>
<tr>
<td>History and Background of the Indo-Canadians in British Columbia</td>
<td>38</td>
</tr>
<tr>
<td>Demographics</td>
<td>39</td>
</tr>
<tr>
<td>History</td>
<td>39</td>
</tr>
<tr>
<td>India</td>
<td>41</td>
</tr>
<tr>
<td>Castes</td>
<td>42</td>
</tr>
<tr>
<td>Family Structure, Roles, and Interactions of the Indian Family in British Columbia</td>
<td>44</td>
</tr>
</tbody>
</table>
CHAPTER THREE: METHODOLOGY

Research Design 57
Sample 57
Criteria for Selection of Participants 58
Process For Gaining Entry Into the Community 59
Characteristics of Interviewed Participants and Their Families 60
Characteristics of the Symposium Participants 64
Data Collection 65
Analysis of the Data 67
Assumptions and Limitations 68
Accuracy of the Data 69
Ethical Considerations 71
Chapter Summary 72

CHAPTER FOUR: PRESENTATION OF THE PARTICIPANTS' PERSPECTIVES AND EXPERIENCES

Immigration to Canada 76
Balancing or Bridging Two Cultures 78
Participants' Perspectives on Expectations of Adolescents: Reconciling Family and Cultural Values 81
    Showing Respect 81
    Families: Interfacing Between Two Cultures 86
Living in the Community: What Will People Think? Lokeen Kee Kehan Gay? 89
Daughters and Mothers Define Issues 90
    Gender issues: Parental/Societal Preference for Boys 90
    Gender issues: The Double Standard 95
    Gender issues: Relationships, Friends, Dating 101
    Gender issues: Marriage and dowry 108
Strategies and Approaches to Living With the Issues 112
    Learning Boundaries 112
    Negotiating and Pushing out Boundaries 115
    Negotiating and Working Out Conflicts 122
Access to Help 128
Chapter Summary

CHAPTER FIVE: DISCUSSION OF THE FINDINGS
Balancing or Bridging the Two Cultures 131
Lokeen Kee Kehan Gay? and the Theoretical Framework 136
The Construction of Gender 139
Strategies of Achieving Resolution: Accessing Support 144
Chapter Summary 145

CHAPTER SIX: SUMMARY, CONCLUSIONS AND
RECOMMENDATIONS FOR PROFESSIONAL PRACTICE 147
Conclusions 150
Recommendations For Professional Practice 151
Recommendations for Further Research 154

REFERENCES 155

APPENDICES
Appendix A  Interview Questions 164
Appendix B  Demographic Data 167
Appendix C  Letter of Explanation 168
Appendix D  Consent to Study 170
Appendix E  Volunteers Wanted to Participate in a Study 172
Appendix F  Certificate of Approval 173
LIST OF TABLES

TABLE 1  SOCIO-DEMOGRAPHIC CHARACTERISTICS OF INTERVIEWED PARTICIPANTS  63
LIST OF FIGURES

FIGURE 1  EXPLANATORY MODEL FRAMEWORK: THE SOCIO-CULTURAL CONTEXT OF HEALTH  24

FIGURE 2  THE SOCIO-CULTURAL CONTEXT OF HEALTH: COMPONENTS OF A HEALTH CARE ENCOUNTER  25

FIGURE 3  PARTICIPANTS' DECISION MAKING MODEL  132

FIGURE 4  BALANCING /BRIDGING TWO CULTURES  133
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CHAPTER ONE: INTRODUCTION

Background to the Study

Immigration Statistics

The ethnocultural composition of Canada's population is changing. Since the revision of immigration regulations in 1968, the numbers of persons arriving in Canada from non-western countries have increased significantly. As immigration from countries such as Europe, the United Kingdom and Australia have declined, we are seeing a significant shift in the ethnic composition of new immigrant arrivals to more people from areas such as Asia, the Caribbean and Latin America.

Of these, immigrants coming from Asia have shown the highest increases, "moving from 13 percent of the total inflow in 1968 to 45 percent in 1987" (Halli, Trovato, & Driedger, 1990, p.148). The Asian stream includes those from East Asia (Hong Kong, China), South-East Asia (Vietnam, the Philippines), and South Asia (India, Pakistan). (Halli, Trovato, & Driedger, 1990). This trend continues to be evident. In British Columbia (B.C.), of the 95,000 immigrants arriving between 1988 and 1991, 71.5% were born in Asia (B.C. Ministry of Health and Ministry Responsible for Seniors, Jan. 1995) and according to the 1991 Census, 12,790 persons immigrated from India to Canada. This constitutes 5.6 percent of total immigration to Canada and makes India the fourth largest source in supplying immigrants to Canada (Statistics Canada cited in The Globe & Mail, June 20, 1992). In 1992, India was the 3rd main source of new immigrants to British Columbia (British Columbia Statistics, 1993).
Settlement and Adjustment Issues

The process of immigrating requires newcomers to make a transition to a new cultural environment, to adjust to different customs and values, standards of living, family lifestyle, working wives, altered parent/child relationships, and variations to courtship patterns. This is often difficult, especially if the immigrant comes from a significantly different culture, such as that of Asia or South Asia. Issues related to health regarding these transitions and differences have been well documented (Anderson, 1986; Carpio, 1981; Koehn, 1993; Lea, 1994; Leininger, 1994; Lipson & Meleis, 1985; Masi, Mensah, & Mcleod, 1993; Stephenson, 1990; as well as the need to provide culturally relevant and culturally sensitive care (Carpio & Majumdar, 1991; Leininger, 1978, 1991, 1994 and M. Leininger, personal communication, June 28, 1994; Lynam, 1992; and Spector, 1991). A number of studies and writers have documented the process of resettlement (Baker, Arseneault, & Gallant, 1994; Dillman, Pablo & Wilson, 1993; Falke, 1993; Nicassio, 1985; Sorin, 1984; Stevens, 1993).

For many recent immigrants, the process of resettlement is compounded by a need to learn a new language and find a job, as well as changes and reversals of traditional roles and status. Many persons report facing conflicts between their traditional cultural ways and the new Canadian ways; this is particularly true for those raising families and for those with adolescents (Baptiste, 1990; Burke, 1982; Carpio, 1981; Ghuman, 1991; Hanassab & Tidwell, 1989; James, 1974; McLaren, 1991; Muecke & Sassi, 1992; Rick & Forward, 1992; Rosenthal & Hrynevich, 1984; Rosenthal, 1984). "The potential for increased family conflict among immigrant parents and their children has often been suggested [Rakoff, 1981; Barudi, 1979-1987; Freire, 1985, 1989a, b, d, e, 1991]", in Freire, 1993, p.84). Members of
an immigrant family may adapt and acculturate at significantly different rates, depending on their exposure to the mainstream culture and their willingness to adapt to the culture.

The people within some ethno-cultural communities have concerns which differ from that of the dominant population. The role of adolescents and children in Western society differs greatly from that in Asian and South Asian countries. These immigrant adolescents and often the second-generation adolescents must "accommodate to the social expectations of both their culture of origin and their culture of relocation" (Chin-Yau & Fu, 1990, p.429). Thus, they may grow up in two distinct cultural contexts, that of the home and the other of the school and "Canadian" or mainstream lifestyle. The home represents their home culture, values, beliefs and attitude orientation, whereas the school and community embody the values and norms of Euro-Canadian society (Ghuman, 1991). Family structure may often include an extended or joint family where the well-being and needs of the family come before that of the individual. Child rearing practices, values, attitudes, and behaviors may differ widely. In some cultures, gender relations differ from the dominant Euro-centric perspectives in Canadian society. The hierarchy of the family may reflect age, role, and gender, but not necessarily equality. Male superiority, that is, as authority figure and decision maker, may dictate that the wife is to be obedient; her place is in the home and she is expected to fit into the husband's family. The expectations for and the role of female members of the family are usually significantly different than for the males. Traditional values often include respect for elders, obedience to one's parents, and religion.

In British Columbia, members of the Indo-Canadian community have identified some of the values and practices inherent in their community. The Indo-Canadian community has
also formally identified that maintenance of their unique cultural identity and distinctiveness, heritage and family values is an important concern (Koehn, 1993; Kurian, 1986; Stephenson, 1990).\(^1\) Values such as consideration of the needs of the family before individual needs contrast significantly with the reality of Euro-Canadian Western environments where often, for instance, "the individual constitutes the most important unit, and self sufficiency, personal autonomy and independence are highly valued" (Lau, 1984, p. 101).

Li (1990, p.11) in his discussion of race and ethnicity supports Yancey, Erickson, and Juliani's (1976) argument "that the development of ethnicity is more closely related to structural conditions in the cities to which ethnic groups immigrate and the economic opportunities available to them there than to the primordial culture. Ethnicity - and, for that matter, culture - is not fixed, but constantly changing under different external conditions." In view of this, any description of an ethnic group and its values, beliefs and customs, or its issues and concerns, must keep in mind that there are vast differences in ethnic communities, even those which originate from the same country; that what is being described as particular to a group may change and may have changed many times already. Stereotyping or essentializing those who are members of the group can be avoided if this principle is adhered to.

\(^1\)As noted by Koehn, 1993, the terms "Indian" and "Indo-Canadian" will be used interchangeably in this thesis to refer to persons whose origin is India. "The latter term is most often applied to second-generation Indians, although many first-generation immigrants identify with a Canadian as well as an Indian identity. Throughout North America, the prefix "East" is commonly appended to Indian so as to distinguish individuals of origin in India and the Native peoples of the New World. Nonetheless, the term originates in the British East India Company, figurehead of the colonial legacy in the subcontinent (Jiwani, 1992). I prefer not to perpetuate this association" (Koehn, 1993, p.1).
Adolescence and Intergenerational Conflict

In Western culture, adolescence can be a trying and stressful time for families. In fact, it can be as difficult a time for parents as it is for the adolescent. "The 'era of the adolescent' as Joseph Kett described our current preoccupation with youth, began in the first two decades of the 20th century. Expectations for adolescents were redefined . . . as a transitional period between childhood and adulthood" (Hopkins, 1983, p.3). Hall's (1904) model of adolescence, "Sturm und Drang" described the normal adolescent as tempest-tossed, torn by unmanageable passions, impulsive, rebellious, and given to florid swings of mood. His relations with parents and the adult world in general were seen as antagonistic and conflict-ridden - a pattern later to be designated as the 'generation gap'. As Friedenberg later put it, 'adolescence is conflict - protracted conflict - between the individual and society' {1959:32} (in Esman, 1990, p. 22).

Later, Anna Freud contended that adolescence is a "developmental disturbance....frequently impossible to distinguish aspects of normal adolescent behaviour from severe psychopathology of the neurotic, borderline, or even psychotic type" (Esman, 1990, p.23). Erickson (1968), on the other hand, saw development as a lifelong process under the influences of heredity, society, and culture, and adolescence as a time when adolescents establish autonomy from parents through a natural process of conflict and psychological separation. Popular literature on adolescence and youth, particularly in the 1960s and 1970s focused on the concept of a "generation gap....an ostensibly unbridgeable chasm between the values, attitudes, tastes, interests, styles, and behaviour of young persons and those of their parents, between the rising generation and those already in authority or decline." Esman goes on to cite more recent work by Oldham (1978), who proposed that normal adolescent
turmoil is a 'myth' (Esman, 1990, p.24) and Hill and Monks (1989) who argue against the existence of a true "generation gap"...the so-called generation gap is much exaggerated" (in Esman, 1990, p.24) and that "most adolescents conform rather quietly to the expectations of their elders." (in Esman, 1990, p.24).

Over the last century, since adolescent psychology developed as a branch of psychology, intergenerational conflict has been a focus in the study of relationships between adolescents and their parents (Davis, 1940; Erickson, 1969; Esman, 1990; Hall, 1904). Others have examined intergenerational conflict and differences in relation to immigrants (Rakoff, 1981; Rosenthal & Hrynevich, 1984; Rosenthal, 1984; Skiri, Annabi & Allani, 1982) and the South Asian culture (Agnihotri, 1987; Anwar, 1976; Ghuman, 1991; McLaren, 1991; Rahim & Mukherjee, 1984; Siddique, 1977; Skiri, Annabi & Allani, 1982; Stopes-Roe & Cochrane, 1989; Wakil, Siddique, & Wakil, 1981).

Intergenerational misunderstandings may be predicted for most families, as young people, during these times of rapid social and economic change, attempt to establish themselves as adults in circumstances often much different than those which their parents experienced (Cropley, 1983). While in Western or Euro-Canadian families, some differences are expected between the generations, this may not be the case in families originating from some countries. In the "traditional" type of family which is usually still found, for instance, to be a characteristic of the Indian sub-continent (Stopes-Roe & Cochrane, 1989), conflict between the generations is not seen as an integral part of growing up. Families that are in principle hierarchical, expect adolescents to give obedience and respect to those above them in the hierarchy, "since the family is the primary support system, they may expect to give
support to family members...and since it is the essential economic and social unit...to consider its welfare above their own" (Stopes-Roe & Cochrane, 1989, p.143). In the South Asian culture, concerns and conflicts are worked out within the extended or joint family and adolescents are encouraged to meet family obligations to look after parents and help guide younger siblings, to show respect for elders, to live at home until marriage, and to place their obligations to the family before that of friends and peers. Families living in Canada tend to continue to value these ideals, and the lives of Canada-born adolescents are often regulated by parents brought up in and still in touch with the traditional life style (Singh, 1995b).

Parents have historically raised their children in the same way their parents raised them. In today's society, with rapidly changing societal values and norms, this is no longer always a desirable model for parenting. For immigrant parents already dealing with the stresses of immigration and long term settlement in a new country, parenting an adolescent can be a daunting experience. "Immigration puts significant pressure on families" (McLaren, 1991, p.2). The family support system and often, village support system, which was available in the homeland is often not available in the new country. When families are new to a culture, the stresses of adaptation are many. There are changes related to roles and status, stresses on parents and on their children can be severe even in the most ideal of circumstances. Thus, adolescence can be particularly challenging for both parents and their children. The "generation gap" phenomenon takes on special meaning for immigrant adolescents and the Canada-born whose parents are immigrants. As noted earlier, the children often feel caught between the culture at home and the culture at school, in the neighbourhood and at work. The gap can be seen as widening when family and cultural traditions are seen to be markedly
different from those of the new community (Anwar, 1975; Rosenthal, 1985). Aronowitz (1984) suggests that for adolescents who experience problems or crises related to the domains of self-concept, identity conflicts and conflicts with parents, the experience of migration and culture change may exacerbate these" (Aronowitz, 1984, p.245). Aronowitz (1984) goes on to report that immigrant adolescents who feel impelled to make a choice between the values and identities of their old and new cultures often experience role conflict, stress and conflict with their parents. It can be argued that those Canada-born children of immigrants whose families maintain traditional family structure and cultural customs may also feel these conflicts; they often have to develop dual coping mechanisms, one for the culture at home and one for the culture of the outside world. They may be pushing their parents to assimilate more, or they may feel that societal pressures are such that their parents should assimilate more. McLaren (1991) notes:

Intergenerational conflict may be increased by the pressure to assimilate imposed upon the members of minority ethnic groups. This pressure may be countered by discriminatory behaviour in the host population which may deny the possibility of assimilation, particularly to members of visible minority groups. Intergenerational conflict may be exacerbated among members of visible minority groups because of the stress imposed upon families by the pressures of assimilation, racism and discrimination (p.3).

Intergenerational conflicts and differences are also likely to be affected by the preimmigration background of the family, as well as the level of acculturation, adjustment, adaptation or assimilation of family members to the new culture.

The changing nature of the Canadian community has required health professionals to re-examine the traditional approaches to care delivery, and to expand their knowledge of clients
and the health issues they face. Increasingly, health professionals are being called upon to re-examine traditional Western biomedical approaches to care delivery. The process of "adjustment" I argue must be a reciprocal one between professionals and clients.

**Conceptualization of the Problem**

As a community health nurse practicing in a community with an increasing number of Indo-Canadian families, I became aware of the need to examine health issues in families with adolescents. Concern had been expressed not only in the Indo-Canadian community and in the service delivery communities, but also in the media, regarding the level of intergenerational conflict or disagreement experienced by adolescents and their families, particularly among Indo-Canadian girls and young women, and some of the resultant health issues. This study extends our knowledge and understanding of some health issues faced by Indo-Canadian adolescent girls and young women and by parents and it clarifies how Indo-Canadian youth and parents of adolescents experience and manage differences while living in a variety of levels of traditional family life.

**Perspective of the Parents**

In one western city, while there is one culturally adapted parenting program for parents of children five years of age and under, all resources for families with adolescents have been developed from Euro-Canadian or Western views of the child, adolescent, and family. A recurring request from immigrant parents of Asian and Latino communities to a Multicultural Health Committee has been for the development of a program which would help them to cope with parenting older children and adolescents. Many parents describe themselves as caught in a dilemma between their desire to continue parenting in their traditional ways and
the fact that their children want to identify with and adopt Euro-Canadian values and practices. In addition to this, they are often not informed of any other way of parenting other than the way they were raised (Key informant A: Coordinator, Settlement Agency A; Key informant B, Settlement Agency A; personal communications, April 16, 1991). Difficulties include such concerns as fear of a lack of valuing of their cultural values and expectations and health concerns such as sexuality, pregnancy, depression, attempted suicides, suicide, and family violence. Parents are afraid that if they allow their children freedom similar to that of western teenagers, their community will judge them negatively and gossip about them, "What will the Community think?" (Indo-Canadian adolescent girls focus group, November, 1994).

One parent shared the story with me of an issue that arose out of her son's decision to cut his hair at the age of seventeen. The family is of the Sikh religion in which uncut hair is one of the hallmarks of a baptized Sikh and which symbolizes strength of faith and an outward sign of the life they are aspiring to live. The family had often discussed the issue around cutting of the hair although no decision had been reached. One day, the son arrived home with his hair cut. The father was very upset with the son's decision. He did not punish the son, but chose not to eat for five days. It was this story which cued me to the fact that while I was considering that adolescents had health issues related to conflict, the parents might also experience repercussions to their health in some way related to the conflict.

Dr. Kulbir Singh is a physician specializing in psychiatry. He works at Vancouver Hospital and Health Sciences Centre Mental Health Services and is also in private practice.

2 In order to provide confidentiality to key informants and agencies, I have identified them as Key Informant A, B and Agency A, B, and so on.
Singh (1995a, p.56) commented about adolescence and in response to a query as to whether his kids were suffering from the "Oreo Syndrome". He answered, "Not my child" while not being sure what this bizarre syndrome was. Subsequently, he learned that many children of immigrants, especially first generation visible minorities, experience the syndrome. He was informed, "they are brown on the outside and white on the inside." Children, he suggests are at risk of developing "Oreo Syndrome" when they try to bridge the gap between two cultures and develop dual personalities in order to cope at home and in the outside world.

Variations of the same theme are the" banana syndrome" for Orientals and the "apple syndrome" for native children. As someone who spent my formative years in one culture, I am sometimes overwhelmed when I consider the tremendous pressures that children growing up in two cultures have to bear. One culture in the home and another in the outside world. How does one determine how much angst in a young person's life is a result of the usual turmoil of adolescence and how much can be attributed to the ubiquitous Oreo syndrome?

Let's explore this conundrum through two cases. Jaswant, a hard-working entrepreneur who runs a multi-million-dollar business decides to take a half day off after sixteen years of unrelenting work. Driving home to surprise his wife a little after one o'clock, he nearly has a stroke when he sees his teenage son - wearing instead of his preppy school uniform and a turban, a hooded tartan shirt, baggy pants, and long hair in a neat ponytail - hanging out with a couple of unfamiliar kids. To Jaswant, a devout Sikh, the sight is devastating.

A few thousand miles away, a similar scenario is unfolding. Kiran, an obedient 15-year old, is sent off to school by her mother. Kiran is carrying an unusually full gym bag. She is dressed in traditional Punjabi clothes. On the school bus, Kiran's braid is quickly transformed into a fashionable hairdo and makeup is speedily applied. After a quick stop in the washroom, a rather fetching Kiran emerges in a short skirt and elegant blouse. When Kiran's mother makes an unheard of visit to the school, mother and daughter are left speechless. One of these incidents took place in India and the other in Canada.

Is the behaviour of Jaswant's son and of Kiran an indication of the Oreo syndrome, or just a normal part of adolescence? (Singh, 1995a, p.56)
Perspective of Professionals and Service Delivery Agencies

Further discussion with Key informants A and B (Settlement Agency A, April 16, 1992) revealed that important issues include not only those related to values, dating, clothing and curfews, but situations which include childhood sexual abuse. One informant stated that the Indo-Canadian community typically pressures the child and parents to keep silent rather than accuse a prominent community leader or have a family face the shame of other persons in their community finding out about it. Other family situations surfaced during my conversations with a social worker who expressed concerns over the numbers of Indo-Canadian adolescents admitted to hospital with depression or who had attempted suicide (Key informant C; April 24, 1992). Often family violence is identified as a problem.

Health personnel at community health agencies in a large western city (May 4, 1993) have also expressed concern about these issues, and about the increasing involvement of immigrant children with drugs, their association with gangs, and their running away from home which results in an increasing incidence of "street kids." A request was made for the identification of "flags" or indicators which might help in alerting parents, teachers, and health professionals of a child at risk.

Perspective of the Media

In Britain, where there are over a million Asians now living, "the Daily Telegraph" reported the 'traumatic clash' between Asian immigrants and their children:

'"the parents cannot understand why their children wish to give up the culture they have held for centuries, and the children cannot understand why their parents are old-fashioned, illiterate, embarrassing and will not let them have boy and girl friends.' The Asian press often carries articles on the problems of the younger generation of Asians and publishes letters on the subject from
both parents and children. Asian organisations have expressed the concern of
the Asian community about the generation gap and about the needs of young

A documentary aired on the Canadian Broadcasting Corporation's (CBC) program "Fifth
Estate" (March 23, 1993) focused on similar issues that Indo-Canadian adolescents face
living in Canadian society with parents who wish them to maintain strong traditional values
about family life, traditions and behaviour. Indo-Canadian families, for the most part,
consider their responsibility is to get their kids married appropriately, to teach them the
values such as respect for elders, filial piety, and family honour.

During this program, a picture was portrayed of tyranny in the home, especially for girls,
a double standard with restrictions on friends, phone calls, shopping at the mall with friends,
and so on. In Toronto, Indo-Canadian teen dances are held, which are considered by some to
be a safe and supervised milieu for young people to get together, yet as one parent put it
"teenagers who go to dances are pigs". The inference is, that if girls go out, they are
promiscuous. An Indo-Canadian singer, Apache, who sings about caste, arranged marriages,
and other Indo-Canadian social issues, told about receiving death threats from parents.

The Indo-Canadian girls interviewed by CBC described the pressures they experienced;
if they did not conform to their parent's wishes, their parents reacted violently with emotional
and physical abuse, beatings, surveillance at all times, and/or the threat of being sent to India
to an arranged marriage. They said they were afraid to talk to anyone about the violence and
abuse; some felt they could not even talk on the phone about such issues as grades. They
cited a lack of communication between parents and their children.
The girls interviewed for the documentary (faces and voices were disguised for fear of parental retribution) stated that in spite of the problems, they wouldn't leave their families because they would be ostracized by their family and community. One social worker interviewed in the program noted that women and girls would not report the fathers for abuse. She stated that the community would support the father in almost any circumstances. Finally, she noted that there are approximately 30,000 South Asian adolescents in the southern Ontario and Toronto area, with no South Asian social workers. She concluded with the statement that in Britain, dozens of South Asian girls were committing suicide.

In a recent article in *The Province* newspaper, it was noted that there is a severe problem with family violence within Indo-Canadian families and that "most immigrant East Indians are from villages, rather than cities. They're often less educated and more bound by old traditions that support gender inequality" (Love, 1994, B8). This statement gives one to understand that many Indo-Canadian families experience violence and it also seems to be linking the violence to families which have originated in rural India. It implies that the less educated are more bound to old traditions. The reader is cautioned to beware of these sweeping generalizations. In fact, while the first Indian immigrants to Canada were not necessarily well educated, more recent immigrants to Canada are better-educated than their predecessors largely due to changes in India since 1947 in availability of education. Many new immigrants from India now are more focused on upward mobility (Koehn, 1993) and

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3 Changes in India since Independence, such as increased accessibility to education, have facilitated the production of highly trained professionals and skilled technicians generally favoured by immigration laws. Some writers have expressed concern over Canada's role in the "brain drain" from countries such as India (Kreuter and Davis, in Koehn, 1993, p.9).
participation in business or the professions. However, it can be said that in British Columbia, the vast majority of Indian immigrants speak Punjabi as a mother tongue (Statistics Canada, 1992) and originate from the Punjab in India, which is primarily an agricultural area with many villages. In agricultural areas, often, the opportunities for continuing education or learning English are limited. Education must be paid for, and often the schools in the villages do not go beyond a certain level, so that those wishing to continue their education must go to cities where there are institutions of higher learning. Koehn (1993, p.9) notes "paradoxically, the counteraction of assimilative tendencies that had begun to erode the formerly withering Indian communities is also accredited to this influx of newcomers. Customs long out of practice, such as arranged marriages, endogamy, and traditional religious observances have reappeared". Family violence has been suggested, not due to Indian immigrants being both rural and uneducated although this may indeed be a factor in some situations, but as the result of reversal of traditional roles, which may happen if a woman seeks work outside their homes and is more successful than the husband (Rahim & Mukherjee, 1984).

**Perspective of Indo-Canadian Adolescents**

I recently participated in facilitating a focus group of adolescent and post-adolescent Indo-Canadian girls between the ages of sixteen and twenty two. They identified difficulty communicating with parents as a major problem. They stated that it was difficult, if not impossible to make their parents understand them and their need to participate in the usual activities of girls at their various ages. One girl said, "Its no use even talking to them. I know they won't listen...they just yell at me and they don't want to hear what I have to say,
they are so worried about what people will think". Other issues that they raised were those of the double standard for girls - "boys can do anything, but girls aren't allowed any freedom at all". Their brothers and male cousins take on the role of monitoring their activities and effectively act as chaperons in many instances, preventing them from associating with other boys, or getting involved in activities which might be construed as inappropriate.

Several of them agreed that their parents mistook their desire to have non Indo-Canadian friends and activities, or to wear western clothes as rejection of the parents' values. Three main issues were identified by the group: double standards (boys are trusted more and have more freedom than girls, girls are seen as needing protection from the outer world, girls get stricter guidelines than boys), what the community thinks (strong interdependence with each other and with the Indo-Canadian community and pressure to be well-behaved), and trust within the family (parents, fearing others in the community will see their children engaged in activities unacceptable within the cultural norms, may spy on the adolescents). Many of the adolescents we talked to felt that they were lucky to have the best of two worlds, but were unable to convince their parents that they value and respect their ethnic ties.

In private conversations with some of the girls, I heard stories of severe problems related to the conflicts and differences in parental and adolescent's values. One person revealed that her sister had committed suicide because the parents had spied on her many times, and had mistakenly concluded that she was seeing an Anglo-Canadian boy. The parents had confined her sister to her room and had beaten her. Other repercussions followed. She was unable to convince them that she was innocent of the accusations and in despair, had ended her life.
Similar stories are not unusual though usually not forthcoming in group discussion. They are often told to me privately after I discuss conflict or differences with groups.

Problem Statement

Certain images of intergenerational disagreements, conflicts and concerns are portrayed in the literature, the media, and by health professionals. While this study addresses the concerns of the Indo-Canadian group, accounts of similar issues from other ethnic groups are not unlike these stories.

Health professionals do not know enough about the issues and health concerns resulting from differences between Indo-Canadian adolescents and their families. Further, we do not have a clear understanding of how the families relate and resolve their differences, within the family or within the community. As a result, health care may be provided or solutions suggested which are neither relevant nor appropriate for the family or the individual. This may result either in non acceptance of the care or solution, non resolution of the problem or it may mean that families choose not to access health care.

Purpose of the Study

The purposes of this study were:

1. To seek from Indo-Canadian adolescent girls and young women and parents of Indo-Canadian adolescent girls and young women their perception of conflicts or disagreements as experienced within the context of living within their culture in Canada and as described by themselves.

2. To identify health problems which participants perceived to be related to the issues.
3. To identify processes that Indo-Canadian families use to seek solutions to problems or disagreements.

4. To identify implications for nursing, health practice and research.

Research Questions

The questions that guided this study were:

1. What do Indo-Canadian adolescent girls or young women and parents identify as sources of conflict or concern in their relationships?

2. What are the ways in which parent-adolescent conflicts are expressed or manifested within these Indo-Canadian families?

3. What perceptions of health status and behaviors are associated with intergenerational conflict or differences?

4. What resources, formal or informal, do Indo-Canadian families draw upon to resolve or deal with intergenerational conflict or differences?

The questions were addressed through use of a qualitative ethnographic approach. The purpose of the qualitative research paradigm is to discover the features, patterns, attributes, and meanings of the phenomena under study. By using naturalistic modes of human enquiry to observe, document, experience, and learn about people within their cultural frame of reference, "the qualitative researcher seeks to discover essences, meanings, and interpretations about the phenomenon as known and experienced by the informants" (Leininger, 1990, p.41).
Theoretical Framework

In this increasingly diverse society, cultural awareness is imperative in planning care and developing programs that are congruent with the clients' life style and values. We know that culture shapes perceptions, explanations, and experiences of health and illness. These influence help-seeking patterns and responses to treatment (Harwood, 1981; Kleinman, 1978, 1980). Kleinman, Eisenberg, & Good, (1978), suggest that people's "explanatory models" are what give meaning and understanding to the experience of illness, and that there are dissimilarities in explanatory models between health care practitioners and patients due to fundamental differences in underlying value and belief systems.

This study was guided by the perspectives and writings of scholars such as Leininger (1978), Anderson (1985, 1990) and Kleinman (1978) and encompassed issues related to adolescence, acculturation, intergenerational conflict and family. Leininger (1978, 1991) suggests that nurses identify value systems of cultures as the basis for providing relevant care, "individuals from different cultures perceive and classify their health problems in specific ways and have expectations about the way they should be helped" (Leininger, 1978, p.116).

Leininger directs nurses to learn about people of different cultures through ethnographic examination of their values and lifeways. Further, Evaneshko (1985) points out that one of the most successful ways of gaining entry into a field situation is to be as well informed as possible about the community. Acquaintance with the literature allows the researcher to anticipate in a general way, the values and norms of the community and to show community members that the researcher has some knowledge of the community. To that end, the literature review included background cultural information related to the Indo-Canadian
group in British Columbia and the interviews were designed to elicit the cultural norms relevant to the issues as described by the participants themselves. The background information was provided to three key informants in the Indo-Canadian community for review and critique prior to being included in this project. Their feedback was incorporated into the background framework.

Many Indo-Canadians have traditional family values and beliefs and have maintained a strong sense of ethnic identity while adapting in various ways to life in Canada. When addressing their health concerns, the researcher must take care to ensure it is done with the awareness of culture and ethnicity as dynamic and socially constructed concepts within the reality and meaning of their own lives and from their own perspectives. Anderson (1987, p. 7) notes:

Illness is therefore experienced in a complex social, economic, and cultural nexus....To provide adequate care to patients from different ethnocultural groups we have to consider all the factors that influence their responses to illness. We therefore need to use a framework for nursing care that allows us to examine the multiple determinants which shape people's experiences. Such a framework must not only be sensitive to the total experiences of people, but it must also direct health professionals to reflect upon the cultural meanings they bring to the encounter with the clients (Anderson, 1985, p. 235).

We must consider then, that not only illness, but also health, wellness, or "no sickness" will be experienced in the same ways, within the social, economic and cultural nexus of people's experience.

Eisenberg, (1977) and Kleinman (1978) differentiated between illness and disease and stressed "the discrepancy between disease as it is conceptualized by the physician and illness as it is experienced by the patient" (Eisenberg, 1977, p.13). They described illness as the
experience of disease or the perception of disease, how "the sick person, his family, and his social network perceive, label, explain, valuate, and respond to disease" (Kleinman, 1978, p. 87). Disease is defined as the biological or psychological maladaptation and health, illness, and health care-related aspects of societies as cultural systems which need to be understood in relation to each other. Specifically, Kleinman (1978) described them as health care systems that, like other cultural systems, have symbolic systems built out of meanings, values, behavioral norms and so on. "The health care system articulates illness as a cultural idiom, linking beliefs about disease causation, the experience of symptoms, specific patterns of behavior, decisions regarding treatment alternatives, actual therapeutic practices, and evaluations of therapeutic outcomes" (Kleinman, 1978, p. 86). This is also true in relation to health. Health, articulated as "no sickness" or "no disease" is related to beliefs about disease causation, experience of symptoms, specific patterns of behavior, decisions about treatment, therapeutic practices, and evaluations of therapeutic outcomes.

Health care systems consist of three social arenas or sectors within which health and or sickness are experienced and reacted to: the popular, professional, and folk arenas. The arenas or sectors are conceptualized as overlapping but each has its own explanatory models of the meanings of health and illness which are influenced by social and cultural determinants. The explanatory models influence how people perceive, experience, and deal with their health or sickness. The popular arena (where between 70 to 90% of health and sickness is managed), bases its explanatory model on the personal and social experiences of health and sickness. It consists of the family context of health, sickness and care, the social network, and the community. This includes self-help solutions which people might turn to such as
health guidelines in the media, community resources, support systems and groups, health food stores, and books, to name a few. The professional arena consists of "professional scientific ("Western" or "cosmopolitan") medicine and professionalised indigenous healing traditions (e.g. Chinese, Ayurvedic, Yunami, and chiropractic)" (Kleinman, 1978, p. 86). Persons within the professional arena will likely understand and explain, and manage health or sickness focusing on biological and/or psychological, or other formalized health belief system for explanations of the disease. The folk arena consists of nonprofessional healers such as shamans, lay midwives, herbologists, tooth extractors and others.

The explanatory model framework of the sociocultural context of health (Figure 1, developed from Kleinman, 1978) provides direction to elicit the client's perspective of health or sickness as it is experienced, interpreted and ascribed within the context of their specific social reality; as it is constructed within the framework of family values and beliefs. This can assist us to bridge the gaps in understanding between sectors. "Describing the meaning assigned to events within the context of individuals' experiences provides an understanding, first, about what is important in relation to an event, and second, how their ideas influence their behaviours (Lynam, 1985, p.328). Anderson (1987) reminds us not to forget the cultural meanings we ourselves bring to any health encounter (Figure 2).

As Anderson (1990) explains,

Separate clinical realities are constructed within each arena of health care: Clients, professional practitioners and folk practitioners bring different notions to the clinical process. It could also be argued that each profession within the professional domain brings to the client practitioner encounter its own views of health and illness. A relevant feature of this perspective, then, is its recognition of the separate conceptual schemes operating within practitioner-client encounters.
Nurses bring to the situation professional knowledge as well as their sociocultural beliefs and values. Clients bring to the same situation their interpretations of the biomedical model, and beliefs and values derived from their sociocultural backgrounds. There may be, and often are, discrepancies between nurses' and clients' perspectives both in their explanations of disease and illness (p. 137).

In this study, I explored the participants' explanatory model of social and cultural structures that shape their experiences of being an Indo-Canadian adolescent or young woman, or a parent of one. According to Anderson (1985, p. 238) the social as well as the cultural context should be addressed to take into account that "the social, political and economic processes play a crucial role in determining people's subjective experiences".

The patients' explanatory model, as presented by Kleinman, (1978); Kleinman, Eisenberg, & Good (1978), and Anderson, (1985, 1990) influences the meaning and perception of a problem, the solutions which will be sought, and the arena in which they will be sought. Health and illness experience is "shaped by the total circumstances of a person's life" (Anderson, 1990, p. 711).

In eliciting the explanatory model of the participants' social and cultural reality, I was able to come to some understanding of how some of the essential cultural beliefs and values of this Indo-Canadian group play out in the reality of their lives and under these circumstances, the arena in which help would be sought. The background cultural information provided a framework from which to begin the exploration. The participants themselves guided me through their lived reality.
Figure 1

Explanatory Model Framework:
Sociocultural Context of Health

Three social areas within which health/or sickness is experienced and reacted to.

Figure 2

The Sociocultural Context of Health
Components of a Health Care Encounter

Developed from:
Definition of Terms

1. Culture: the learned, shared, and intergenerationally transmitted values, beliefs norms, and lifeways of a particular group that guides their thinking, decisions, and actions in patterned ways (Leininger, 1967, 1991). Culture is dynamic; it is fluid and changing, and incorporates the reality of the individual and the context in which he or she lives. It is "a system of symbolic meanings that shapes both social reality and personal experience" (Kleinman, 1978, p. 86).

2. Acculturation: the process by which a person gradually accepts and takes on some habits and traits from another, often dominant, culture (Krondl & Lau, 1993, p.187). "Lipson & Meleis (1985) define the term in this way 'Acculturation is often defined in terms of such observable factors as dress, food language, and values'. A person who is acculturated may no longer always wear traditional dress or only eat foods traditionally associated with his or her culture" (Lynam, 1992, p.151) Acculturation will be discussed further in the literature review.

3. Intergenerational conflict: disagreement between adolescents and their families over issues of authority, experience, independence, communication and values. "generational conflicts occur in all societies...{when} elders prevent youth from acting in harmony with their biological and /or social impulses and when youth threatens the social status or material possessions of elders (Mitchell, 1980, p.275 in Baptiste, 190, p.3).

4. Indo-Canadian immigrant families: those families who are of the Sikh faith, and originate in the Punjab region of India. Parents may have immigrated to Canada
while their children were young or their children may have been born in Canada.

5. Adolescence: a stage of transition from dependence on, and primary ties with parents, to forming significant ties with peers. A developmental stage which has been viewed as a stressful and stormy period of life which often results in intense inter-generational conflict (Baptiste, 1990). For this study, Indo-Canadian adolescents and young women aged 16 - 25 years of age were interviewed to elicit their perspectives in relation to the identified issues of concern.

6. Family: for the purposes of this study includes parents, siblings, grandparents, aunts and uncles, and other such members who might be included in a traditional or extended family.

**Significance of the Study**

The study builds on earlier research in the area of intergenerational conflict (McLaren, 1991; Rosenthal & Hrynevich, 1984) and extends our knowledge and understanding of health issues faced by Indo-Canadian adolescents and their families. The study identifies specific problems and health issues, and provides insights into the relationships between some Indo-Canadian adolescents and their families. Qualitative data from a project such as this also assists to identify the context in which conflicts and differences are experienced and managed, whether conflicts and differences exacerbate health problems and implications for nursing and health care. This is important in view of the lack of previous research in this area and of the increasing population of Indo-Canadian families in British Columbia and Canada. Half of Canada's Sikhs live scattered around British Columbia's lower mainland, and about 21,000 of them are highly concentrated in
Surrey, along with another 3,000 in the adjacent town of Delta and approximately 5,000 in the Victoria area. Estimates suggest that the Surrey-Delta Sikh population may have jumped by 25 percent over the past few years (Dolphin, 1994, The Globe and Mail, 1992).

Indo-Canadians are in many ways culturally distinct from the majority of immigrants who have Western European roots; "they are also equally culturally distinct from many other visible minority communities who have recently settled in Canada" (Kurian, 1991, p.1). This is evidenced by cultural values, traditions and lifeways which a great many Indo-Canadian families have chosen to maintain in some form or other. These are discussed in more detail in Chapter Two.

Since nurses provide much of the health care to this group, it is important that the complex factors that influence responses to professional care and health care issues be identified. We must attempt to gain insight into how cultural meanings shape clients' experiences and how relationships between family members play a role in determining the way that Indo-Canadian families experience the effects of intergenerational conflict and seek resolutions to it. It is not enough to know that the conflict occurs. We must examine the meaning that conflict has for families and their health, in order to negotiate and plan health interventions that are culturally appropriate and sensitive to the needs of this population.

Chapter Summary

In this chapter the background to this study has been presented through a review of current immigration statistics and settlement and adjustment issues. Adolescence and intergenerational conflict was examined from the perspective of parents, professionals and service delivery agencies, the media and the Indo-Canadian adolescents themselves. From
this, research questions were developed which would guide the study. The writings of Anderson, 1985; Leininger 1978, 1991; and Kleinman, 1978; provide direction for an explanatory framework which enables the researcher to carry out examination of some of the multiple determinants that shape Indo-Canadian families' experiences. Finally, definitions relevant to the project were provided and the significance of the study for nursing was outlined.
CHAPTER TWO: REVIEW OF THE LITERATURE

A review of the literature was done to determine whether there had been relevant research done in the area of intergenerational conflict and health. In order to become well informed about the community, information was sought about the historical and cultural background of South Asian Sikhs in British Columbia. Since there was a paucity of available literature about the community, sources such as knowledgable key informants from within the Indo-Canadian community were also drawn upon.

The literature review revealed no nursing research related to health care issues and intergenerational conflict in immigrant or refugee groups. The social sciences literature was more revealing, although almost all of the studies done were quantitative in nature. These do not specifically identify health care issues other than to discuss ethnic identity in relation to acculturation, and to discuss intergenerational and role conflict in general. The exceptions were those authors who discuss such issues as post traumatic stress disorder and cultural bereavement, such as the work done by Eisenbruch (1991), which again was not done in relation to adolescents.

Adolescence

Refugee children and adolescents have been recognized as a group at high risk for emotional distress (Naidoo & Ujimoto, 1984) as well as for malnutrition and mortality related to trauma they may have experienced in the process of becoming a refugee (Muecke & Sassi, 1992). The Canadian task Force on Mental Health Issues Affecting Immigrants and Refugees (1986) in a document that reviews pertinent literature, identifies that adolescents and young adults face developmental demands and maturational identity crises at the same
time that they encounter new situational demands and cultural identity crises. Studies have linked migration at the time of adolescence with subsequent alcohol abuse (Morgan, Wingard & Felice, 1984), drug addiction (Amaral Dias et al, 1981), delinquency (Burke, 1984), and depression (Skiri, Annabi, & Allani, 1982). Aronowitz (1984), in his review of the literature, found that little research had been done into the social and emotional adjustment of immigrant children. He does note, however, that the domain of adolescent self-concept, identity conflicts, and conflicts with parents may be major sources of disorder. This writer was unable to locate literature that considered the situations of children born in Canada (or Britain or the United States), and for instance, raised in the same manner as they would have been in the parents' country of origin until school age. I propose that these children can be considered in the same manner as those who immigrated, since they are in an ethnic environment for a number of years, and learn perhaps only their parents' language, then become exposed to the dominant culture through school attendance.

**Acculturation**

Acculturation is defined as "the process of mutual cultural change resulting from contact between cultures, during which each culture influences the other. Typically the dominant culture contributes more to the flow of cultural elements: (Rick & Forward, 1986, p.85). Berry et al (1989) develop the concept as follows:

An immigrant from one culture coming into a second can attempt to stay within his or her original culture or reject it. Similarly he or she may attempt to embrace the host society culture or reject it. Depending on how he or she makes these two sets of choices, his situation in the host society can be
Immigrant and refugee children and adolescents often acculturate more quickly than their parents or adult relatives. Because they learn English quickly, adolescents are often asked to act as family interpreters and spokespersons in interactions with social service, health and other organizations (Ananth, 1976 & 1984; Assanand et al, 1990; Stephenson, 1990). This results in their being caught in a reversal of traditional authority roles (Lin, 1986; Nicassio, 1985). Many experience their lives biculturally, that is, in two distinctive cultural contexts, one of the home, the other of the school. The home represents their traditional cultural values, beliefs, and attitude orientations, whereas the school and social environment embodies the values of the host culture (Ghuman, 1991; Hassanab & Tidwell, 1989). Many cultural groups have a family oriented culture in which strong family ties exist and are valued highly, where the collective family unit needs are more important than the individual's (Assanand et al, 1990; May, 1992) and where men assume a dominant role and women and children a passive one. This is true of many Indo-Canadian immigrant families in British Columbia. Generally the family adapts to changes slowly, rarely discarding old patterns completely and most often modifying them gradually and conservatively over several generations. They come from mostly agricultural regions, are conservative, hard working, and disciplined to the idea that the major decisions of the individual's life ought to be made in accordance with the

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<td>Reject host culture clinging to original culture:</td>
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<td>Reject both cultures:</td>
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aims and good of the group as a whole as defined by the oldest active (generally male) member of the family (Sanghera, 1991).

The Canadian society into which they move is one which is urban, mainstream western culture with emphasis on independence, autonomy, individuality, freedom and democracy, and oriented toward youth.

Early interpretations of the immigrant experience assumed that living in two cultural worlds would result in intense conflict and confusion due to discrepancies between two competing cultural systems (Rosenthal, 1985). Rosenthal (1985) notes that there is abundant anecdotal material relating to a high level of conflict both within the individual and between adolescents and their parents, and certainly, this writer has become familiar with a great deal of it through discussion with community members (Key Informants D and E, Indo-Canadian Community, November, 1994). Ballard and Ballard (1977) noted that "although many young Asians go through a period of rebellion against their parents' values...almost all of them are returning to follow a modified version of Punjabi cultural norms in their late teens and early twenties" (p. 49) and that "as children attempt greater independence, parents often react by becoming increasingly strict and conservative" (p. 50).

**Intergenerational Conflict and Families**

The concept of intergenerational conflict and of adolescence is based on Western sociological theory and for the most part addresses Western issues (James, 1974). Increasingly, researchers are investigating the concept of intergenerational conflict related to immigrant families. For instance, intergenerational differences have been associated with
increased levels of acculturation in adolescents as compared to their parents (Rosenthal, 1985; Rick & Forward, 1992).

Kurian, (1991) researched intergenerational characteristics of Indo-Canadian families using questionnaires based on Berry's (1989) four classifications of acculturation. A sample of 154 Indo-Canadian families (mothers, fathers, sons, and daughters) from across Canada completed 566 questionnaires dealing with acculturation characteristics such as language retention, social attitudes and mores of the parent group and child group, education, parental attitudes and adjustment problems among young adults, and discipline. Scores indicated that a higher proportion of parents (than children) have clung onto imported values and were experiencing difficulties in accepting Canadian values and culture, and that parents have smaller assimilation scores compared to children, indicating the greater reluctance of parents to abandon Indian values compared to children who are mostly brought up in Canada. Males, both fathers and sons, showed higher marginalization scores that females, and higher scores on integration which, together with larger scores on marginalisation was felt to indicate greater dichotomy among males and a greater tendency towards extremes in adjustment. Overall, Kurian (1991) found that males were more successful than females with marginalisation among males being higher than females and a relatively low overall value for assimilation for male and female parents and children. However, differences between groups were small and Kurian (1991) suggests that Indians of all four demographic groups place great importance to maintaining Indian culture in contrast with the popular consensus that while Indo-Canadians consider their culture and value systems distinct from that of the
Western world, they tend to think of their children as more Westernised than they themselves are.

Kurian (1991) in this study, found that children on the whole were better assimilated than their parents. The community had mixed food habits, with Euro-Canadian food for breakfast and lunch, and Indian food for dinner. Language retention results indicated that while they expressed a strong desire to retain and transmit their languages, Indo-Canadians were losing their heritage languages at an alarming rate with most of the young adults having difficulty reading and writing, and often, in speaking and understanding the heritage language. Parents generally felt they had a role in determining the social life of their children. Children did not enthusiastically support this view. All groups were conservative in attitudes towards the acceptance of premarital sex; parents more so than their children. Parents tended to be education and authority focused, less integrated outside the Indo-Canadian community, old-worldish, and less permissive than their children; fathers more so than mothers. Daughters were least education oriented and most resistant to authoritarian attitudes. Parental rejection of mainstream culture, attitudes and values appeared to reduce the frequency of disciplinary and behavioral problems in children. Conversely, children who embrace Indo-Canadian culture, values, and attitudes appeared to have more behavioral problems, possibly because children who see the parents as Indians and identify themselves as Canadians may be susceptible to parental and other pressures and less inclined to react on the basis of own convictions and judgement and as such, Kurian (1991) suggests they may be more vulnerable to temptations in the direction of problem behaviour.
Kurian's (1991) study is the most recent and comprehensive study done to date on attitudes and values of Indo-Canadian families, however, as he points out, its limitations lie within the lack of comparison with mainstream or other ethnic groups. Further, he notes that the respondents all had sufficient English ability to complete the questionnaires, and so one can surmise that results may have been somewhat different if families were included who did not speak the language. The study, quantitative in nature, while indicating differences in attitudes of parents and children related to levels of acculturation, did not deal with the effects of intergenerational conflicts, nor did it provide any insights into extended intergenerational conflicts (with grandparents, older family members) and their effects on families. It should be noted also, that Kurian's sample may not have represented the reality of the primarily Sikh population in British Columbia, who tend to be from a more agricultural based society, with lower levels of education and more insular communities.

Two studies have been done which examine factors related to intergenerational conflict and its effects in ethnic groups. Rosenthal (1984), using a quantitative approach, studied 639 Australian immigrant (Greek and Italian-Australians) and Anglo-Australian adolescents. A questionnaire was designed to elicit dimensions of ethnic identity and to pose the question "Does the immigrant family experience more intergenerational conflict and, if so, are there mitigating factors that influence the level and the experience of this conflict?" (Rosenthal, 1984). Findings indicated that membership in a white minority group was accompanied by increased perception of intergenerational conflict, particularly where the adolescent rejected the culture of the parents in favour of the culture of the adopted country. Adolescents who could be described as bicultural expressed less conflict than their assimilated peers.
Intergenerational conflict was found to be greater for those immigrant adolescents assimilating into mainstream society, particularly where retention of the traditional home culture was important to the parents. Bicultural was defined as where "two cultures are synthesized, with the norms of both, salient and perceived as capable of being integrated" (Rosenthal, 1985, p.1) Assimilation was defined as the rejection of the original culture in favour of the new. Overall, the level of conflict was moderate and the study supports the argument that the prevalence of intergenerational conflict in ethnic or immigrant families may be exaggerated.

McLaren (1991) replicated the Rosenthal (1984) study using a visible and non-visible minority sample of 306 Vancouver British Columbia high school students. All were members of Grade Eleven Social Studies classes in two high schools who were present on the day the questionnaire was administered. There were ten ethnic groups represented: Euro-Canadian, Chinese-Canadian, Indo-Canadian, Native-Canadian, Filipino, Japanese, Vietnamese/Southeast Asian, Fijian, Latin American/Caribbean, and Middle Eastern. Modified versions of Rosenthal's (1984) Conflict With Parents and Ethnic Identification scales were used. Her findings paralleled Rosenthal's (1984) in finding only moderate levels of intergenerational conflict for most adolescents and a moderate amount of conflict between immigrant parents and their adolescent children. This does not support the findings of others (Kern, 1966; Ames & Inglis, 1973; Wakil, Siddique & Wakil, 1981) who attribute increased intergenerational conflict to the immigrant status of the adolescent. In fact, immigrant groups appeared to have rates of conflict similar to those of Euro-Canadians. Immigrant status was not related to increased intergenerational conflict. One interesting finding was that
Indo-Canadian students reported significantly greater conflict with their families and specifically their fathers than did Chinese-Canadian students. Females reported significantly higher conflict with fathers (McLaren, 1991). This supports what have been for the most part anecdotal reports of difficulties experienced by Indo-Canadian adolescents.

The focus of Rosenthal's (1984) and McLaren's (1991) studies was to compare levels of intergenerational conflict between parents and adolescents of ethnic groups. They did not identify possible health issues as a result of, or related to conflict with parents. McLaren's view is that there are issues, including health which might be more fully elicited through a qualitative approach. She indicated that she has not found specific literature that addresses health care issues, yet in talking with many of the students, she came to the conclusion that there were a number of issues, including health which were not brought out in the context of the questionnaires in her study (N. McLaren, personal communication, November, 1993).

**History and Background of the Indo-Canadians in British Columbia**

As noted earlier, one way to gain entrance to a community and anticipate in a general way, the values and norms of a community is for the researcher to be as well informed as possible about the community and its background. Background information is presented here as researched in the literature and validated by Key Informants A, B, and C in the community.

Indo-Canadians are people who have originated in countries of South Asia, primarily from the subcontinent of India. Pakistan and Bangladesh are no longer formally a part of India, but the people from there are generally regarded as Indian. Indo-Canadians are variously referred to as East Indians, Pakistanis, or South Asians. Indo-Canadians immigrating to Canada may also come from countries such as Britain, East Africa, Fiji,
Uganda, the Caribbean and other Commonwealth countries where they may have resided after leaving the Indian subcontinent (Assanand et al, 1990; Buchignani, 1979).

Demographics

According to the 1991 Census, there are 420,295 persons of South Asian origins residing in Canada. These people are Bengalis, Punjabis, Singhalese, Tamils, Bangladeshis, East Indians, Pakistanis, and Sri Lankans. In British Columbia, there are 103,545 persons of South Asian origin. Of the above categories, there are 10 Bengalis, 10,310 Punjabis, 105 Singhalese, 205 Tamils, 60 Bangladeshis, 89,265 East Indians, 2975 Pakistanis, and 615 Sri Lankans. As can be seen, the majority of South Asians in British Columbia are classified as East Indians. The Primary languages spoken within these groups are Gujarati (4595), Hindi (10,115) and Punjabi (58,315) (Statistics Canada, 1992).

The East Indian or Indo-Canadians in British Columbia are primarily adherents of Sikhism, a religious faith originating in India and are known as Sikhs. This cultural description will be of the Sikh group which is the group from which the research sample was taken. No accurate figures are available for the number of Sikhs residing in British Columbia, since they are not represented in the census as a separate category. Although the proportion of non-Sikhs has increased considerably since the late 1960's, Indo-Canadians in British Columbia are primarily Sikh (Key informant B, personal communication; Ames & Inglis, 1976; Assanand et al, 1990).

History

The earliest East Indian immigrants to Canada arrived in the year 1899. Some landed in Victoria and others in Vancouver, B.C. By 1904, the census record listed 258 East Indians in
British Columbia. Nearly all the early East Indian immigrants were Sikhs from the Indian state of Punjab, (although at the time, the dominant society referred to them as Hindus), and were retired soldiers of the British Indian army. Their interest in Canada stemmed from contact with Canadian troops at Queen Victoria's Diamond Jubilee (1897) and from having travelled through Canada on their way home from postings in the Far East. The early immigrants did well and sent home favourable reports to their families and friends in India. At the same time, the Canadian Pacific Railway Steamship Company was promoting emigration to Canada. These factors resulted in a sudden increase in the number of immigrants arriving in British Columbia in 1906. "Most found work in the forest industry, particularly in the sawmills of Victoria, Vancouver, and New Westminster" (Assanand et al, 1990, p.142).

The reaction to these new immigrants in British Columbia was hostile, with the press and politicians denouncing the East Indian immigrant as a burden, destructive to the British way of life and as breeders of disease. Labour groups accused them of usurping the interests of the working class. In 1910, new immigrant laws effectively stopped most immigration of East Indians by demanding that every Asian immigrant be in possession of two hundred dollars upon landing in Canada and by the requirement that the trip from the country of origin had to be one of a continuous voyage with no stops at other ports en route. This was virtually impossible for someone travelling from India. In addition to this, women and children were not allowed to emigrate. These measures effectively prevented most Indians from emigrating (Koehn, 1993). By 1942, there were only about six thousand South Asians in Canada (Assanand et al, 1990).
In 1947, immigration laws were liberalized, and South Asian immigration began to increase. "Until 1961, the majority of South Asian immigrants were Sikhs from rural areas in northern India who found employment as unskilled workers....changes in immigration laws in 1961 resulted in people coming from all parts of India and from Pakistan, mostly highly educated technicians and professionals who have migrated to pursue economic and educational opportunities that are perceived to be better than those of the home countries" (Assanand et al, 1990, p.142).

The Sikhs from northern India, particularly the Punjub, represent the largest group of migrants from India. Most have come to Canada through sponsorship by relatives who are already settled in the country. Many were farmers or landowners with relatively little formal education or English...they work in lumber mills, the construction industry, and as janitors, farm workers, and taxi drivers. Many have started their own businesses. The majority of women work outside the home as unskilled farm workers, janitors, and factory workers, and in restaurant kitchens and canneries. Educated urban Sikhs are employed in a variety of professions and technical positions. The largest Sikh population is in B.C.'s Lower Mainland and in Victoria, Duncan, and Nanaimo (Assanand et al, 1990, p.144).

Sikhs, whether coming to Canada via other countries or directly from India, have their origins in the subcontinent of India, a large and diverse country. Their beliefs, values and customs, while varying with experiences, originate from India.

India

The Indus Valley civilization dates back over five thousand years. The golden age of science, literature and the arts occurred during the fourth to sixth centuries. Arab, Turk, and Afghan Muslims ruled successively from the eighth to eighteenth centuries. Portuguese, French and Dutch traders had an influence, but the British gained political control in 1757 and remained in control until India gained independence in 1947. The peninsula was divided
into an independent Sewlar India and Islamic Pakistan in 1947. In 1957, India became a parliamentary republic in the British Commonwealth.

India is the seventh largest country in the world. It is a land of villages with seventy percent of the population of India living in villages. There are eighteen recognized languages, hundreds of dialects and wide social diversity. The population is now 790 million (Assanand et al, 1990), the second largest in the world, with three quarters of the population farmers. About 83 percent of the population is Hindu, 11 percent Muslim, and the balance are Christians, Sikhs, Buddhists, and Jains.

The Punjab was the last major part of the Indian subcontinent to fall under British domination. It was annexed in 1848 - 49. Subsequently, Sikhs of the Punjab became the mainstay of the British Indian army and later served during World Wars I and II. It was from these people that early South Asian immigration to Canada was drawn.

The Punjab is mainly a rural and agricultural area. "About fifty-five percent of the total population of Punjab are Sikhs" (Year Book of India, 1988 cited in Sanghera, 1991, p.7). Seventy-five percent of its population of villages is engaged in agricultural or allied occupations. Five percent is in teaching, clerical or other service occupations. "Approximately eighty percent of the village population of the Punjab are Sikhs and about twenty percent are Hindus, Muslims, and so-called low castes" (Sanghera, 1991, p.7).

CASTES

"Castes are inter-dependent social phenomena and the social relationships of any caste inter-penetrate the social matrix of the caste system; and the caste system constitutes a type of society" (Cox, 1948, cited in Sanghera, p.7). It is a hierarchal social structure in which
each caste is irrevocable. A person is born into a specific caste. There are also socio-economic classes within castes. Each caste has its social rules and restrictions, including a taboo against marrying out of one's caste and rules about food preparation. The caste system is still a very strong influence in India in spite of the formal elimination of caste by the Indian government (Sanghera, 1991).

The caste system is a concept from the Hindu religion. Sikh theology, which combines Hindu and Moslem elements, does not include the caste system, and most descriptions of Sikhs will mention that the caste system is no longer a component (Pettigrew, 1975; Assanand et al, 1990), and that non-discrimination and equality is the firm principle underlying all social practices. However, there is disagreement about this. Sanghera (1991) and Key Informant B (personal communication, April, 1996) confirm that in practice there are castes among the Sikhs living in India and those living in the United Kingdom, United States of America, and Canada. Caste is completely observed in arranging marriages among the Punjabis (including Sikhs) in India and Canada. Endogamy (marriage within caste) and exogamy (marriage outside blood relations) are intact. Inter-caste marriage is disapproved of. The elderly parents and grandparents will not accept it. This is beginning to cause some problems for the Sikhs in Canada, as second generation children start to demand the right to choose their marriage partners and occasionally to marry non Sikhs (Sanghera, 1991).

"Most of the B.C. Sikhs (knowledgable informants estimate ninety percent) are Jats, traditionally a landowning, cultivator caste (Ames & Inglis, 1976, p.79). Some are Rajput Sikhs, also a landowning caste and a few are members of various other castes. The Jats
consider themselves to be the highest in the hierarchy of castes although other groups such as the Rajputs dispute this claim.

Family Structure, Roles, and Interactions of the Indian Family in British Columbia

"The most important element in the Sikh community anywhere in the world is the family. The individual man, woman, or child sees himself, and is seen by others, firstly as a part of a family....of course ...it is the extended family, the main social unit of the Punjab" (James, 1974, p.15). The family system is usually a joint system with three of four generations living together in one household. Division occurs in the joint household when brothers are married and they intend to establish their own households. Parents and grandparents can live with any son, but it is considered shameful to have to depend on a daughter and her husband (this is changing in some respects, since many daughters sponsor their parents to come to Canada, and the parents then live with those daughters). Further, the family structure is changing, especially in those families who have immigrated to the West. Lack of property and adequately sized houses contribute to the smaller family structure. However, the extended family or social network still serves to provide ongoing support and to bridge the gap between the traditional culture and the conventions of the new country. The family provides the individual with social, psychological and economic stability.

In India, the hereditary property remains in the father's name as long as he is alive. At the death of the father, equal distribution of land takes place between the brothers (Sanghera, 1991).

The eldest most financially secure male is usually the head of the household. He will usually manage the family finances, although occasionally the grandmother may be made
responsible for household finances. He will make most decisions but will consult with close relatives. He is responsible for caring for aging parents and generally for the well-being of the whole family.

Women are:

in charge of nurturing and performing household duties. Her most important role is to look after her family and her training is totally geared towards her role in the home...in the traditional culture a woman is seen as her husband's possession and she is taught to be submissive and to obey him...nevertheless, women and girls have high social and religious status...they are considered to bear the honour of the family and traditional society is very protective of them (Assanand et al, 1990, p.151).

The family "izzat" or honour lies heavily with the purity of the daughter before marriage. Although this ideal is a traditional one, it is still strongly endorsed by the Canadian Indian communities (Key informant C, personal communication, April 23, 1996).

The grandmother is usually the most influential female member of the family and the grandfather the most respected member. He usually settles family disputes. The mother is traditionally protected and passive, often stays out of the conversation and may not attend all social functions. She covers her head in sacred places. Uncles and aunts are always respected and in a combined family they exercise the same authority as parents. Children are cared for by everyone and are rarely left alone. They are expected to care for younger siblings and to respect elders (Key informant D, personal communication, May 4, 1996).

Ames and Inglis (1976) have identified three family patterns for B.C. Sikhs: traditional Punjabi (as described above), contemporary Canadian, and immediate Punjabi (an adaptive strategy). The traditional pattern is "a patrilineal, patrilocal, 'paternalistic-maternalistic' extended or joint family ideal" (p.81-82). This is not practical for most, but it is regarded as
the ideal and is how family life was supposed to be organized in the Punjab. Canadian family pattern, how they believe whites live in Canada, is regarded somewhat negatively (and it should be noted, is judged in terms of their own traditional ideas rather than in terms of Canadian values). Youthful rebellion, sexual exploitation, the tragedy of old age (placement of elders in long term care facilities, lack of respect for the elders) and the frailty of marriage are cited in Sikh evaluations of the culture; and disruptions of family life of British Columbia Sikhs are generally blamed on corruption of a family member by Canadian patterns. The immediate Punjabi pattern takes the traditional and Canadian patterns as the reference points within the bounds of which working models, or compromises, are created. Ames and Inglis (1976) describe the resulting pattern as being more oriented toward the traditional rather than the Canadian pattern, and suggest that the traditional and Canadian patterns represent positive and negative reference points for the immediate situation Sikhs find themselves in.

However, the joint family is no longer necessary because wealth is not concentrated on land, although considerable cooperation between family members persists. For British Columbia Sikhs, "family" can refer to all of the relatives on both sides of the family, to the joint family (which generally consists of elderly parents, their unmarried daughters, and all sons and their wives and children), or the household group in B.C. (often comprised of a nuclear family plus several other kinsmen). Very few families continue the practice of confining inheritance to sons and some actually make wills. The movement in orientation from extended to nuclear family results in the loss of some emotional support, particularly from the grandparents (Koehn, 1993).
In addition to the family changes which occur due to immigration, there are at least two types of role changes. The first involves gender. Women often gain a greater degree of independence or become more economically significant to the household as compared to the situation at home in India. Husbands may react negatively or violently to the perceived undermining of their authority and of the traditional system that supports gender inequality (while espousing the Sikh religion's ideal of equality for all). Further, while for the most part, women and men agree on the ideals of male-female behaviour, "Indian women, especially those born in Canada, are finding it increasingly difficult to accept their circumstances, and we would expect that eventually the ideals regarding respect for, and responsibility to, husbands and fathers will be a focus for change" (Ames & Inglis, 1976, p.83). Role inversions between generations constitutes the second type. Elders have to rely on their adult children, and in some cases, parents rely on small children or adolescents whose greater cultural assimilation (and ability to speak English) places them in an advantageous position within the new culture. This places the children in the awkward position of being both indispensable and at the same time threatening to their parents (Koehn, 1993; Key Informant C, personal communication, January 22, 1995). "Sikhs frequently argue that young people today, especially the Canada-born, are rebellious. Youth themselves indicate that they find it increasingly difficult to live up to the traditional family ideals....age-based roles appear especially vulnerable to conflicting interpretations" (Ames & Inglis, 1976, p.83). "The ideal of showing obedience and respect to elders is still maintained by both the Canada-born and the India-born youth, although the former are finding it increasingly difficult to conform to the dictates of parents whom they may regard as "backward or 'repressive'. On the one hand,
the Canada-born youth believe they should govern their own lives; on the other hand, they regret the loss of parental favour that this independent "rebelliousness' frequently entails", (Ames & Inglis, 1976, p. 87).

Religion

The Sikh religion developed in the sixteenth century from the teachings of the Guru Nanak who attempted to blend the monotheism of Islam with the mystic and gentle tenets of Hinduism. He rejected the caste system, elaborate ritual, and extreme expressions of religious devotion. By the eighteenth century, the Sikhs had become a strong community opposed to their Muslim rulers.

Hallmarks of Sikhism are tolerance of other religions, belief in equality of the sexes, emphasis of self-discipline, inner-worldly activism, communal responsibility, and its visibility. These rest on the five K's that baptized Sikhs must always wear as a test of their strength of faith and an outward sign of the life they are aspiring to live. Besides the KIRPAN, the sword to defend the faith, they wear the KARRA, an iron bracelet symbolizing God's unending love; KACHNA, knee length underwear that is "your reminder that you are to give yourself only to your wife or husband" Zwarun, 1989, p. 3), KESH, uncut body hair that is a mark of dedication, group consciousness and acceptance of God's will, along with the wearing by men of the turban; and KANGHA, a wooden hair comb that symbolizes cleanliness. In addition, baptized Sikhs all have two names -- a male's given name is followed by SINGH, which means lion, a female's by KAUR, meaning princess (Zwarun, 1989).
It is taboo for Sikhs to drink alcohol or use tobacco (although many men do). They cremate the dead and believe in the afterlife of the soul. Baptized Sikh men wear a turban. Some baptized Sikh women also wear turbans, but this is not as commonly seen.

Sikh positions on social issues are generally, marriage: one woman for life; no divorce allowed; arranged marriages preferred. Sex: no premarital sex or adultery. Homosexuality: abhorrent. Abortion: forbidden (Dolphin, 1994,).

The Sikh temple (gurdwara) is considered not only a religious place, but also a place for ceremony and social activities. The community social life revolves around the temple. "B.C. Sikhs have organized their political struggles and social and religious life through their temples". (Ames & Inglis, 1973, p.80). The Khalsa Diwan Society (a prominent socio-political religious organization) in Vancouver manages about six temples: one each in Vancouver, New Westminster, Abbotsford, Mesachi Lake, Paldi, and Port Alberni. Three temples are managed by the Alkali Singh Society. A tenth Sikh temple in Victoria is autonomous, owning its own property and managing its own affairs.

In 1959, the Khalsa Diwan Society defined the following generalized goals of the community:

- to retain their identity with a large and growing community;
- to prevent absorption of members of the existing community into white society by intermarriage -- white wives were seen as the greatest threat;
- to import brides and bridegrooms in order to sustain the culture and keep the community growing;
- to encourage close relatives to come to Canada through sponsorship as family members. (Stephenson, 1990, p. 2-3).

In contrast to the "old timers", they should adopt a middle course with respect to change and attitudes toward white society; they should resist assimilation, but "remember that what
was good and useful in India, in 1900, is not necessarily good and useful in Canada today" (Stephenson, 1990, p.4). They wished to avoid the pitfalls of white society and maintain the value of self-discipline and communal responsibility while adjusting to life in Canada.

**Education**

In India, the literacy rate is almost thirty-six percent. Education is highly subsidized by the government and education is the responsibility of individual states. Primary education is free and compulsory from ages six to eleven, but facilities are often inadequate due to the social inequities in India. There are many universities and colleges. Many East Indian people speak English, particularly those living in urban areas where the British influence is still strong. Sikhs immigrating from the Punjab have varying levels of education. A few are professionals, others may have minimal levels of education (Koehn, 1993).

Children who immigrate adapt quickly to Canada and learn English quickly because they go to school and are exposed to the community in many ways through school and friends. In Canada, Sikh children attend school to completion of high school and some go on to technical schools or universities. Education is valued, and more Sikhs are now entering the professions in Canada (Key informant D, personal communication, April 21, 1996).

**Marriage**

For the Sikh, marriage is considered to be forever. The divorce rate is very low. In India, marriages are arranged by the parents and kin. There still exists a dowry system and marriages are fundamentally fulfilling an economic function in that there is significant transfer of resources between families. The bride and groom must be socially matched (similar social and financial standing, same caste) and should not have seen or known each other prior to the
marriage. In Canada, during the 1960's almost all marriages were arranged by parents or older relatives. The majority of spouses were found in India. Within the last two decades, the Indo-Canadian ideal of the arranged marriage has and is still undergoing change. Love matches between members of the community are grudgingly accepted as the alternative to inter-ethnic marriages. Occasionally there are mixed marriages with whites. An adaptation of the arranged marriage is "guided" or "assisted" marriage (Wakil, Siddique, & Wakil, 1981; Key informants A, B, C, personal communications, June 4, 1996). The parents select suitable persons for consideration by the marriageable person and the prospective partners are able to meet, with the option of refusing if they feel they are incompatible. Divorce is slightly more prevalent now (although my informants were reluctant to discuss it, they did say this much). Caste is still important in selecting a marital partner and dowry still plays a part in many instances. It is still fairly common to seek a partner in India. A girl who marries is expected to be a virgin and therefore girls are closely protected, and not usually allowed to date.

Women are usually rather young when married in India. In Canada, the age is older since a girl usually will finish her education prior to marriage. A woman is expected to consider her husband as her "lord" and to be obedient to him in all things. In Canada, this concept is often strained or questioned as women become more aware of their rights, and/or gain independence through working, or are Canada-born or raised and familiar with the Western level of relationships and the views of Canadians (Ames & Inglis, 1976).

Separation and divorce are rare as there is strong pressure from the community to stay together. This can be problematic when there are issues of abuse or violence. Often, the woman is blamed for any difficulties in the marriage, regardless of the husband's actual
behaviour. Generally, the family and community try to resolve the problems without recourse to mainstream agencies or assistance. It should be noted here that many new brides from India are unaware of their rights in the Canadian system and have no knowledge of community resources (Key informant A, Coordinator: Settlement Program, personal communication, April, 1996).

Diet

Some Sikhs are vegetarian, but not all. They prefer well cooked, spicy food which is mostly vegetarian, such as lentils (dahl) and whole wheat breads such as chapattis or roti. Beef and pork are generally not eaten, but poultry is acceptable. Yogurt is a favourite food, as are sweet and rich deserts. Sweets and butter are associated with good nutrition (Key informant C, personal communication, June 4, 1996).

Diseases are often thought to be caused by an imbalance between hot and cold forces within the body. The diseases can be achieving balance in the body through the ingestion of hot or cold foods. Hot or cold foods are not determined by temperature or level of spice, but rather through the Ayurvedic system of medicine, which stipulates which foods are hot or cold. Diseases which are considered hot would be treated with cold foods and vice versa (Key informant B, personal communication, June 4, 1996). This system has implications for the health of women, since meat is a hot food and considered detrimental to the well-being and health of women who experience the physical manifestations of hormonal differences, i.e. menstruating, menopause. Often, within the same family, the men eat meat and the women do not, with the result that many Indo-Canadian women suffer from iron deficiency anemia (Key informant C, personal communication, April, 1996).
Filial Piety

In Indo-Canadian society, elders are respected by the younger generation and are considered knowledgable and wise. In Indian language, there is no word for "aged" or "old". The actual translation in Sanskrit is "bridh", which means one who has progressed and achieved a higher state of life through learning or life experience and is therefore a person worthy of respect and higher status. The Elderly person should be respected, obeyed and consulted. A son is expected to take care of his parents. The Punjabi (and Sikh) tradition of family honour, "izzat", and supporting and caring for elderly parents is being maintained where possible in Canada (Sanghera, 1991).

Family Honour "Izzat"

As noted by Koehn (1993), in her research about elderly Punjabi women in British Columbia, whether you are discussing Bangladeshi villagers, or rural Punjabis living in Canada, the influence exerted by community consensus is ubiquitous. The role of community consensus as a means of social control was identified in Koehn's (1993) research. One respondent interviewed put it this way:

Marriages here are more likely to succeed if the woman, rather than the man, is the one who is brought over from India. Her concern for family honour—that of her husband's family and her own family—often makes her more willing to accept a subservient role (p.31).

Another respondent charged that

Elderly women promote arranged marriages. They dictate their ideas to the parents (their children), and humiliate the family if they don't follow up on their recommendations—they cause a lot of trouble....Punjabis live for other people's opinion—to save their public face. It's all-important that others not speak badly about them. They will listen to others at the cost of their own children's happiness (p. 32).
Koehn (1993) notes that as an effective mechanism in terms of honour and shame, community opinion also serves a protective function in Punjabi society.

...but most people operate on the principle that one has to be able to show one's face in the temple. Keeping face is critical in Punjabi culture--one should not shame oneself, for in so doing, the family's honour is at stake. Punjabi newspapers are not at all professional. These papers are like gossip columns. They bring ALL of the details of families involved in court cases. This information filters all the way back to India (p. 32).

Historical Role of Women in India

"The formally subordinate role of Indian women to Indian men is spelled out in sacred literature, in law, and in practice. Yet there is no doubt that the woman who accepts this role and plays it out to perfection, the ideal Indian wife and mother, is revered and loved" (Goldstein, R., 1972, p.10). Seneviratne and Currie (1994) in their historical review of women in India note that women's status prior to 300 BC was significantly better than now. They note the beginning of the severe restriction of women's activities and status around the beginning of the Christian era. Many beliefs and customs developed, some of which are tied to religious notions, "that relegate women to a subordinate status" (Seneviratne & Currie, 1994, p. 594). A woman's duty was (and is) to marry and procure sons. The caste system relegated women to a subordinate status along with the patriarchal system, where the husband is considered the head of the family and the woman plays a secondary role all through her life. The concept of a single woman or spinsters has still to gain cultural acceptance, while the age old notion of male protection continues to dominate women's and men's behaviour. The dowry system and arranged marriages are still popular institutions even though the dowry system has been outlawed in India. Seneviratne and Currie (1994, p.593)
argue that there is considerable evidence that discrimination against women exists in the economic, social, and cultural spheres in patriarchal societies "besides the blatant structural aspects of the economy that subordinate women, it is the cultural conditioning of both men and women that contributes to women's subordinate position in society" and that

It is that kind of cultural conditioning that contributes to women's subordinate position in society....that kind of cultural conditioning that allows the dowry and arranged marriages to continue and prevents women from taking a more prominent position in all kinds of institutions within society, whether they are religious, political, or social" (Seneviratne & Currie, 1994, p.593).

Summary of Findings in the Literature Review

In this chapter, literature related to intergenerational conflict and health, acculturation, and intergenerational conflict and families, has been reviewed. In order to provide the cultural context for the study, the background of Indo-Canadians in British Columbia was researched and presented.

There was no literature available on nursing or health related research in relation to intergenerational conflict and health. Social sciences literature has addressed to some extent the issues around immigration and adolescence and health risk factors related to migration and cultural identity . Berry et al (1986, 1989) best define acculturation in stages of assimilation, integration, separation, and marginalisation. A picture of immigration issues emerges through the literature of the dilemma families have when living in two distinctive cultural contexts. Several studies of intergenerational conflict related to immigrant families have been done, including one of Indo-Canadian families, in which Berry et al's (1989) levels of acculturation were related to the concept of intergenerational conflict. While these studies identify important issues, it is evident that quantitative approaches do little to identify the
experiences of those involved, how intergenerational conflict and differences along with the process of acculturation affects families and their health. Nor do they identify the ways that families work out these differences.

In view of the above information, and in view of the fact that, as of 1995, the Vancouver School Board reports that over 48% of the school population has English as a second language, a qualitative study was warranted to identify if there is any basis to the suspicion that conflict with parents may contribute to health problems for immigrant adolescents, children of immigrants or their families. Since concern was raised regarding Indo-Canadian adolescents and their families, the study has examined the issues for this group. A qualitative study was selected in order to more completely explore with participants what they may be experiencing and to determine from them how families work out the issues. The methodology for examining these issues is addressed in Chapter Three.
CHAPTER THREE: METHODOLOGY

Research Design

A focused ethnographic approach was used, since the problem to be studied is problem focused and context specific:

Focused ethnographies are time-limited exploratory studies within a fairly discrete community or organization. They gather data primarily through selected episodes of participant observation, combined with unstructured and partially structured interviews. The number of key informants is limited; they are usually persons with a store of knowledge and experience relative to the problem or phenomenon of study, rather than persons with whom the ethnographer had developed a close, trusting relationship over time (Muecke, 1994, p. 199).

For data collection two sources of data were used. In-depth semi-structured interviews with Indo-Canadian parents and with Indo-Canadian adolescent girls and young women between the ages of 16-25 were conducted over a period of ten weeks. Participant observation at three Indo-Canadian youth and parent symposia provided another rich source of data. Participant observation is "the major data collection method of ethnography" (Germain, 1993, p.251) and is "a preferred means of experiencing and recording events in social settings" (Lindlof, 1995, p.135). The researcher can enter into conversation with participants and can discover their interpretations of issues or events, and also has an opportunity to validate information gathered from other sources. I was able to participate actively in the discussion sessions, to take notes, and to ask questions.

Sample

A sample of five adolescent or young women and seven parents, six mothers and one father were interviewed in the study. The parents interviewed were not always the parents of
the adolescents interviewed, since this depended on the willingness of the participants and on issues of confidentiality. If the adolescents or young women did not wish the writer to interview their parents, the parents were not interviewed; rather, other parents who were willing to participate in the study were interviewed.

The snowball type of sampling was done by purposive selection of subjects through word of mouth and distribution of notices at Indo-Canadian social centres, and grocery stores and through key informants sharing information about the study with the Indo-Canadian community. As well, I attended three Indo-Canadian youth and parent forums where I was given an opportunity to actively participate as well as introduce the study and request volunteers. Snowball samples have been identified by Lipson & Meleis (1989) as the most effective means for obtaining participation of immigrant groups in research, although they caution that the sample "may not represent the whole population but simply the population characterized by the first few informants in the study" (p.105).

Criteria for Selection of Participants

For this study participants interviewed met the following criteria:

1. Indo-Canadian Sikh female between the ages of 16 - 25, with family origin in the Punjab region of India, i.e. one or both parents immigrated as adults to Canada from India.

2. Indo-Canadian parent (s) of an adolescent or young woman between the ages of 16 - 25. Parent or spouse had immigrated as an adult from the Punjab region of India.
3. Participants were willing to discuss the issues of interest to the researcher, i.e. they had read the letter of explanation (Appendix C) and were willing to discuss relevant issues.

4. Informants were fluent in reading and writing English.

Process of Gaining Entry Into the Community

The above criteria for participant selection were adhered to where possible; however, members of the Indo-Canadian community were slow and reluctant to respond to requests for interviews. In view of this, I chose to interview one particular key informant who had sons, not daughters, and who also frequently had the role of bridging between the Indo-Canadian community and mainstream agencies. In addition, as noted earlier, I attended three Indo-Canadian youth forums held in three British Columbia cities. At these forums, I participated with the adolescents and their parents in discussions of a variety of issues concerning experiences and concerns of Indo-Canadian youth and their families. During the forums, I also handed out posters requesting volunteers for the study and was given an opportunity to make an announcement of the study and request volunteers.

I spent several weeks making and consolidating contacts in the Indo-Canadian community prior to conducting any interviews. The purpose was to gain familiarity with the community itself and to build a relationship of trust with key members of the community. I attended several functions including an Indo-Canadian fund-raising dinner and dance, a samosa-making party with women only, and having tea with the immigrant women's group. During these activities, I shared information about myself and talked briefly about the purpose of the study.
Potential participants for the study were provided with the letter of explanation and my telephone number.

**Characteristics of the Interviewed Participants and Their Families.**

The demographic background asked of all participants interviewed included questions on age, gender, country of birth, length of residence in Canada, education, language most often spoken at home, languages spoken away from home, number of persons in the household and relationship to the participant, and which Indian traditional customs were kept at home. (See Table 1, page 62). As described by the interviewed participants who completed demographic questionnaires, South Asian ethno-cultural practices maintained by most families included language, respect for elders, love for children, clothing, music, dance including traditional and Indian Bhangari dancing, food, certain celebrations, religion, and maintenance for some, of such Orthodox Sikh religious requirements as wearing a turban and the kirpan, having uncut hair and beards and not eating meat, wedding traditions and celebrations, arrangement of marriages, and the concept of extended families.

While some families continue to participate in extended and sometimes large kin networks, to which their primary loyalty is extended, the participants interviewed for the most part did not live in large extended families although they spoke of its importance and the importance generally of the family. Rather, there were mothers-in-law (paternal grandmothers) living with two families and one family had parents, children, and daughter-in-law and son, and grandchildren.

Participants noted that the trend for many Indo-Canadian families is to build a large home to accommodate the larger families; however, in the homes that I visited, while the
accommodation was usually available, for the most part, the families actually living in the homes were relatively small. Families tended to live in the same neighbourhood or within easy travelling distance where possible and to visit each other frequently, eating together and spending time together, going to temple together, and so on. They welcome family members to their homes when they first immigrate from India and provide accommodation for them while they get established and independent. Most new immigrants live with extended family for about two to three years, after which time, they are often in a position to purchase a home of their own or at least, to be independent. Elder parents who come to live in Canada generally live with their sons, but may move around from one son's home to another. For instance, one family's grandmother moves between her sons from Calgary to Victoria to California.

Many of the people living in areas of the Lower Mainland, Vancouver Island, and the farther north communities are village-mates. That is, they come from the same or a neighbouring village in the Punjab. Many families, while not living in an extended situation in their own homes, have large extended families near by and/or many people from the same village in the Punjab. Participants who were interviewed stated that where possible, most families try to maintain close ties with family in India and visit whenever they can afford it.

While living in a society that is very different in terms of family structure, these families have adapted and maintained the extended family structure so that it works for them.

Five Indo-Canadian young women and seven Indo-Canadian parents were interviewed. All had family origins in the Punjab region of the Indian sub-continent with all parents coming from India except one mother who immigrated from Kenya via England (her family origins
were Punjabi and her husband was Punjabi). Of the young daughters interviewed, four were
born in Canada and one was born in India. All were of the Sikh religion except one young
woman whose family originated in the area of the Punjab which has partitioned into Pakistan.
However, the ethno-cultural origin, values and practices related to religion, marriage, family,
and child rearing are as she put it, "basically the same". With the exception of one, all parents
interviewed were parents of daughters. One parent of sons was interviewed because she has
acted in previous scenarios as a cultural key informant, and has comfort with sharing
information about the community without reticence.

The ages of the young women interviewed ranged from sixteen to twenty-five. Four had
been born in Canada and attended the Canadian school system. One had been born in India
and immigrated to Canada while young, and had attended the Canadian school system. All
young women interviewed were living in British Columbia, Canada. Two of the young
women are now living away from home but maintain their family contacts and visit regularly.
With the exception of the one still in high school, all of the daughters interviewed had
attended university and attained a bachelor’s degree.

The parents' ages ranged from 47 to 53. This places the parents in the category of the
Baby Boomer's age cohort. Most of the parents arrived in Canada during the 1970's and
were part of what was known as the "second wave" of Indo-Canadian immigrants. Of those
parents interviewed, the participants interviewed were primarily women. One father
participated in part of one interview in that he came and listened, and tended to make
agreeing comments when his wife was talking. However, he did not actively participate in
the questions and answers of the interviews.
Table 1. Socio-demographic Characteristics of Interviewed Participants

<table>
<thead>
<tr>
<th></th>
<th>Daughters</th>
<th>Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age of participants</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 - 20</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>21 - 25</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>26 - 45</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>46 - 55</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td><strong>Languages spoken</strong></td>
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<td></td>
</tr>
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<td>English (primary language)</td>
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<td>0</td>
</tr>
<tr>
<td>English/Punjabi</td>
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<td>6</td>
</tr>
<tr>
<td>English/Punjabi/Hindi</td>
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<td>1</td>
</tr>
<tr>
<td>Punjabi only</td>
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<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td><strong>Primary language spoken at home</strong></td>
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<td></td>
</tr>
<tr>
<td>English</td>
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</tr>
<tr>
<td>English/Punjabi</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>English/Punjabi/Hindi</td>
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<td>0</td>
</tr>
<tr>
<td>Punjabi only</td>
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<td>5</td>
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<tr>
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<td>0</td>
</tr>
<tr>
<td><strong>Education</strong></td>
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<td></td>
</tr>
<tr>
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<tr>
<td>University</td>
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<td>1</td>
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</tr>
<tr>
<td>Extended family</td>
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</tr>
<tr>
<td>Separated (living with children)</td>
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<td>1</td>
</tr>
<tr>
<td><strong>Length of time in Canada</strong></td>
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<td></td>
</tr>
<tr>
<td>Born</td>
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<tr>
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<td>10 - 20 Yrs</td>
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<td>3</td>
</tr>
<tr>
<td>Over 20 Yrs</td>
<td>1</td>
<td>4</td>
</tr>
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</table>
Characteristics of the Symposium Participants

Participants of the Indo-Canadian Youth Symposia ranged from fifteen to twenty-five for the young women and from about twenty-five to fifty-five for the parents (demographic information was not requested from the symposium participants). Participants were primarily Punjabi speaking Sikhs, with several participants who identified themselves as part Sikh, part Hindu, and as Muslim.

At the symposia, the participants were primarily women. Two men and three adolescent males attended the first symposium. No males attended the second or third one. Participants were from three cities in British Columbia. A number of the parents attending the symposia identified themselves as working in some kind of professional capacity such as counselling, teaching, settlement work and so on.

All participants, those interviewed and those who took part in the symposia, spoke Punjabi at home, with the exception of one person who spoke it but chose not to use it at home or teach it to her children. Most of them also described a tendency to speak a combination of English and Punjabi with some family members. One person laughingly called it "Pun-English" and noted that even where there were family members at home who might not speak English, there were many English words that become part of the Punjabi conversations simply because there may not be an equivalent word in Punjabi. The most commonly spoken language away from home was English, with Punjabi the second, followed by Hindi and French. Those who could speak some French were daughters who had learned it as part of the Canadian school curriculum. The five daughters interviewed and a number of the symposium participants, while able to speak Punjabi, were not able to read or write much
in Punjabi, although some of them wished that they could. Others felt that having the ability to speak the language was sufficient for communication with other family members or going to the temple.

Data Collection

In-depth ethnographic interviews were conducted at either participants' homes or a location acceptable to the participants. In every situation, tea was offered and accepted, and an opportunity was given for getting to know each other and for sharing information about each other. When working with Indo-Canadian families, Wood (1984) suggests that an Indo-Canadian family or individual is more open to help or discussion when they feel they know the agent as an individual. "Agents providing personal information about themselves experience open communication from clients. Those begrudging personal data report restricted disclosure from them" (Wood, 1984, p. 273). To this end, particularly with parents, a taped interview was not always done on the first visit. Rather, where time permitted, a preliminary visit was made. During this visit, the study was explained and the participant and myself talked about ourselves, our families and children, and generally got to know each other. Ultimately, during these sessions, we were able to establish the kind of rapport that supported the discussion of such issues as disagreement or conflict.

A set of questions was used to guide the discussion (see Appendix A); however, since the goal of the interview was to have the participants describe their experiences from their own perspectives, the questions served merely as a stimulus for exploration of the issues. The interviews were conducted after the researcher had established social comfort with the participant, as noted above. Initial discussion was directed to establishing comfort; therefore
taping of the interview was not commenced until this was achieved. Lipson and Meleis (1989) suggest that it may be helpful to use a communication style similar to that of the immigrant being interviewed. "Many clients rarely gave direct answers to direct questions. Rather, responses to questions were often circular or indirect, perhaps answered by means of a story with the answer to the question at the end or, in some instances, not answered at all" (Lipson & Meleis, 1989, p.106). Therefore, the interviewer was aware of variations in responses to the questions and allowed the questions to act as a stimulus to discussion of conflict, disagreement, family relations and health issues. To ensure confidentiality, the researcher provided or requested privacy for the duration of the interview. This was generally possible, although when interviews were conducted in participants' homes, there were occasional interruptions as family members came and went.

Each interview was approximately one to one and a half hours. Throughout the interview, the interviewer clarified statements and observations made by the informants. A second or third interview was scheduled when possible to review and clarify information where necessary and to validate conclusions the researcher had made, and to explore new questions that arose from analysis of the data. The researcher attempted to elicit the participants' explanations of what issues were and how they experienced and managed them. All participants with whom an interview was done were asked to complete a demographic questionnaire (see Appendix B).

Interviews were audio taped and later transcribed from the tapes.

In one instance, a parent chose not to have the interview taped. The information from this interview was recorded later from memory. Although I did have permission to write
down the information while we were talking, I did not, since it would have been disruptive to the flow and spontaneity of the conversation.

Field notes were taken during and following the interviews and forums for use as part of the data; for instance, non-verbal communication, environment or context of information provided, persons present during the interview, and so on (Lincoln & Guba, 1985, Sandelowski, 1994).

Notes were taken at the symposia with the permission of the coordinators and consent of the participants. Prior to analysis, this information was made available to the Indo-Canadian Women's Organization for comparison with the notes taken by participants for accuracy and validation of the contents. Analysis was validated by asking two participants of the symposiums to review and provide feedback. The data from these symposia served to enrich and validate some of the findings elicited in the interviews and therefore helped establish the credibility and confirmability of the interview data.

Analysis of the Data

Qualitative procedures were used to analyze the data. Data analysis was done concurrently with data collection. Each transcript was read through several times to get a thorough familiarity with information in it. Hammersly and Atkinson (1992) suggest that one use the data to think with...to see whether any interesting patterns can be identified, whether anything stands out as surprising or puzzling; how the data relate to what one might have expected...and whether there are any apparent inconsistencies or contradictions among the views of different groups or individuals, or between people's expressed beliefs or attitudes and what they do (p.178).
The transcripts were then examined line by line in order to extract statements which specifically related to the research questions and to identify and generate categories from the raw data. The main categories which emerged were then given a numerical code. Themes and subthemes were identified and examined for basic patterns, recurring patterns and relationships, and for the meaning of the individual's experiences and ways of dealing with the experiences. As each transcript was examined, categories and themes common to the experiences of participants were grouped into meaningful clusters, explicated and synthesized as a structure (Lindlof, 1995). This information was then shared and validated with the informants to ensure that their views were not misrepresented and to ask if the analysis of the data reaffirmed their perception of the information. Colaizzi (1978) suggests asking informants, "How do my descriptive results compare with your experiences?" "What aspects of your experiences have I omitted?" Any new information that emerges must be included in the final results of the research (Colaizzi, 1978, cited in Finn, 1994, p.31). Subsequent interviews were also used to further explore and validate the themes which were emerging from the data. Information obtained in the symposia was treated in the same manner and served to enrich and validate much of what was found within the interview data.

Assumptions and Limitations

The main assumption was that some level of conflict or difference is experienced between all adolescents and their families during adolescence. In addition, it was assumed that children of first and second generation Indo-Canadian families have different experiences than do their parents in the Canadian culture. Often the children experience and become comfortable with Canadian culture faster than do their parents.
The main limitation of the study is the small sample size. However, the data are rich and the information may be transferable in that it can provide insights into assessment approaches and/or interventions that could be used for a similar cultural group. The interviews and symposia provided a source of data concerning the experiences of these women and their families which may not have been obtained in a larger statistically oriented study. By eliciting their own explanatory framework of the ways in which they manage the balancing of two cultures, we are given clues as to how to go about eliciting the explanatory framework of others.

Accuracy of the Data

Accuracy of the data was addressed through clarification of information throughout the interviews and where practical, questions were rephrased to clarify the accuracy of the data. Where further clarification was required, the participant was contacted for additional information and to provide feedback about the conclusions of the researcher.

"Qualitative research is different from quantitative research in epistemological and ontological assumptions. Therefore, specific criteria for evaluating qualitative findings are essential" (Luna, 1994, p. 17). The criteria used for this study were credibility, confirmability, meaning-in-context, recurrent patterning, saturation and transferability (Leininger, 1990, 1991; Lincoln & Guba, 1985). Credibility refers to the "truth value" or "believability" of the research findings in which the researcher must present the findings as known and held as truths or reality, and to the presentation of human experience in such a way that the people who have had that experience would recognize it as their own (Leininger, 1990, Luna, 1994). Credibility was established through use of extensive quotes
throughout the presentation of findings. **Confirmability** refers to establishing verifiable
direct evidence with the informants through repeated accounts that substantiate what has
been heard or experienced with regard to the phenomena under study. Mutual agreement by
the researcher and researched establish confirmability (Leininger, 1990, Lincoln & Guba,
1985). Throughout the interviews and at the symposia, I validated findings with participants
through questions. Findings which were repeated were integrated into questions for further
interviews. **Meaning-in-context** refers to data that are understandable and relevant within
certain situations or frames of reference, and to how informants provide their explanations
and interpretations of actions, events, communication and other activities in relation to the
domain of enquiry and cultural phenomena (Leininger, 1990). Meaning-in context was
demonstrated through provision of base information about the Indo-Canadian culture from
the literature and from community informants and through use of extensive quotes from the
interviews and symposia. **Recurrent patterning** refers to human events or experiences that
tend to recur in patterns or sequences over time. Consistency in form, behaviour or
structural features support the criteria of recurrent patterning (Leininger, 1990). Information
from the interviews was coded according to recurrent patterns or themes. **Saturation** refers
to evidence of having taken in all that can be known about a phenomenon under study
(Leininger, 1990). In this study, the small size of the sample limits the opportunity for
collecting all the possible knowledge to be gained about the phenomenon of interest.
**Transferability** refers to whether the findings discovered will have similar meanings,
relevance, or significance in another similar situation or context. In-depth description and
details of the data should be provided so that another researcher wishing to transfer
conclusions to a similar context might reach a conclusion that the findings have similar relevance or fit (Luna, 1994). Again, the provision of information about the participants, about entry to the community, and provision of extensive quotes representative of the issues identified by participants provided contextual information. As well, findings were provided to three participants and to two non-participant Indo-Canadian women for review and feedback.

**Ethical Considerations**

Ethical approval was obtained according to the guidelines set forth by the University of British Columbia Behavioural Sciences Screening Committee for Research and other Studies involving Human Subjects.

In order to protect individuals from feeling coerced, those who met the study criteria were approached by a third party, a member of the Indo-Canadian community, who explained the purpose of the study and provided a letter of explanation (Appendix C) which explains the purpose of the study. If the potential informant agreed, the researcher telephoned the potential informant to explain the study further and to allow an opportunity for questions or change of mind. After the individual agreed to participate, a time and place was set up for the interviews. Participants were asked to sign a consent or provide verbal consent as appropriate. Each individual was assured of confidentiality, his/her right to refuse to participate, withdraw from the study at any time, or to refuse to answer any question at any time.

Informed consent was obtained from all participants. To this end, the sample was of families where language barriers were not a factor. All participants were fluent in reading
and writing English. Participants from the forums who required parental consent were requested to ask their parents for consent to participate in the study. All adult participants provided verbal consent to the material from the forum discussions being used in the study.

When immigrants are being studied, consent procedures may have to be modified to fit the values of the specific group involved. Written consent forms may be considered problematic as it implies a lack of trust in the participant's word and is considered an insult to be asked to sign a consent form after having given verbal approval (Lipson & Meleis, 1989). The researcher utilized written consent forms where possible; in the event of reluctance of participants to sign, verbal consent was obtained and the participant was informed verbally of the content of the consent form, the purpose of the study, the guarantee of confidentiality, and the right to withdraw or refuse to answer questions at any time.

All audio tapes were erased following completion of the research project. All transcripts and audio tapes were coded to ensure anonymity of participants. Parents did not have access to the data provided by their children, nor did children have access to data provided by their parents. Participants were offered access to the results of the study through provision of a summary of the major findings to those requesting it. Additionally, I have agreed to present the results to several groups, namely the Surrey youth clinic staff, Vancouver West Health Unit staff, and the Vancouver Indo-Canadian Women's Group.

Chapter Summary

In this chapter, the methodology and research design for the study was presented. Characteristics of interview and symposia participants were described. The data collection process, analysis process and criteria for accuracy of the data, and assumptions and
limitations of the study and ethical considerations were presented. In Chapter Four, the findings from the data will be reported.
CHAPTER FOUR: PRESENTATION OF THE PARTICIPANTS' PERSPECTIVES AND EXPERIENCES

In this study several questions guided the research. Would Indo-Canadian adolescent girls or young women or parents of Indo-Canadian adolescent girls or young women identify sources of conflict or disagreement in their relationships and if so, what were they? What perceptions of health status and behaviours would they identify as being related to intergenerational conflict or differences? And finally, what formal or informal resources do Indo-Canadian families draw upon to resolve intergenerational conflict or differences?

In this chapter, we will see that there are issues of concern in the relationships between Indo-Canadian adolescent and young women and parents. These are manifested in a number of ways as shall be seen.

The findings presented here give voice to the experiences of the participants and insight into their worlds. Like Papanek (1964) and Jeffery (1979) as described in Hammersly and Atkinson (1992), it is my belief that as a woman and an outsider, I gained access to the world of Indo-Canadian women as no male could have done. These Indo-Canadian women welcomed me as a friend; someone who would speak out for them and with whom they were willing to discuss their experiences and explain their culture from the point of view of a woman. In my position as an outsider with a different cultural perspective, I was able to engage these women in their construction of the balance or bridging that they strike between two cultures. As one participant put it, "You know, I'm enjoying this. It makes me think about things, about why we do certain things, and it makes me look at my life from another
perspective...because I wouldn't necessarily think to question a lot of things, I just accept them as they are. When I explain it to you, I get interested in what the differences are and why." Another said, "I think it is important that you are doing this. I wish I could do the same thing, but maybe I am too much in the middle of it to have the perspective."

Information has been presented from the interviews following the process of coding and categorizing the participants' accounts of their experience. Each participant provided unique insights into the context of her own life and her experience of living in the Indo-Canadian culture. The participants also provided cultural interpretation and explanation of the South Asian Punjabi culture as they and their families live it in Canada. Therefore, it should be noted that every effort has been made to relay the information as they shared it with me. While it is important not to essentialize the culture or create stereotypes, it would not portray their lives clearly if I did not present their perspectives or opinions.

The findings of the interviews are described through presentation of the categories and themes and use of extensive direct quotes from the interviews of the participants themselves. Thorne (1993) describes this form of articulating a report as one way in which "trustworthiness" (Catanzaro, 1988, cited in Thorne, 1993, p.237) of the findings can be addressed. Major themes are presented in a way that reflects a composite of participants' perspectives about issues or phenomenon as well as the emergence of the researcher's analysis of the meaning inherent in the accounts. In keeping with the tradition that values "thick description" (Scheff, 1986), liberal use is made of verbatim quotations and anecdotes from individual informants. Each such reference is made by virtue not of its uniqueness but of some element that represents the shared experience. Thus the writing style aims to create a portrait of the whole rather than a record of specific unique individuals (Thorne, 1993, p.237).
In this report, a similar approach is used, but where an individual speaks of an issue or experience which contributes significant information, yet does not constitute shared experience, that information is also included.

Cultural information as provided by the participants is incorporated in order to present the context of their lives as they have told it to me and to ensure that the reader is able to gain a sense of their realities. The informants’ comments about the importance of the study are presented. Where needed to facilitate understanding of the context, my comments or questions to the participant are shown in italics. Bold highlight was used within the text of quotes to show emphasis expressed by the speaker.

Analysis of the findings will be presented in the next chapter.

**Immigration to Canada**

Of the parents and daughters interviewed, all but one of the parents had immigrated from villages in India prior to the children being born. For the most part, the goal of immigration was to seek a better life. Most fathers of participants were either sponsored by another family member or were the first family member to come to Canada. Several of them worked in sawmills and pulp mills when they first came to Canada. Later, some established business such as cleaning, building, furniture sales, transportation, and so on. Mothers who participated, and mothers of daughters who participated, tended to come to Canada about four to six years after the husband came. Often, the fathers went back to India several years after arrival in Canada, to find a bride and marry. They then sponsored their spouses to Canada and later gradually sponsored other family members to Canada, all under the Family Class designation. As one person explained
We immigrated slowly and we brought everyone here slowly. Lots of family, my Dad's side, all his sisters and brothers, a lot of them are here in Victoria. My Mom's side, a lot of them are in, like, California, and Calgary.

Parents in India felt that their daughters would have much better opportunities for a better life in Canada.

First my husband came to Canada, and after the marriage I came here. He was here before me. He went back to get married and I came back with him. I didn't finish high school because I was in the final year when my marriage was arranged, so I could not complete my final year. Because my parents were in such a rush so that I can immigrate to Canada and have a better life.

Their village is next to my sister-in-law's village so my sister-in-law is their close friend, very close friends with them. So they knew that he came from Canada and then there was a belief, even right now it's like that, even at that time, that was twenty-five years ago so people that came from Canada or America "They're well established people, so we should marry girls to them."
So they went to see our parents every week to see if they would make an arrangement. He wasn't as educated as much as I was, so he had Grade Ten, but we thought, he came from Canada, so he's living there for six years, so it's just a matter of language, so he would have learned more than me and he must be more modern or advanced. And so, we think of those things and also, caste and the same middle class family, status and all that...we saw the faces, and that's it. We didn't talk or anything, we just look at the faces and so they asked me if I liked him or not and I said" no."

My Mom persuaded me more than my Dad. She said, "Oh, you will have a better life than here and all this."

Some families originated in India but migrated here via other countries. One family came to Canada via Kenya and Britain. For most, family members already living in Canada had a significant role in helping to bridge the gap between the migrant's life in the Punjab and their traditional culture, and differences in the new country. Family and friends helped the newcomers adjust economically and socially, helping them to get jobs, learn English, providing a home until independence was achieved, and so on.
Although several parents knew some English from having learned it in school, it wasn't always as helpful to them as they had anticipated.

Yes, I knew English. I knew basics because we were reading and writing it at school, but spoken language wasn't that fluent at all. So I thought I knew everything but when I came here I could not communicate at all...So it was a shock for me. So then I thought like, everything was going above my head. And when people talk and I couldn't comprehend anything, if someone is on the phone, I was afraid to pick up the phone in case they say something I don't understand. And embarrassment, because my in-laws family was thinking I'm highly educated and then I wouldn't understand and then they'll say, "Oh, what kind of school does she go to, that she doesn't understand." Because they were here before me, and even though they couldn't speak English as well, but still they had some understanding and they're used to that language.

Some parents have not learned English or they speak very little. Often, fathers who worked learned some English, because they were out in the work force and needed it for that. One daughter noted that her mother has not learned English in spite of being in Canada for over twenty years. "She never really felt the need for it, I guess" (Rani). Her mother never went shopping on her own and never learned to drive. She never became friends with or acquainted with any non-Indian people except to say "hi" occasionally. In the community where they lived there were many Indian families and so she was able to manage without learning the language.

**Balancing or Bridging Two Cultures**

Throughout the research process, the primary theme which emerged was the fact that Indo-Canadian families are living and balancing or trying to bridge two cultures. The task of balancing or bridging two cultures encompasses a complex framework of negotiation for Indo-Canadian families, and for parents and their daughters. The primary categories related to balancing or bridging the two cultures and within which discussion will be presented are as
follows: participants' perspectives on family and cultural values, living in the community which was reflected in the often repeated phrase, "What will people think? How Will This Reflect on the Family?" or "Lokeen Kee Kehan Gay", gender issues, and strategies and approaches for living with the issues. Finally, the participants themselves had opinions and ideas about the help seeking process.

Many of the categories and themes overlap. In presenting them, they are separated merely to provide the reader with some order.

In the interviews with participants, a number of themes emerged which relate to family and cultural values. They talked about "our culture" with a strong sense of valuing and pride in being who they are. Yet, there was an openness and acknowledgement that the culture is not a static thing and that negotiation and change is inherent in the maintenance of that culture. Both parents and daughters were acutely aware that while there is a desire to maintain strong family and cultural values, there are differences in how that is played out; both between families here and from how it might play out in India, where most families originated from.

Daughters displayed a deep understanding of "where their parents were coming from" in relation to the differences of upbringing in India and in Canada. They were able to articulate the need for children to be aware of and accommodate these differences. They were, however, outspoken about the need to educate parents to the differences between parenting in India and Canada. Parents to some extent recognized that they too were working out compromises in parenting and lifestyle that would not have been an issue in India. Some parents and daughters noted that often, where parents do not associate with or have Euro-
Canadian friends, they don't have a frame of reference other than television or movies for how family life and values are conducted in non-Indian Canadian or Euro-Canadian families in North America, therefore there are, in some circumstances, concerns that too much contact with and interaction with non-Indian families and friends might in some way be responsible for moving away from Indian values and norms. This was especially evident in voiced concerns about daughters going out and dating. Conversely, daughters were aware that they too did not always have a clear picture of what their parents' adolescence and experiences might have been like.

Gender issues were identified by both parents and daughters as being a source of disagreement and occasional conflicting ideas. Such things as the double standard, women's roles, education, friendships and dating, marriage, and reputation of daughters and women were themes that emerged from the data.

Family relations and the influence of the extended family were identified as being key to working out family issues and conflicts. Family honour "izzat" and respect plays a strong part in how problems are perceived and resolved. Families for the most part prefer not to involve persons from outside the family in working out conflicts or disagreements, primarily because of the concern about what others will think, and how it will reflect on the family.

Some participants commented on racism and ethnocentrism and the place it takes in their lives. They were frank in describing it in terms of their own communities and how it appears to them. These comments are presented in the context of the issues within which they were mentioned.

Approaches to resolution of problems and conflicts were identified. Participants clarified
the role of families and their role in conflict resolution. Of primary importance is the
consideration that except in the most "out of control" situations, families prefer to try to
work out problems on their own.

There were some health problems which were perceived by participants to be primarily
related to conflict. For instance, stress and tension, stomach problems, hypertension and so
on were identified as being the result of specific situations. Health issues were discussed in
relation to such things as teen-age pregnancy, drugs and alcohol abuse, premarital sex, and
promiscuity. All are issues which cut across ethnic boundaries within the Canadian
population and are issues which have been discussed in such works as Bibby and Posterski's
(1992) study of current trends among young people in Canada; all are issues that parents in
genral seem to be concerned with.

Presentation of the findings will focus on participants' description of issues and how they
affect or are lived in participants' lives. In so doing, not only can one see the issues, but also
one can get a sense of the personal meaning the issues and values have within the
constructions participants have provided.

Participants' Perspectives on Expectations of Adolescents: Reconciling

Family and Cultural Values

Showing Respect

Respect was identified in some way by all of the participants. It is a concept that families
identified as important and was constructed by participants in numerous ways. Respect is
central to family interactions and relationships, as well as relationships outside the family.
Respect is expected by elders, other relatives and parents. It can be demonstrated through
unquestioning obedience of children to their parents, and by wives to their husbands. A girl shows respect to her family and elders by maintaining a good reputation in the community and by accepting parents' choice of a career or a marriage partner. Respect for the family and a desire to keep family problems within the family is a factor in the choices that are made in resolving problems. One young woman talked about decision-making as a process which required mutual respect between individuals constituting a couple.

Respect for elders was mentioned by most of the participants as being an integral aspect of family life. An Indian person is always expected to show respect when speaking with parents, regardless of whether the person is young or fifty or sixty years old her/himself. Elders are considered important and their advice is generally asked when important decisions are being made. Proximity by way of being in the same household or in the same country or town is not a key factor in showing respect by consulting the parents. A key informant provided insights to how the concept sometimes is played out:

Respect is defined more in the sense that we have definite rules. Like my in-laws have a specific rule. My husband, if he was starting a business, would have called his Dad in India to say "We are starting this new business, do you think it looks good?" Of course, being in India, he doesn't know, but it's just a way of saying, "You are the elder in the family and you make the decisions." Often, parents will be sitting in a situation where they may not even understand English but they are a part of the sons' families.

My sister-in-law's family, their mother always sat with the five brothers when any kind of business deal was being completed. Although she didn't understand a word of English. But she was the one allowed to sit in with them. The wives weren't allowed but the mother was. So all the five brothers and the mother would sit down and make a decision. Whether they explained or not, it was just that she was part of that business deal. And these are very wealthy people. They own a chain of hotels all over the world. They have a Board and what not. So the Mom would go to the Board meetings and often, things are done in England, so she had no idea what was going on, but she
would sit at the head like the Chairman.

So, that kind of thing. Some families would carry it to that point. Others may not but still the parents would be asked all the time.

When a son or daughter is getting married, respect is shown to the elders (grandparents) in the way that invitations are worded. The actual mother and father of the bride and groom may not be mentioned in the invitation; the family will always show respect to the grandparents by putting their names on the invitation; they are the ones who invite you, "Mr and Mrs. K request the pleasure of your company at the marriage of their grandson, Rajit..., son of Mr. and Mrs. K" If the parents are already deceased, respect is still shown as follows, "....at the marriage of the grandson of the late Mr. and Mrs. K and the son of Mr. and Mrs"

The role of grandparents and in-laws varies in Canada, but many of the customs are the same as in India, "its a defining of roles." She explained that in India the women never work, and depending whether the family was wealthy and had servants or not, the women generally looks after the children, the household, and the mother-in-law. Once a daughter-in-law enters the household, the mother-in-law stops doing the household work, although if she herself still has a mother-in-law in the home, she may look after her a little. If the family is wealthy, the daughter-in-law would look after the servants and run the household. If they are not wealthy, the daughter-in-law is expected to do all the household work. As more daughter-in-laws come, there is a kind of hierarchy formed so that the second daughter-in-law would do less work than the first, and the third would do more than the second and so on.

The mother-in-law doesn't do any work, but has the authority in the household over her
daughters-in-law. She would, however, look after the grandchildren and often builds a close relationship with her grandchildren. The father-in-law or father, because he is often only in his late 40's or 50's when the children marry, will continue to run the family farm or business with the help of the sons. As he gets older, he turns responsibilities over to the oldest son. All family decisions though, still go through the older parents, such as what crops to plant, property purchases, education choices of the children and marriage arrangements.

Some grandparents expect the children and grandchildren to show their respect by touching their feet when they come in and go out. A number of participants mentioned that here in Canada, older parents who come from India complain that young people, particularly their grandchildren, are not showing the respect they think is due them.

Some parents noted that often grandparents don't understand when a parent is trying to work things out with their child or letting them "vent". The grandparents perceive this as rude or "talking back" and lack of respect. Anger of a child is absolutely not acceptable. If the children disagree with a parent, it is seen as an insult by the extended family.

Respect is expected by any person who is older or the superior of a person. For instance, when addressing an older person, one would not address them by their name.

We have different terms for each member of the family, and for a particular generation. Like everybody of my generation (twenties) and if they were slightly older than myself, I would call them PEN-JI which means sisters. Whether I'm related to them or not. If they're older, say my father's generation, I would refer to them by UNCLE-JI or we have specific terms like CHACHA-JI, which would be of my father's generation but younger than him. CHACHA-JI means your father's younger brother. Grandparents would be BABA-JI. Older non-related persons might be UNCLE-JI or AUNTIE-JI.

One participant stated that today's youth are beginning to question the automatic
expectation of respect because of age or authority. They are saying that respect should be earned, not just accorded because of status. She herself questioned it when she was a teenager, but learned that there were certain things one needed to do either to "keep the peace" or to gain respect in return.

It's how you talk to them. And if there is certain things that are expected of you that you did them without question. You don't question them all the time about what they're...if you question them, then it shows disregard for what they believe, lack of respect.

A symposium participant commented:

Sometimes I feel we're more racist toward ourselves than anybody else from the outside could ever be to us, like our old ladies are well known for their gossip, "Like so and so was seen there with so and so and my God, what was she wearing and all that" They're seniors and they're supposed to be respected, but how can you respect someone who tears down your own culture? It would be nice if some of them were here. We're all here because we know there is a problem.

A mother noted that in her experience, rarely are the children given their own career choices. A child's education will be determined by what the family and business needs are. So if a family has a thriving business, they might need one child to become a lawyer, another to become a chartered accountant, and then, perhaps they might like one child to become a doctor. A family with a hotel might want one child to take hotel management. "Sciences are being encouraged and careers such as medicine, law, engineering and so on. Seldom will Indo-Canadian families steer their children into degrees such as Arts or Music." She expressed her intention of ensuring that her boys get the needed education by encouraging them to go into the areas she thinks important for the family, chartered accounting and law. Her view is that you have to guide and sometimes push them.
in the right direction and that children must be taught what is right for them; that they show respect for their parents by accepting these decisions.

In Western society, that is, I'll define it as Canadians that look at the Western way of bringing up children or how the Western philosophy is, and this includes some parts of the United States and whatnot, but the Western society is the real sense to let the children become individuals. Let them develop the way it is. And I sort, at first, at one point I was in agreement. But I am really beginning to disagree with that. I don't think that children, some kids will do fine because they are very focused and so forth. And some are not. And to have this view of all the time, "oh well, let them decide. If they're ready they'll go to school." There comes a time when you really need to push your children. And really give them a sense of structure. Because they need that structure. They need to be pushed. They need to be said, "Well no, you're going to the University. I will not take anything else. My son could have gone to College as well, and I could have saved a bit of money. But I'm really glad that I asked him to go to University rather than College. There's nothing wrong with community colleges but there is a difference. After the community college, you may not want to do anything.

And I really feel that I'm going my traditional route. Where, push the kids, push them a little bit more. Push them harder....So I guess it's funny when your children come, how traditional you get.

Families: Interfacing Between Two Cultures

The extended family structure was valued by all of the participants interviewed, although due to various circumstances not all of them had a large extended family actually resident in the home. As noted earlier, most try to provide accommodation and help to new family members immigrating from India, but most consisted of the nuclear family and sometimes the father's parents or mother. In terms of how participants saw family in relation to living in the Western culture; extended families, whether in the home or nearby were valued. One daughter whose family lived in a small town with no relatives near felt that there were both advantages and disadvantages, particularly when addressing differences of living here while
living with values, customs and expectations of Indian parents

My father was here ten years before my mom, so he was quite Westernized. And my mom was city-raised, so she has somewhat of a different concept that someone who came from a village in India. Our family was really close, because we were the only ones in Canada. We were stuck in a nuclear family and that's a very Western concept. Usually you've got extended family all around you. So we didn't really have to face like social pressures from other members of the family which is the situation for most of the people who have come here.

I would probably say that the key things I noticed that were very different is that the family was always considered more important than your friends.

This view that the family is more important than friends was confirmed by all of the persons interviewed. This value is one that participants described as essential to the existence of their families and was cited as giving direction to certain actions and decisions. For instance, participants explained that choice of a marriage partner for children is made based on considerations related to what would be good for the families involved, as well, it was noted that when there is a marriage, it is considered to be not only between two people, but also between the extended family or kinship circle. This is in sharp contrast to how "Western" families operate.

Social pressures from family and friends were also mentioned by a number of participants and will be elaborated on more in the next section. Some daughters stated that their parents did not involve themselves very much outside the home or in the school activities. One felt that her parents were more Westernized than some, and she was very proud of them because they involved themselves with the school, the teachers, and the community outside the Indo-Canadian one. Her mother often acted as a translator for community health nurses and teachers and parents who were having problems. She pondered the reasons for so many
Indo-Canadian parents not being involved with their kids' school lives and why some of the kids were not willing for their parents to attend or be involved in school functions and so on.

It was really a language barrier that they were so uninvolved in their kids' lives. Our parents were always there. They were always going on field trips and stuff like that with school. So we were always very proud of our parents and I could see that with many of my friends, they were embarrassed about their parents. Because my mom wore Western clothes but she also wore Indian clothes. And she was complimented either way. Whereas their parents weren't able to fit in as well, because they didn't really know the language and they weren't from cities. So there was a bigger gap between how their children were raised and how their parents were, than there was with our family. Because we were exposed to so many things. Like our parents took us out to restaurants. Whereas they had never done things like that as a family.

I think it's the language and I think it's also the kids too. They don't want their parents to come out to anything. And maybe it's a language thing. Maybe it's a cultural thing and maybe they don't want their parents to know what they're doing. And also it's harder for parents to get involved in the teen years if they haven't been involved in the elementary school years.

Another informant suggested that the lack of involvement of parents was not so much the language issue, but rather, a purposeful rejection of the Western culture and its "contamination". She explained that, in her experience, some parents avoided contact with schools and also preferred for children to participate only in so much as they should go to school and return home immediately after school in order to avoid the "contamination" their children would be exposed to if they stayed longer or got involved in extracurricular activities.

Communication gaps occur between children and extended family members, especially grandparents. The grandparents don't understand English or the North American ways of doing things. The adolescents and children do not speak Punjabi very well. Often when
spoken to in Punjabi, they answer in English. This is problematic, not only with the elders who don't speak English, but at the temple, where some members give the parents a hard time because their children don't speak the language very well and are unable to take part in some of the activities. Consequently, there are aspects of the culture that the children do not learn and often there are discrepancies between parents and children's interpretations of the meanings, inferences and understanding of the language and significance. Parents stated that they would like their children to participate fully in the cultural life of their communities, but felt that there were not enough facilities such as language schools for children to learn the culture.

**Living in the Community: What Will People Think? Lokeen Kee Kehan Gay?**

As noted in the background information in the literature review, Sikh families in India and also in British Columbia are strongly influenced by "izzat" which refers to family honour or grace and how the community will perceive actions of any of the family members. This was such a common theme in every interview and at the symposiums that it should be addressed separately. The phrase "Lokeen Kee Kehan Gay" reflects a concept which is key in the lives of persons who are part of the South Asian and Punjabi community. It means roughly, "How will this (being an action or event occurring in the family) reflect on the family?" or "How will this look in the community?" or "What will people say?" It is a concept that is not easily explainable in just one sentence and is spelled a number of different ways (the spelling used here was that of one of the symposium participants).

There was a fear of gossip which far transcends what would seem to be the norm in mainstream North American society. According to participants, "Lokeen Kee Kehan Gay"
is used by parents to justify limitations placed on children, meeting of family obligations, staying within abusive relationships, arrangement of marriages, refusal of permission for mixed marriages, dress, and so on. "Lokeen Kee Kehan Gay" permeates the very fabric of the community and is a factor inherent in any attempts to strike a balance between Indo-Canadian values and customs and those of the mainstream culture.

Participants of the symposiums discussed how "Lokeen Kee Kehan Gay" is used as a tool in controlling children's behaviour. It is used as a kind of "third party control," a way to say something and a way to induce guilt. It can control the whole family life, especially for the women. Family honour or "izzat" is at stake when there is gossip about anyone in your family, but especially if it is about the women. Daughters' reputations reflect on the whole family. Parents may gossip about other people's children, but when there is a problem within the family, they want it to be kept in the family. No one should talk about problems outside the family. No one should disrespect the parents by talking outside the family. This profoundly influences the way that problems within families are solved (or not solved) as we shall see.

One person raised in a small community where the Indo-Canadian group was very small explained how a community where everyone knows everyone else can also act as a kind of social safety net, where the fact that the neighbours can observe what is going on serves as a restraint, "because the neighbours are going to see, and your kid is everyone else's kid. Everyone kind of looks after each other. You still had some cultural control."
Daughters and Mothers Define Issues

Gender Issues: Parental/Societal Preference for Boys

Gender issues and the "double standard" were identified as problematic by all of the symposium participants and the daughters interviewed and in fact, was considered to be the source of most problems or conflicts that they encounter. Gender issues start with the birth of children and even before birth. Participants who were female noted that in their South Asian culture, there has traditionally been a decided preference for sons. They are treasured and considered to be important for reasons of continuation of the family name, the expectation that sons will look after their parents in the parents' old age, inheritance of property, and the receipt of economic value if marrying through the dowry system. Males are eventually given the authority as head of the family and are expected to be the main provider and decision maker. One woman complained, and others agreed, at one of the symposiums when a mother is pregnant, people come up to her and say, "I hope it is a boy." The woman can't even feel happy about being pregnant because she is worrying if it is a girl. We get a sense of insecurity through statements made by parents and grandparents, especially when a pregnant woman is told, "I hope you have a boy."

Female participants were voluble about how in their experience, gender differences start from birth and affects girls from birth. Many of them told me that "in our culture, if a woman has a girl, it is not a cause for celebration." One woman said she tried to overcome this attitude in her family, but older people in the family kept pushing it. When a boy is born, there are celebrations and much happiness. "Ladoos", a special sweet is given out to friends and family (much like cigars are given out in North America) when babies are born, usually when it is a boy. It is usually not done for girls, but if it is, it is only done for the first girl, not
for the second or third. One person commented that the birth of a girl is seen as a tragedy in
the eyes of many in the community

It's like mourning. If a family has more than one girl, they condole you. If you
have a girl, it's ok if you already have a boy.

Another mother noted

Oh, there's never celebrations when daughters are born. Very rarely. The
only celebration that happened was in my house. My brother had a son and a
daughter and the daughter was very much celebrated. But that comes from
years and years and years of having just sons. That was their first
granddaughter. I come from a family that has only sons. But my mother-in-
law isn't happy when daughters are born. My sister-in-law who comes from a
very wealthy family, when her son's first baby was a girl, and nothing. They
didn't even tell anybody. This was the first grandchild. And then when the
second, the son was born it was like, oh God you know, son's come and the
son that. So there is a difference and I don't think it matters if you're rich or
poor.

One participant (a mother herself) was very bitter over the behaviour of her mother.

She used to say to us, well she had been mistreated by my father's family
because she didn't have a son and I was young and I thought, oh well, you
know, I'll try and prove to my mom that I will be able to do more for her than
the son or the daughter-in-law could ever have done. I would provide all the
things that her son could have provided and I look back and think, I've done
everything I could have done and there's nothing I've done that has made her
happy, nothing.

My youngest sister who was born in Canada, never did have any close
connection or feeling to my mother because when she was born, I remember,
she was three days old before my mother finally picked her up because she just
rejected her. She was the third girl born in the family and I remember when
my mother was expecting her at that time, this is say early 60's, a lot of Indian
families, whenever a boy was born they still really went out and celebrated a
lot and my aunt had a son and a second one had a son and they had parties and
my mother saying to my father, 'Well, when our child is born, we're going to
have a party. When she had a girl, none of the celebration happened and she
went into a depression and she never recovered from it. I remember, any time
we bought something good for the baby, she would always say, 'Well, we
don't have to spend so much' and so then when I went out to work, and
because I knew how much I had been deprived of, I wanted to live that through my eyes by seeing my baby sister being provided for and taken care of. So now, here she is, and she would rather not even see her.

The same woman went on to tell me how her mother treated her granddaughters without any affection, while playing favourite with the grandsons. When her sister's first daughter was born, her mother cried for days and so when her sister was expecting the second one, she told the family that if it was another girl, not to bother bringing her mother to the hospital. Additionally, the sister was having a rough pregnancy and wanted only to see if she could have a healthy child, because the oldest one had a lot of problems, and had been a very premature baby.

So she, it was quite a risk for my sister to try and conceive and see if she could have another child and she did, so she said "All I want is a healthy baby. I don't care what it is, because if it's a girl, don't bring Mom to the hospital. I don't want to see her." And so, I mean, gee, you can't even look forward to having a child because your Mom is going to sit there and cry. So it's really hard and I don't have to talk to my youngest daughter to protect her from the culture, because she is smart enough to see these things.

In the participants' opinion, her mother also did everything in her power to prevent her from getting her education while they were still in India. The university educated father was supportive of educating his daughters. He was in Canada working and would send money home to the family, including enough money for Mrs. Siddhu's school fees. Her mother would spend the money on her brothers because they were boys. She ended up leaving school at grade eight as the fees were not paid by her mother. Later, when they were in Canada, her mother "married her off" by going to India and choosing a man for her who she didn't meet before arranging the marriage.
Another participant, when asked about the preference of boys to girls, felt that while it may become less a focus, the issue would always be there.

That will always stay. I don't think that's going to go. I don't know. It's something inbred in Indians, and it doesn't seem to leave us somehow. Not having a son. But it is changing. Even in very traditional families, as long as a family has one son, it doesn't matter if there are daughters later.

Daughters who have attended school in Canada, and some women who identified themselves as working in a professional capacity, have become familiar with differences in how daughters are valued in some other cultures, and specifically Euro-Canadian. While Euro-Canadians also value the birth of sons, the birth of daughters is usually a happy occasion as well. As a result, they are starting to question their own Indo-Canadian parents now and will sometimes ask their mothers what they did when they were born and did they give out "Ladoos" or celebrate, did people come to see them, did they have a shower for her, and that kind of thing. Some of the girls stated that they are really put off by the fact that nothing was done and are becoming rather outspoken about it. Several girls attending the symposiums said that they would do things differently and that if they have daughters, they are going to see that they are treated equally.

As the daughters explained during the symposiums and the interviews, boys are often spoiled, given privileges and freedoms that the girls do not get. Gender training is started very young beginning with selection of toys. Girls get domestic toys and boys get masculine things such as cars (in some ways not unlike non-Indian families). Girls learn to do domestic tasks very early while boys are not so encouraged. If boys do help their mothers or sisters, often someone, i.e. extended family, grandparents, in-laws will say something to them, "how
come you are doing that, why did your sister (or mother) make you do that?" According to symposium participants, boys often state they want sisters, so the sisters can do all the work in the house. The female participants expressed their annoyance with this expectation.

There was strong support among the women participants that the time has come to encourage change through education and through women making efforts to support each other. Their efforts to strike a balance is evidenced by this move to mutual support networks such as women's groups and through attending symposiums and forums to discuss issues and solutions. It should be noted here though, that the participants attending the symposiums considered that the problems they encounter have more to do with those members of the community who do not recognize their concerns and do not interest themselves in change.

Gender Issues: The Double Standard

A common complaint among both daughters interviewed and those participating in the symposiums was the double standard that exists in the Indo-Canadian community for girls. The double standard is seen as a problem by the girls and women, but not most males. Male participants in the symposium did not consider any gender issues as problematic, but several female participants, in both parent and adolescent groups felt it is the women and girls that have the problem which is as they noted, "why it's mostly girls and women who come to these symposiums."

Sons, noted several daughters and mothers, can pretty much do what they want, even go away for week-ends, "no one cares where he is". Girls are not allowed to have sleep-overs or to have anywhere near the freedom that boys have. This is a contentious issue for the girls because they want to "fit in" with their peers. Sleep-overs with same-sex friends are one of
the most popular forms of social get togethers between both younger children and adolescents in most peer groups, whether Indo-Canadian or other.

Parents feel pressured to give in to their children, but don't understand why it is so important for their children to go on sleep-overs with friends. As a rule, Indian parents feel very protective of their children and they don't really like their children being away from them somewhere that they don't know what is going on or where they can't protect them. It is because of this that they are not comfortable with such things as school trips such as camping and so on and are seldom willing for the children to participate. The children say that in order to get their parents to consent, they had to really work on them and "wear them down."

Sexism is a big problem. Parents don't treat girls equally with boys. Girls can't go to a movie at night, although boys can. I can't get them to understand that I can get into trouble just as easy in the daytime as at night.

There is a double standard where dating is concerned. Girls can't go out, but their brothers can.

There are big gender issues about dating. There is a double standard. Boys can do just about anything but girls can't. For instance, if our brothers want to go out, they just go and they don't even need permission. They don't have curfews like girls and they can date, usually white girls, and no one says anything to them. If we even want to go somewhere with our friends, we get the "twenty questions".

As noted earlier, much of the honour of the family is considered to rest with the behaviour of the women in the family. Girls have to maintain a spotless reputation and their virginity. They are not allowed to get involved in many outside activities, not so much because the parents would disapprove, but because of their fear of "Lokeen Kee Kehan Gay, What the community will think", of what will be said in the community if the daughter is
seen doing certain activities, such as talking to a boy, shopping at the mall alone or with non-Indian friends. "If you don't have a good reputation, why live?" This statement was made to illustrate the expectations of one girl's family and the girl's feeling that life literally wouldn't be worth living if her reputation were smeared, primarily because of her family's caste and the importance of the family reputation.

I think that is what sparks tensions between the parent and the child, especially the parent and the daughters, because you know, everyone gets "twenty questions" before they go out; they put so much pressure on the girl, "you carry the family respect, you shouldn't be doing that." Parents are more concerned about what others are thinking, "Everyone's looking at you" and you try to tell your parent it doesn't matter what other people are thinking, but it does.

Gossip gets changed around, and often people seeing a girl talking to someone she shouldn't, will phone the parents

So, if someone sees you in the Mall or with friends?
With guys?

Yeah.
Right away. "Oh, she has a boyfriend. She's doing this and that," and then they'll be around like.

Will people phone your parents?
Oh, people will for sure, Yeah. This is bad. It's hard. Say you see someone from school in the Mall right? Obviously you're going to say hi. It's so rude if you don't say hi. But if someone's there, you can't. They just know you can't. You just look at them and run or something.

So, you tell them ahead of time that this might happen?
Well, we just tell them "Well, there's East Indians here, gotta go, can't talk," or something. And rush away.

Sometimes, brothers and other male relatives such as cousins consider it their responsibility to guard the reputations of the girls in the family. One sixteen year old put it this way when
questioned.

What happens if your friends want to go out and you're not allowed to go out?
Well, like they usually have a reason, mine are strict, but not to a point that you can't go out, you know? They usually have a reason for saying it, you know, like they won't want me to go certain places, because if someone sees me, it's going to look bad. And then you know, reputation-wise and stuff.

Because, like, I'm a girl, so that's kind of different. My brothers, the guys are freer. If it's for me, like I can't, it's not as easy, but I don't really fight them any more, cause I always know what they mean. We have to have a good reputation or people are gonna start talking about "Oh, that's a bad girl." You know, it's that arranged marriage thing, so you can't, it's gonna be hard to find a husband, and like, you just gotta be good, you just gotta be good.

Gurdit's mother agreed and noted that it was very important for her daughter to keep her reputation. Her son and his cousins "look out" for Gurdit, and as Gurdit noted, while she can not have boyfriends, she can be out with her brother and her cousins. However, dating for her, as with all the girls interviewed, is absolutely out of the question. It is okay to talk to boys if there is a need to discuss homework or school projects. Boys would not be allowed to call or come to the home. If a boy shows any interest in her, Gurdit's brother and cousins would put a stop to it. When I asked Gurdit whether she had a boyfriend she said

No, it's too much trouble. If I was found out with a boy, that's it for me, just it. That's one of the worst things you can do, right? My brother's older too, he finds things out easily, because he and his friends are always out, someone always sees you somewhere, so, it's like someone always spys out. If he finds out, he'll, him and his friends, they're just huge right? There's a whole crew of them and so, even the brothers are so over protective of their sisters, like if the brothers, if any of them see any of the sisters with any guys, like the guys are dead, like that's it you know.

So, older brothers, most East Indian families, the older brothers they're overly protective too. My cousins, everyone, and all his friends, and my brother. It's so annoying, 'cause if someone spots you somewhere, "Oh, your sister's there"
or whatever and they will come and be like, "Go Home" and start yelling. It's like, "Okay," and so we also hide out from them. We're always hiding and its kind of hard in a way. It's crazy.

They don't understand either, like I'll try to explain to them, even my friends say, "Why don't you just leave her alone." There was this one guy that liked me, and my brother found out. There was nothing going on, but they just went crazy on him. They were gonna kill him, and then, I jumped in the middle to stop it. My cousin said, "if it was my sister, I love her, I love her, don't touch her, she's like my sister." He was going crazy, I don't know, it's just like, kind of hard.

Parents often tell their children that they are protective because they love them and they don't want them to get hurt, that they have more experience than their children and they know what to watch out for. "They just don't want you to get in any traps and ruin your whole life. My parents are even protective with the boys, but not as much. Like with me, they do actually say, 'Sita, you are a girl. You have to be more careful' But it varies from family to family."

The double standard is evidenced in other ways. While some families see education as an equivalent to a dowry, it is considered by some families to be wasted on girls. In some of these families, the girl is only considered a visitor in the family and not really theirs, until she gets married, at which time she then belongs to the other family. Men and boys are not expected to do housework, cooking, or child care. Fathers do not participate as much in child rearing, but are the final authority on most matters. Until recently, no one questioned this. If a father does help with the children; for instance, if he goes on an outing with them, he may, and often does according to the participants, experience peer pressure and harassment from his friends about doing women's work.
Several participants stated that the wife has the responsibility for raising the children but if anything goes wrong, she is blamed. This partly explains the reluctance of many mothers to be more lenient with their children, especially their daughters.

Even though my in-laws are living separate and a long way from here, still they have a yes or no in everything. So if my daughter asks to go to a friend's house, they always say no. And then I have to say no. Because if I say yes, then I will be in trouble. And then, I don't want to take the blame, because if anything goes wrong, that's a fear. Because if she'll go out with friends, and they might go out with boys as well, and then the fear that she might get pregnant and things like that. This was the biggest fear that we never explained to her.

Some of the women who are parents as well as some who were not, are determined to change the way that gender issues are handled, for instance the way girls are treated. They would like to protect their daughters from it within the context of how they see positive changes to be made but they find because there is so much pressure from their society to maintain the way things are, that it is next to impossible. They do want to keep pressing for change though, and they suggest that women should support each other to be stronger, to stop feeding into the double standard, to say they won't put up with these things any more. The younger women who were interviewed, the daughters, intended to teach their daughters to question the gender inequalities, "It's going to start with our generation."

One woman maintained that the inequities and the arranged marriage ruined her life. She has refused to maintain many of the traditional ethno-cultural customs and furthermore, she stands up for her daughters by "protecting them from the culture."

This is not the case for most of the women that I interviewed. They want to maintain the good things about the culture, but help to move the community along to more liberal ways of
doing things. This may prove to be a slow process, since there seems to be an element of fundamentalism within the larger community. A number of persons have noted that their families are more traditional now than ten years ago. Others noted that in India, at least in the urban areas, things are more progressive with dating and common law marriages being more prevalent, while in the villages things haven't changed much at all. A common complaint of the young people is that their parents are in a "time warp" or "frozen in time", meaning that they are maintaining practices and values the way things were done in India when they left, while in India, it is changing.

The other problem that kids here face is that the culture we have here stopped growing when our parents migrated here. So they're stuck in the culture that they left, the 70s. So those are the standards they have, the morals and values that our parents left, that's sort of what they imparted on us. But if you go back to India, it's changing.

But if you go into the villages where many of the parents were from, like the farming communities, it's still very much the same. Girls are not seen with boys. They're only with their male relatives. And it's just not done, to be seen with somebody from outside your family. Your wedding is arranged. You don't need to date because you've got the social network happening. It's all set up for you.

While some of the Indian customs such as arranged marriage are different from mainstream North American norms, many of the very issues like the double standard these people cited as problematic are similar to what we commonly experienced a number of years or generations ago and still do to some extent.

**Gender Issues: Relationships, Friends, Dating**

As with most adolescents of any culture, having friends and doing things with them was important to all of the girls at the symposium as well as the participants who were
interviewed. They defined the attributes that parents wanted friends to have: the friend ideally should be of the same culture, caste and religion. Indo-Canadian friends are considered by many parents to be preferable to white friends. When friends are brought home, there are often certain expectations from the parents. They want to know the family history of the friend, where the family comes from, what town in India their family is from, and so on. "Even if the person is an 'A' student, the nicest person, doesn't matter, you have to establish yourself."

When friends who are not Indian are brought home they are expected to go and greet the parents. But if the friends are not dressed properly, parents may judge them by that, regardless of who they are. If an Indo-Canadian girl has cut hair, make-up and maybe jeans or a short skirt, parents may make the assumption that the girl is "bad", whereas if she wears the Punjabi "suit" she must be a good girl. Participants noted that parents often make assumptions based on appearance. As one person complained,

> Even before they meet our friends, they automatically assume they are bad. My uncle, we were driving down ---- Street, and he saw a bunch of guys standing there, with cell phones and he says, "Oh, well, they're into drugs" And I just looked at him and I said, "Well, how do you know, have you seen them doing drugs?" and he said, "No, they're talking on cell phones."

In one family, when the son brought his male friends home, the daughter had to go upstairs and remain there until the friends left. Boys are often allowed to have friends who are female, but girls cannot have friends who are boys.

Most of the girls who were interviewed and the participants of the symposia had a mix of friends who were Indo-Canadian and non-Indo-Canadian. They usually had close school friends from both groups when they were younger, but tend to move more towards Indo-
Canadian friends as they get older, mainly because they begin to see their similarities. As well:

When you are younger you don't really face racism or prejudice or anything like that from white kids because I really think they learn it at home. So in the elementary school level we didn't really care what colour people were. I remember, for picture day I would wear my ethnic outfit and my white girlfriends would be just like, "Oh, Wow," so it was always a very positive experience to be different and they would want the clothes for themselves. And I'd go to their birthday parties and stuff. So it was very Western but with ethnicity kind of thrown in there.

And you were allowed to be an individual at that time, whereas when you get to the high school level, everyone's got to conform. Education was really important in our house, and I noticed that my friends were changing. My white friends. They were into boys, they were into make-up, they were into drinking. And those were things I didn't like and, I don't know how my parents did it but our traditional values, religion, were being fully ingrained into us. They didn't really force anything. We just never wanted to be like them.

In the opinion of the participants, some Indo-Canadian girls have parents who are so strict that they are not allowed to do anything. For instance, they noted that quite a few of them wanted to attend the parent and youth symposia but were not allowed. It was pointed out that this type of activity is viewed by many families (especially parents and grandparents) in the Indo-Canadian community as "parent-bashing or home-wrecking sessions" especially since talking to outsiders about family problems is taboo. They refuse to attend and do not allow their children to attend. Women's organizations such as the Indo-Canadian Women's Group and some of the women who work in it are seen by some members of the community as "exploiting women's minds and as home-wreckers." One woman who works counselling families explained:
Because they think we encourage the children not to listen to their parents. And when we try to explain to them the perspective of the children, how they feel, what their environment is at school, this is what they want to do, and when you explain this they don't want to hear this. They think that we are on their (the adolescent's) side. That we are biased.

Some girls with strict parents work out ways to get around the restrictions, either through negotiation, persistence or sometimes through deceiving them. For instance, some adolescent girls often have two sets of clothes, the ones that they wear to school and the set in the school locker. They wear the clothes their parents want them to wear to school and then change at school into clothes which they deem to be fashionable and acceptable by their peers, such as mini skirts. They also keep make-up in their lockers. These teens are known among themselves and their peers as "transformers". Some of these girls who have very strict parents will skip classes to go and socialize with their friends because parents never give them any time to be with friends. In the opinion of one of the informants, these adolescents would rather be with the friends than have the education. It was interesting that most of the daughters I interviewed, most of whom were in their mid twenties, felt that most of this kind of activity was happening around the time girls were in Grade 8 and Grade 9. As they grew older, some of them were able to work around the restrictions so that they had a workable compromise, and "the older we get the more freedom we get." All of them said that such things as dating and going out was unacceptable to their parents, and in fact, some of the girls were not really interested in boys, especially now that they are a little older. Others said that there really is a lot of dating going on, especially in the more urban areas. They feel strongly that there should be more opportunities to be open with their parents and would like the opportunity for more freedom. While they didn't want to be sneaking around
going out behind their parents, in some situations it was worth taking the risk in order to be with friends.

One daughter who is also working in the school system said that when she was growing up in a small community, dating would not have been accepted even within her own peer group. In more urban areas, parents have a tougher situation, because dating in some areas has become accepted, at least by some of the adolescents themselves and their peers.

Whereas we would have been branded by our peers as a bad girl. Nobody would talk to you. You'd be ostracized. Whereas in the Lower Mainland, you've got the cool Indo-Canadian kids and then you've got the geek Indo-Canadian kids who are like the brainy acts. And every one wants to be cool, right? As a teacher I see it. The worst part is their parents don't know. And I know and it's sort of like I'm part of the conspiracy now. It's not my place to tell their parents. But being raised the way I am, I want to shake them and say "What are you doing, you should be concentrating on school and grades and not worrying about guys and boyfriends and all that stuff."

And if they get into trouble, they don't really have a place to go. That's the biggest danger I see. OK, you want to date, OK fine, but if something goes wrong, who are you going to turn to. Sometimes they can turn to their friends but their friends don't know any better either.

So they really need to have Indo-Canadian youth workers that they can trust. Trust is a big factor. That they're not going to go to their parents or they're not going to talk about them in the larger community, "Oh, so and so's daughter is doing this. So and so's daughter had an abortion. So and so's daughter was on drugs." And those issues that they are facing are one that all children in the West face.

Girls and young women recognize that they are taking significant chances if they date. Often parents have been reluctant or have refused to allow their children to receive education related to birth control, sexually transmitted diseases and drugs. If the girls do date, they run the risk of getting into situations for which they are not prepared and often the consequences
can be severe. In one forum the girls spoke openly.

Dating is going on among the girls. The majority of high school kids are not allowed to date openly and many are dating without the support of their parents. We just do it but we'd rather not have to do it behind our parents' backs.

Then often what happens is "sexual blackmail". The boys they are going out with say they will tell the girl's parents if they don't have sex with them. Also there is the problem of date rape. Girls want the information about date rape, birth control, and how to look after themselves.

They often don't have access to needed health and resource information and they usually don't have counsellors who understand the culture; therefore they are unable to access help which takes into consideration the implications of the culture, the community and the effect that these have on seeking solutions.

As noted earlier, dating for girls in the Indo-Canadian culture is essentially out of the question in most families. According to participants, because of the maintenance of traditional cultural values, this is often true even when parents are second generation Canadians. Dating, if it were permitted, should only have the purpose of getting to know a prospective husband. If the intent is not marriage, it is rarely permitted and parents don't understand why adolescents want to do it when they're not even of marriageable age.

They believe in it more for when you're older and you are ready to get married. Then, like my dad would think like a few dates is more than enough to get to know someone. And he doesn't like this dating for a year and then you decide you don't like each other. Or we don't think it is going to work. Then he'd be "Oh, my God, I'm so embarrassed, you were seeing this guy for a year and now you are not going to marry him? For my Dad, that's the biggest thing, is the community and "what will people think?" Like other Indian parents they say, "Oh, their daughter goes out too much." Like for him it's more what other people in the community will think. Their biggest concern is actually marriage. And they are concerned that if people talk about the girl,
the family of a nice man may think that the girl has had a boyfriend, that she
was too free or dated too much or something. So their concern is that you
wouldn't land a good person.

These young women who were interviewed were for the most part, in their mid-twenties,
and were in some respects, against dating or at least, were accepting of the fact that "in our
culture" it was not appropriate for them. As for finding a life partner, they not only accepted
that their parents would have some say in the matter, but they appreciated that they would
have some help from them in finding a suitable partner to marry. Two women said that, now
that they are older, and the "clock is ticking", and they are moving beyond marriageable age,
their parents are telling them that they are open to their finding partners on their own,
provided they are of the same culture and of suitable background.

*Do you date now?*
No, I don't date now. Neither my sister or I have ever really had any
inclination. I think if we were to date it would be with the intention of getting
married. And then the date sort of idea that we have is very different. Like it
would never lead to premarital sex, never. It would be more of like, OK,
you're getting to know each other. And our parents have given us this
permission. Which is really cool of them that once we became of marriageable
age, once we were finished with school, they were like, OK, If you find
somebody on your own, great, because that'll take the pressure off our head
trying to find somebody for you.

Parents strongly expressed the wish and hope that their children would marry someone
from their own culture. The girls and young women themselves said that they believe that it
will be much easier to marry someone from their own culture, although they are not willing to
marry anyone raised in India. They would like to marry a person who has grown up in the
Western or Canadian culture, because they want someone who is interested in keeping their
culture, yet also someone who is used to the way of life here.
Both parents and the girls and young women acknowledged that there is a lack of understanding among many Indo-Canadian parents about what dating is. Many parents think that dating means that there is a sexual relationship involved. "They don't understand about the need for friendships either, with other girls or with boys from school who are just friends." A clear message was that youth have to appreciate that parents come from a background where there is no concept of dating. "Parents have to learn what dating is. Dating has to be defined clearly within the family as to exactly what it is. Families need to talk about it and get it clear."

**Gender Issues: Marriage and Dowry**

Almost all of the daughters interviewed as well as those at the symposiums expected to participate in some form of marriage arrangement. Parents also had expectations that their children would have arranged marriages. For the most part, they expected that the marriage would happen when the daughters were ready. Introduced marriages are becoming a more common way of arranging a marriage in Canada. In introduced marriages, individuals are introduced to each other and given time to get to know each other, "It's almost like blind dates now, where the parents are doing the matchmaking, the introduction. And then the kids take it from there." They usually have the option to refuse if they feel it is not a suitable person. A suitable person might be one who has the proper family background, education, a good job, social status, the same caste, and is of the same culture. Some of the girls indicated that they would consider marrying someone of their family's choice because it would keep the peace in the family, or because it would make their parents happy. One even stated that she was perhaps willing to forgo her own happiness in order not to disappoint her father, another
said she would probably give in to the social pressure to marry within the culture, because it was too hard to cut the family and community ties. Overall, they preferred to marry a boy of their own culture because they felt that it would make their lives a lot easier, and it would also be less problematic within the community. A boy of their own culture would likely understand the language and the cultural expectations in a way that a non-Indian could not.

At the same time, the girls noted that because a lot of boys are dating and sometimes marrying girls who are not Indo-Canadian, they are unavailable to marry Indo-Canadian girls. Unanimously, girls and young women said that they would not want a husband who was brought over from India, because they have no understanding of the culture here and adjustment would be difficult. They also felt that the men from India are too authoritarian and would never cope with the level of freedom the Canada-born women have.

The problem that you're stuck with is that you end up with two kinds of people. For guys, anyway. You end up with those who are very Western and I don't like that. What's the point of that? I could marry a white person then if I wanted somebody that Western. I want somebody who has the same values and principles. The other kind of person you find is the fundamental fanatic, who is going to tell me to cover my head and do this and do that type of thing. It is really hard to find the middle ground person who is what I am. Because often, the middle ground guys, their mothers will send them to India and they get married to somebody there because they can basically take their pick. And the women are much more capable of adapting to different environments than men are. So for me going to India and getting a guy, he's going to have a really tough time adapting to society here and the way women are here.

As noted earlier, some young men and women, once they are older (over 21) are given some freedom to find their own mates. Their lack of dating skills puts them at risk of making a mistake and often, they will still turn to their parents to facilitate a match with someone suitable within the community.
Some families still practice the giving and receiving of dowries. In Canada, it varies considerably and like many non-Indian families, often the cost of a big wedding for a couple and helping them with the purchase of furniture may be considered all the obligation a family has toward their daughter. Other families educate their daughters and consider that the education is a life long advantage which of itself will bring benefits to the couple. Some parents who purchase homes for their daughters ensure that it is kept in her name, rather than going to the groom's family. Lastly, while some families often provide their daughters with gold jewelry and other smaller things, and others still expect a substantial dowry, now there are some families do not give nor expect to receive a dowry.

Most families, according to the participants, would still prefer that their children marry someone who is from their own culture. In some respects it is easier in that the person is more accepted in the community. Many families consider it embarrassing and somewhat of a disgrace if their children marry out of the culture but there is sometimes reluctant acceptance of it, particularly if a son or daughter is getting beyond marriageable age. As one person put it, "They are probably just glad to get them married off." A number of boys are marrying out of the culture, but it is quite difficult for their wives to cope with a community where they don't understand the language or the customs. As a result, participants stated that often these marriages flounder:

*Have you found that the community eventually accepts non-Indian wives and husbands?*

Very seldom. And very slowly. It will take a long time to make them understand that this is OK. I think mainly because of the language and because if you can't communicate. Then we are all laughing and you're just sitting and wondering. I always think it's for both sides difficult. Because you're wondering maybe they are talking about you or making fun of you or
whatever. And also it is hard for that person to understand our culture and when you communicate in a different language you interpret things differently.

Girls who are finding the selection of suitable mates within the community difficult, say that they do not feel very sympathetic to non-Indian wives, because they are taking potential mates out of circulation. When they see Indo-Canadian boys dating non-Indian girls they feel quite frustrated.

And it bugs me when I see suitable Indian guys that you think, "Oh this guy is a perfect looking guy, I'd like to marry him. And they have Caucasian girlfriends. Or they are involved in drugs. A lot of them are.

And then, a lot of them don't want an independent woman. They have been treated like kings by our parents all their lives, and they are really spoiled. Our parents cater to their every need. So when it comes to marriage, they'd rather get this submissive type from India. They can have their pick, and the families in India give big dowries so their daughters can have a better life in Canada. And the girls from India are accommodating, they go along with everything their husband says. So the families, they can import them in and all the good guys are caught. They already have someone. And they find someone on their own, and it's like, shucks, there's a good catch but I missed out.

But when they do marry white women, its tough for her because she can't please the mother-in-law, she can't please the family, they basically want the son to break up with her. That's their whole purpose in life, to separate the two so they can remarry the son to a nice little Indo-Canadian person. And so it's very hard for her. Because she's not being accepted by the family and family is so important. And they're really racist. We can be really really racist. So it's really tough. They usually crack. And the bad part of it if, you'll be high-fiving it, "Yeah, she's out of here." Because she's taken one of our guys type of thing. Like, hey, there are so many guys out there for them, leave ours to ourselves. So why should we make it easy for her?

And they don't realize, you don't marry the guy in our culture. You marry the whole family.

Marrying out of the culture for girls has mixed results. Everyone I interviewed was able to
speak of situations where the family has totally ostracised a daughter for marrying out of the culture. One young woman told me that her father would be devastated if she married out of the culture and that she thought he would have a heart attack due to embarrassment because he wouldn't be able to show his face in the community. This daughter has dated boys who are not Indo-Canadian, but she says that she knows it won't go anywhere, because she is not prepared to go against her family. Two participant daughters said that while their parents were hoping that they will marry within the culture, they would reluctantly accept a person from outside the culture.

One informant explained why marriage out of the culture would be so devastating for families, and especially parents. The parents feel that they have failed in properly preparing and training their children.

Participants have described how, in seeking a balance between the traditional framework for marriage and the demands of children to have some say, families often make a compromise. Daughters, because they recognize the advantages of marrying within their culture and the disadvantages of marrying outside the culture, are more often than not prepared to meet the requirement, provided they are given some choices and input into the selection of a husband. Some families, on the other hand, see the advantages of compromise and thus, ensuring that their children marry within the culture.

**Strategies and Approaches to Living With the Issues**

**Learning Boundaries**

-Boundaries for girls are set or developed by and within the community as well as the family. Fear of gossip and "Lokeen Kee Kehan Gay" influences how many families set their
boundaries and make decisions. The girls and parents interviewed were very conscious of this and it often came out in terms of statements parents made to their daughters like, "It would be OK with me, but what would people think if I let you...".

While one parent of a sixteen year old daughter and nineteen year old son said she consciously spent time teaching her daughter about her culture and boundaries from the time she was a baby.

When she was a baby, when she was two, many times when I had her in the bed with me, I always tell my culture things and I said what I want. I ask her one time, she said, "Mom, you already explained". If they don't understand, they will never comply. Because I care about her. When she wants to do something and I don't want, I never say so. I tell her my expectation, what is right and wrong. But I tell her, "It's your decision, you know what is right." She mostly doesn't choose it then.

Her daughter felt that her parents were strict, but not unfairly so. She understood that there was concern for her reputation.

Well, like they (parents) usually have a reason, like mine are strict, but not to a point that you can't go out, you know. They usually have a reason for saying it you know, like they won't want me to go certain places, because if someone sees me, it's going to look bad. And then, you know, reputation wise and stuff. Because I'm a girl, so that's kind of different from my brother, he is older and they're not so strict with him. The guys are freer. For me, it's not as easy, but I don't really fight them anymore, cause I always know what they mean.

With regard to actual boundaries, Gurdit gave me some examples of the kinds of expectations she has to respect.

I can talk to boys at school if it is to do with a school project or something to do at school. But I'm not supposed to be going around, like messing around with them and stuff. I'm not supposed to be going out with them and I can't really have them call my house and stuff unless it's for a reason, you know.

I shouldn't be wearing things full or revealing, this is told. I think this is just
respect for myself too. I don't want to do that kind of stuff around them. And like, I shouldn't pile on make-up. It's okay if I wear lipstick. You know, and other people might start talking too, like if I'm really dark, and stuff, like lipstick. They might start talking so I can't wear it too dark and then I would ask.

Regarding going out with friends

It depends. It depends where I'm going. If I'm at someone's house, then it's okay. But if I'm out, I can't go out late. I can't be out somewhere at one in the morning. I have to be sitting at someone's house or something. Someone my parents know. And they don't like me to go sleep over at someone's house unless they know who they are. Mostly only my close friends. I can go shopping, but only with girlfriends, I can't go hang out with guys. And it's because of my reputation. They don't want my reputation to go bad. As long as my reputation's fine, it's good. But I just have to watch myself.

Some of her friends have different rules. Some of them have a little more freedom, such as talking on the phone with boys, but not going out. Others' parents are very strict. When asked about what happens when rules and boundaries are not followed, she said

Well, you can't really not go by them. Cause like, ____ got sent to India. It depends, like some of them kind of like, sometimes those would be in trouble for it. Like sometimes they say come home by this time and they'll come home later and they'll just get in trouble. They just get yelled at or maybe grounded. They'll just get into trouble like that. I don't get hit or anything. Lately, no one gets hit anymore. That was when they were smaller.

When asked how disagreements about boundaries were resolved, she said that they often started out by yelling and then, after a while, her mother would back off and leave her to think about it herself, and then she would usually comply. After a while, well, just, um, I dunno, it's just kind of like, well, my mom is smart right? (laugh) She'll just be like, she has this way, like you feel guilty. She's just smart, she just says, "Okay, I'm just telling you what's good for you, it's up to you, I'm just trying to help you." She's smart, so, you just, so then I feel bad and I go like, "Okay, fine, whatever".

Gurdit was very conscious of the need to accept that Indo-Canadian parents are being strict because of the girls' reputation. In terms of differences that she saw compared to her
non-Indian friends, she said

You know, women's rights, everything's equal, it's not like that for sure, like we have to do the cooking, we have to do the cleaning, if we want to get married, we have to have a good reputation or people are gonna start talking about "Oh, that's a bad girl". You know, that arranged marriage thing, so you can't like, it's gonna be hard for you to find a husband.

Most participants said that they learned through a process of assimilation. They heard what others were allowed to do, and they learned by what they were allowed to do. They also learned through what was being said in the community and what their parents were saying. When they heard discussion about other families and censure about behaviour, they understood that the behaviour was unacceptable to people in the community. Their standards of behaviour were developed through construction of a framework of acceptable behaviour based on their culture, community censure, respect and negotiation.

In terms of Authoritarianism, several participants said that they thought that it was the men who were the ones most likely to be more controlling. Mothers are somewhat more lenient.

Mothers, I find, mothers are a little bit more understanding. It's like in Indian culture as in most cultures. I don't know, I think it's the men who seem to be more controlling and have more concerns. Maybe because mothers have more of an emotional tie, because they're home more. I don't know why, they just seem to be more lenient.

It's hard, because even in elementary school, I don't know, I find that Indian parents are a lot more protective. And you know, if there's things even like going on sports trips out of town, they don't really like their children being away from them somewhere where they don't know what's going on. Like trips and stuff.

**Negotiating and Pushing Out Boundaries**

There were varied ways that families worked out boundaries and freedom. I asked parents about their own youth and how things were different for them in India. Interestingly,
one parent told me that in India she actually had a lot more freedom in India as a teen-ager than she could give her daughter here. She was allowed to walk or bike five or six miles home from school alone or with her friends. She was surprised that her in-laws and her husband were against the same kind of freedom for their daughter here, but explained that in India, in the villages and surrounding areas, everyone knows everyone else, and there wasn't the anxiety for safety that they feel here, "If someone does anything and that person disappears, we don't know who to blame."

When asked about how she and her husband set boundaries, she said that initially, they just kind of expected their daughter to know what was expected of her, as she herself had in India. The problem with this was that her daughter wouldn't accept "No" without a valid reason.

We weren't explaining or describing. If my daughter will ask me anything, we will just say no. We wouldn't explain why not. Because I thought she should know this by now. She should know these things and she doesn't know. That was one difference, and another difference is my family never stopped us from going anywhere to see our friends and going around. And at first I couldn't understand why my in-laws said no.

And when my daughter asked me, I thought, what could it really mean; I wanted to say yes, but I can't. And she feels really frustrated when she can't go out and then I feel upset. Because she discusses more open with me.

So how much freedom did you allow her?
Not much.

Not much?
Yes, it was difficult for her because she had to argue every time and she had to make her point every time why she wants to go. And she has to ask many times and then she has to explain and so you have to go through so many steps before you say yes and sometimes it takes two days to say yes or no.

Then after a year or two of going through this, or maybe it was less, then we
started discussing more, like she started to explain and she said "No, she had to have an answer". Actually, it depends on the child too, because if the child is not that persistent, either they'll run away because they're fed up with this behaviour or they'll stop asking. Or they'll do the things they want. So now we discuss more, and I explain why I say no, not just say no.

Often parents are not willing to discuss, because they don't know how to do this conversation and how to handle this. I know this because we go to talk to some families and they talk about their children because this is the main issue here in this country.

Daughters were resourceful in getting their parents to move on some restrictions. They used such techniques as "wearing them down," in essence they persist with their requests and insist on having a reason for a boundary or for the resistance to moving on it. They found, like many daughters in other cultures, that being the oldest had its problems and often the daughters following have an easier time with negotiating boundaries and freedom. Often after parents get used to their friends and activities, they ease up a bit. For instance, wearing make-up might be problematic for the oldest daughter, but for the second or third it is not even an issue. Girls and young women feel they have to keep trying to get through to parents and try to educate them about living in the Canadian culture. Maintaining trust with parents was important, since generally more freedom could be negotiated if they had the trust.

"Sucking up to your parents" had value if one had overstepped a curfew or if one was hoping to negotiate a special privilege such as permission to go to the Graduation Prom. Sneaking around was not a preferred activity, but some girls are dating and going out with friends. One activity involved in this is "hiding out", avoiding their brothers and relatives. A comment by one adolescent was that "a lot of girls go corrupt because their parents are so strict."
School activities often were cited as legitimate activities which could gain one more freedom. One girl managed to go to many school activities throughout high school because she was on the organizing committee for them.

Daughters had strategies and ideas they felt were important for adolescent girls to be aware of:

1. Open up a line of communication within the family.
2. There should be workshops in Punjabi so that parents who don't speak English can learn about parenting and how to manage the differences of living in Canada.
3. Keep trying to get through to parents. Tell them you don't want to go behind their backs - it's better if they don't have to hear about their kids from someone else.
4. Bring friends home and introduce them to your parents.
5. Re: how can we get our parents to treat girls and boys equally? Be patient. Be "goody two shoes" for now. Understand where your parents are coming from. When you are older, you can do more- so don't screw up now - let them see how you can handle the freedom you have now.

Much of their concern was about the fact that even in larger urban areas, there are so few resources for Indo-Canadian adolescents and parents. Particularly, they recognized that the physical and emotional consequences of being in constant conflict with parents affected everyone in the family. A number of the young women have been actively trying to teach their parents about the non-Indian community and have been emphasizing to them that they need to be aware of it. Some parents, as their daughters get older, start to ask their advice on certain things, including how to handle their younger daughters. One daughter told me that her parents ask her advice on many day to day things and had given her complete decision making on the decoration of their home. She advises them often in matters of
interpreting the Western culture to them and tells them that certain things they will have to come to accept.

A number of participants told me that communication with parents was difficult, if not impossible in some circumstances. One young woman noted, "It's really hard to communicate with parents. At a group thing I went to, a lot of my friends said they can talk about dating or other things to their mothers, but not to their fathers. We can't talk to our parents about a lot of things, i.e. dating. For sure, we can't talk to fathers about it, and a lot of times we can't talk to the mothers, either". Another said, "Parents need to learn about communicating with their kids. They think that communicating is telling us what to do. But sometimes, as we get older, they do come to us kids for advice. But they need to learn about their own racism, ethnocentricity, and genderism."

Parents who attended the symposiums and also two who were interviewed stated emphatically that parents needed to learn better ways to relate to their children. They were frank about discussing the difficulties in achieving change in some of the families though and supported the idea that this generation can begin to make small changes. Informants were all adamant that the family remains the most important thing and the family must be considered before anything else.

All of the participants had something specific to say about living in two cultures. The daughters found that dealing with their parents' lack of understanding about the life they lived away from home the most difficult thing of all,

I did feel like growing up over the years like you're stuck in between two cultures. And it's kind of difficult. So you go out there, to school or to work or where ever; you have your Canadian views and when you come home, it's
like, you have to be the little Indian girl. Making your parents try to understand and then learn about the things you want to do. I mean, going to the movies was a big deal.

I guess for us it seems like worse than for our white friends, it seems like everybody else has this freedom and we have to argue about this all the time and we never get what we want. But I think, in reality probably everybody goes through it. Maybe us just a little bit more.

One young woman questioned whether girls who are so sheltered and who never go out have the opportunity to learn social skills. She said, "Girls should have knowledge and social skills so they can function in both cultures."

Some parents want their children to wear their traditional clothes at least when they are not at school or work. While some do comply, others felt that they were more comfortable in their Western clothes and had experienced embarrassment going shopping in Punjabi clothes. One girl stated that in some respects, her reluctance to wear the clothes was a result of racial incidents that made her feel that she wasn't really proud to be Indian. She said she had, at one point wished that her parents were white so she wouldn't have to face these issues or the issues of gender inequality in the home, and she would be able to cut her hair. As she grew older, she found that working gave her some economic freedom and also, she got more respect from her parents. She has been making her own decisions about things such as clothes and hair, and finding that she feels more comfortable in her culture. She likes wearing her Indian clothes at times, and stated that there seems to be more acceptance generally. Where she previously experienced situations where racist prejudice occurred, she feels that non-Indian people are more educated now about Indo-Canadians and the Indo-Canadian community is also feeling more comfortable and confident to live their culture, rather than try
so hard to be Western.

Several participants mentioned that it was sometimes difficult for them when their friends invited them out to socials or night clubs. They were reluctant to say that they weren't allowed to go, although some did explain that in their culture it was not acceptable.

Where some families have adopted a very Western way of life, they find their children questioning their desire to adhere to Indian values such as marrying within the culture.

They raise their children a certain way, GORAFIED, (GORA means white)

So you raise your kids white because you're trying so hard to fit in, you're trying to be cool. Especially the upper class. The people who are really wealthy. It's a status to be white or to act white or whatever. But at the end of the line you want them to marry someone from your own culture. You want them to marry that way and yet they're not going to get along with someone from India or from the community because they didn't grow up like that. So that's when the crisis comes. The kids say their white friends are dating so they are going to too. And the crisis comes when they say, "Well, fine, I'm going to marry a white guy. What are you going to do about it, right?" And the mother had a nervous breakdown. That was really intense.

As the daughters move into their twenties they want more freedom. Some want to live on their own for a while before they commit themselves to marriage. Parents fear this because they worry about them being alone. And then, they are worried about the kinds of things the community will say about their daughters when it is known that they are living on their own, "Lokeen Kee Kehan Gay." As one woman said, "Always, my husband says this thing."

An observation that a number of interviewed participants and symposium participants made about some parents and grandparents was the difficulties related to their lack of knowledge of the mainstream culture and preconceptions or stereotypes of it. Examples given were the perception that all the white Canadians divorce so they're no good, that they don't
care about the families, and that Canadian women are more loose because they want to show off their bodies by wearing low necked clothes, having bare legs, and things like that.

**Negotiating and Working out Conflicts**

Often adolescents become frustrated trying to discuss or negotiate issues with their parents because the parents won't listen and say no without allowing any discussion or giving reasons for the refusal. It is because of this type of attitude "the closed mind" that some teenagers either give up or go behind their parents' backs. One woman with experience counselling agreed. Her approach in working with families is to advise both parties to listen to each other and hear where they are coming from. She reminds them that often neither side has any idea where the other is coming from or what they are going through. She also commented that in a lot of situations, there are differences in interpretation. The children, while they speak Punjabi, often are not able to interpret the true meanings of language and of the culture.

When I asked about conflict resolution and working out problems, participants generally agreed that because of "Lokeen Kee Kehan Gay", going to a community member or resource for assistance would seldom ever happen. They told me that families try to resolve the problem on their own. If it is really serious they will sometimes bring family in from long distances to help resolve the issue. Parents don't know how to deal with such things as a child who is using alcohol or drugs. They don't really know who to turn to and they try to keep everything internal to the family. They don't want word spreading out into the community that their child is doing these things.

It's just that they're so concerned about the community. That's so important to
be aware of. That's the first thing that will come to their minds. What the community will say. So, what if this thing leaks out. So then it's not honour for them. Not a right place in the society.

First they try to resolve within the family but it never gets resolved. Because, for example, so I'll ask my in-laws. They'll always take my husband's side. And if they'll go to my side of the family, then they will take my side. And then so they think they can resolve it but...

_by taking sides?_
Yes, not only necessarily by taking sides. Just because they are older and have more experience. But even though they have more experience they will obviously take his or her son's or daughter's side. So then they bring in other people, really close relatives who should be, or who they think might be neutral. And so they they'll do whatever they think is right.

_Are there key people in the Indo-Canadian community who could help a family?_
Usually it doesn't go outside the family, but people find out anyway. So they will only bring in the people they trust not to talk about them in the society if they know that he or she is a really wise and old person that he won't talk. In some cases maybe it does help and in others it doesn't. And depending on the person, for example, if it's myself and my husband, if we have conflict and we bring people in, then only if we are willing to listen to them or obey according to what they say. Or if we think we are right, then it doesn't get resolved.

Sometimes parents and their children can work out a compromise. As one girl put it, her father has already changed a lot since he immigrated. He is willing to compromise a little if she will. He says, "We'll move in a little bit and you have to too. You can't have like complete freedom the way Western people do. Face it, you are Indian, you can't"

Western counsellors are not considered to be helpful and are seldom consulted. In fact, counsellors are resorted to only when things have become totally out of hand since counselling is really a Western concept. They feel that Western counsellors don't know the culture and would provide a Western solution, not an Indian solution. One participant
worked at an agency where Indo-Canadians sometimes come for help. She said they only come when the situation is so severe that they really no longer have a choice.

The resolving of differences between parents and children can often be a compromise, something that both sides can live with. Some compromises vary as one girl mentioned. Her friend's parents bought her a car when she was at University. She accepted it along with the expected obedience to her parents. Her friends feel that it is a form of bribery.

When there is conflict between members of the family, it affects the entire family, not just the persons having the conflict. Tension was cited as common, with the stress of it causing long term problems within the family. In one situation where a daughter wanted to marry someone her family did not approve of, the situation went on for over four years, with tension building up and no real solution ever arrived at. Eventually, she decided that she had to make a decision, got married without her parents' permission, and has been happy but ostracized by her family ever since. She felt that there really was no other solution to the problem. She did work in a position where she was familiar with counselling and other support services, but realized that there could be no solution except one that came from her. In terms of resources, she had close friends that she could talk to, but they really didn't know what to do.

Most of the girls and young women said that they depended on their friends a lot to talk about problems but they would never want their families to find out. They said that they recognised the concerns that their parents had about gossip and did not want to upset them, yet they needed to have a safe place to talk about issues.

In some communities, women's groups are beginning to form. The goals of one such
group are to further cultural awareness and self-development through education and provision of resource information, and to enhance their presence as Canadian women while maintaining and enriching their Indian culture. Some activities of these groups are to address issues important to women, youth, and families including discussion of such things as parenting in the Canadian culture, dealing with gender inequalities and participating in activities related to the status of women. They are concerned about having resources available for families who are dealing with conflict, but they are battling with community perception, especially from males, that they are either just drinking tea, or out to cause disruption and "homewrecking" in families.

Families talked about health problems such as alcohol abuse and hypertension being related to stress and tension within families. One young woman felt that her father had started drinking more alcohol since her announcement that she intended to marry someone not approved by the family. More than one person cited alcohol abuse as a problem, particularly when the males of the family are under stress. Hypertension was cited numerous times. One participant said it was the biggest threat that parents hold over their kids, that if their kids are going off lying, doing something different, they'll get sick, they'll make themselves sick. And my God, you're so obligated to each other. There's sacrifice on both sides. Your parents have sacrificed their entire lives to raise you, that you feel in turn that you have to do the same thing, just to make them happy.

They get so stressed out that they end up getting sick. High blood pressure runs in our family and I totally think it's all stress related. Because they're so worried about their children. Like their life in our culture revolves around the happiness, the well-being of their child....One Aunt was so stressed out over her daughter getting married, her blood pressure was out of control.

The use of guilt was quite often mentioned by the young women and girls as a control
mechanism that parents used on them. The fact that their parents told them that they cared very much about them and didn't want them getting into trouble made them feel protected, but also quite guilty. Another technique that one family used was the "silent treatment" for days at a time. If the children defied the mother, she didn't talk to them for weeks, and the children felt very sorry and remorseful until they tried the same technique out on the mother. The problem with this type of strategy is that not only were the issues were never resolved, but the tension affects everyone in the family.

The young women who were interviewed constructed a picture of issues which reflected themselves in terms of their own values and experiences. They were for the most part, already in their twenties and did not consider themselves to be in the same situations or experiencing the crisis situations that some other young Indo-Canadian women or adolescents experienced. For instance, they would describe themselves as chaste, they generally were not dating or going against their parents' wishes in any significant way, and they respected most of the values of their culture. However, they were also able to construct for me a picture of "others", of whom they knew or had heard of. They described how, often, Indo-Canadian children are in a difficult spot and sometimes, crisis, because they can't go to their parents, they have no support from them:

They are just foundering around with these issues, these problems by themselves. And they can't really go to their white friends, because they don't understand. They would not understand why they don't just do whatever they like. They don't understand this societal, family pressure that these children face. And they're being pulled in two different directions and they can't deal with it and there's nothing there for them, to help cope with the situation. So often times, it's just easier to kill themselves. And even that is sort of like, such an embarrassment. If they don't succeed, it's such an embarrassment upon the family. The sometimes think, "I'd be better off dead, because now
I've really embarrassed my family. It's really wrong for them. It's not just like a little bit wrong. It's just from one extreme to another.

What happens when kids get into trouble, drinking or getting pregnant? How does this reflect on their families? What happens to them because of it?

You hear a lot about parents killing their children. I don't know if you've heard about, there's been shootings in the past couple of years where a brother will gun down his sister? I can't remember where it was, somewhere in BC, that's happened a few times. Where the brother or the father will gun down, kill the daughter and kill himself, or kill both the boyfriend and his daughter. Or the brothers will go beat up the boyfriend. Like, stay away from my sister kind of thing.

And so it will be a very abusive situation because she's seen as the honour of the family. Her virtue, her being a virgin is a very big deal. And anything that goes against that is just as if she's just destroyed the family. Like they always say, she's blackened our name. It's really violent. It usually ends up being a violent thing. Or she's ostracized, she's kicked out of the house and she's left to fend for herself. They disown her completely. So it's a really sad situation that she's stuck in. Whereas they've got such a double standard with boys. Boys can fool around or do whatever the heck they want, and nothing happens to them. But for the girls, they're the honour. And even, if there's a younger boy in the family, he's seen as the guardian of the older sister. So I think it's really sickening. I think it's a really stupid thing to do but that's sort of the situation. And it's really tough for them now.

Similarly, parents stated that they were cognizant of issues that others face, but did not identify any specific situations in which they were personally familiar with:

What happens to girls who get pregnant?
I really don't know. I think either they have an abortion done. Abortion probably. If they do have babies, they go away and have the babies and then their babies are given up for adoption and they would never see the baby. I haven't seen a single mother here. Unwed. I shouldn't say single mother. There's lots of single mothers. I don't know of any unwed mother or I haven't seen any in my 23 years here, where some woman has said, "This is my child out of wedlock."

There are the girls that have left home and perhaps there's apparently a lot of prostitution now in ------. Again, I heard this from the grapevine that there's a lot of prostitutes, Indian prostitutes.
Kids that have left home?
That's right. Or even for them to get extra money they will go and sleep with
people. With the parents not knowing. And you would not know about them.
You wouldn't know because they would keep it very well hidden. But I think
the girls that would take that step would also ensure that they have proper
protection and so forth.

Access to Help

Availability of Indo-Canadian health professionals, social workers or counsellors may be
beneficial in some circumstance; however the difficulty as two Indo-Canadian counsellors put
it, is still the concerns of families about the information getting out to the community. Also,
there is the perception that the counsellor will encourage the children not to listen to their
parents. One person explained that she uses the approach of trying to do a little culture
brokering, that is, to explain to parents about the environment that their children experience
at school and with their friends. Unfortunately, all too often, the parents don't want to hear
this and feel that she is just on the side of the kids, that she is biased. Another young woman
who has been involved teaching young people candidly admitted that she could see that she
could see in herself that she, being "stuck in the culture" might have problems getting past
that to really be of help.

On the other hand, a counsellor who is not Indo-Canadian may run into just as many, if
not more problems because of the community's assumption that the outsider doesn't know
their culture and will want to suggest a Western solution, not an Indian one. Since in most
cases, this is true, helping families remains problematic. She told me too that one problem
with Western counsellors and health professionals is that they ask so many questions. In the
Indo-Canadian culture questions are not the right approach.
In our culture they don't like questions. You have to approach differently. Slowly, very carefully. Like just get to know the person in a very different way. How are you, and start from the children and all those things that entrust them. Not just what entrusts you because they'll ask much of that. So get the sense of that person and so mostly start from the children. It's hard to set, because every person is different, but still you can't ask direct questions.

They want to know who you are, where you are from, more introduction of yourself. If you don't know the language, you should take someone with you who does and then explain exactly why you came. And even though it is beneficial to them to give you the information, they will be reluctant to give it unless they know exactly why you want to know.

In order to provide education to families and parents, it is important to know that often they will not attend symposiums or classes. This was one of the difficulties that was openly discussed at the symposiums. Most of the parents who did attend were those who were already involved with mainstream culture and had often been working in a professional or helping type of job. Participants suggested that there is a better chance of having success if the activity is held at the temple of other gatherings such as women's parties. If health professionals wish to get involved with the community and build a relationship, they will not be refused access.

They won't say no even though they don't want you. That's one thing in our culture. They won't say no. And so, if you build a relationship, if you approach them and go to their house... they won't come to you.

And if you have the session separate, it's better. You get better participation if the men and women are not mixed, more openness. It helps to always have someone from the culture with you.

**Chapter Summary**

In this chapter, the primary theme of balancing or bridging two cultures was presented within a number of categories. These included participants' perspectives on family and
cultural values, living in the community, "What Will People Think, or How Will This Reflect on the Family, "Lokeen Kee Kehan Gay", learning and negotiating boundaries, and strategies and approaches to living with the issues. Throughout, I have allowed the voices of the participants to speak through extensive quotations. They have explained their experiences of living within Indo-Canadian families and what it is really like for them as they strive to live in Canadian Society. While certain of the issues were presented under separate headings, many were interspersed throughout. Many of the issues related to differences in living in two cultures and adjustment for families were, for the most part, similar to other findings such as work done by Kurian, 1991; Manhas, 1979; and Wakil et al, 1981, but the concept of Lokeen Kee Kehan Gay, I find, is more prominent in the present study.

In Chapter Five, the perceptions and experiences of the participants will be discussed in relation to relevant literature.
CHAPTER FIVE: DISCUSSION OF THE PARTICIPANTS' PERCEPTIONS AND EXPERIENCES

In Chapter Four, the primary theme of balancing or bridging two cultures was presented in relation to participants' perspectives on family and cultural values, living in the community, "What Will People Think, or How Will This Reflect on the Family, "Lokeen Kee Kehan Gay", learning and negotiating boundaries, and strategies and approaches to living with the issues. The theme "What Will People Think, Lokeen Kee Kehan Gay?" influenced the lives of all of the participants in relation to how decisions might be made and what those decisions might be (Figure 3).

Balancing or Bridging Two Cultures

Several ways of bridging or balancing the differences between family and cultural values and mainstream cultural values were identified by the participants. These were negotiation, compromise, compliance or acceptance, and rejection (Figure 4).

Negotiation and compromise involved a lengthy strategy in which the parties eventually determined some sort of compromise on the issue. For adolescents, this involved introducing the issue well ahead of when they wanted the permission. They anticipated that at first, and sometimes for some time, the answer from their parents would be "no". They also anticipated that their parents would not wish to discuss it at all, partly because this indicated a lack of respect, and partly, because the parents did not perceive themselves as having a need to explain why they said "no". The expectation of parents was that their answer would be respected. The next step involves repeated requests for permission and a process of "wearing down" the parents. Also, the young women, if they did not have a clear understanding of the
Participant's Decision Making Model:
Client and family use their Explanatory Model to make decisions about how to manage an issue or sickness.

In addition, consideration is given to how the issue or sickness and the choice of help will reflect on the family. The choice of social arena is influenced by Looken Kee Kehan Gay.
BALANCING/BRIDGING TWO CULTURES

Family and Cultural Values:
- Showing respect
- Importance of families
- Maintaining the culture education
- Lokeen Kee Kehan Gay
- Gender issues
- Continuity
- Learning and negotiating boundaries
- Interdependence
- Hierarchy
- Authority

Mainstream Canadian Culture:
- Influence of:
  - Independence
  - Competition
  - Freedom
  - Equality
  - Social Structures
  - Individuality
  - Assertiveness
  - Self-sufficiency

Negotiation
Compliance
Acceptance
Rejection
Compromise
rationale for a refusal, would insist on an explanation.

Indo-Canadian adolescents play a role in leading their parents to change, through their demands for more explanations, compromise and freedom. This finding is similar to what has been noted in the literature (Manhas, 1979; Siddique, 1977) about the introduction of new ideas to parents.

Compromise involved the "giving in" of both parent and daughter in coming to a resolution of the issue. Compliance or acceptance usually occurred when the daughters were unable to get parental consent for an activity. The daughter would comply with the parents' wishes and refrain from the activity. Rejection occurred when the daughters did not accept the parents' refusal to allow an activity. In these situations, attempts at negotiation were continued. When this was unsuccessful, daughters would either work at trying to educate or enlighten their parents about the activity, or they would go ahead and do it without the parents' permission. So, "they would go behind the parents' backs" or "sneak around".

Rejection, when daughters choose to marry out of the culture or rebel in other ways, could have resounding effects. It could mean a break with family and community. If a girl breaks with the culture, she often ends up in a "no man's land", with isolation from all those with whom she has close ties and from all that is supportive and familiar. Guzder describes marrying out of a culture as sometimes a kind of camouflage for the inability to resolve conflict within the original family and goes on to state, "In Indian families, all traumas carry the added threat of violation of izzat and family purity and so must be hidden from the social world....the suppression of intrafamilial trauma then may result in suicide attempts, substance abuse, or impulsive acts which signal individual trauma within the family" and "cohesion and
preservation of social face are overriding concerns that tend to reinforce denial and ostracism" (Guzder & Krishna, 1991, p. 282).

Children of Indo-Canadian immigrants strive to find a balance between their lives at home and in the outside world. Singh (1995b) in his analysis of the "oreo syndrome" describes this in terms of a "dual coping mechanism," which is as challenging as learning how to walk a tightrope; "there is no coach, no manual, and the bruises sustained are emotional" (p. 52). They are balancing between the Eastern view of the self which emphasizes interdependence, harmony and cooperation in relationships and the Western, which emphasizes independence, individuality, assertiveness, self-sufficiency and competition.

Eastern family relationships emphasize cohesion and are hierarchal, with authority resting with the most senior male. There is reciprocity between generations, with the older family members expecting and receiving respect and support in return for advice and guidance. There is continuity within the family which is provided by this link between the generations. Singh (1995) notes that parenting is a shared responsibility within the extended family. Conflicts and differences are worked out within the confines of the extended family. In contrast, in most Western families' conflicts and differences are usually resolved within a nuclear family structure. Preparation of adolescents in Eastern families involves encouraging them to meet their family obligations such as looking after parents, living at home until marriage, consideration of family to be more important than friends and family honour or "izzat". Whereas, adolescents from a Western background are prepared for leaving home as part of becoming an adult and the influence of the community is not as prevalent in their lives.
Lokeen Kee Kehan Gay? and the Theoretical Framework

How can this concept of "Lokeen Kee Kehan Gay?" be understood within the theoretical framework? The writings of Leininger (1978; 1991) provided direction to examine the cultural context of the phenomena or the totality of the situation or lifeway being examined. By examining the cultural background of the participants, I was able to build a general picture of the circumstances of the participants' lives as well as an understanding of how Lokeen Kee Kehan Gay? influences their lives. Leininger (1991) suggests that folk and professional health care systems greatly influence access to and quality of care. She also guides the nurse to the combination of generic (culturally learned and transmitted lay or traditional or folk knowledge and skills) and professional care in order to provide culturally appropriate care. There are some similarities between Leininger's (1991) approach to folk and professional health care systems and Kleinman's (1978) explanatory model framework.

Kleinman's explanatory model framework of the sociocultural context of health guides us to examine people's explanatory models in order to understand the personal and social meaning of the illness experience. This must be done in relation to the cultural meanings that people bring to any health care encounter. These interviews provided insights into how cultural values, practices and beliefs affect the lives of Indo-Canadian young women and their parents. The findings in the data support the idea that health care professionals need to understand the client's perspective. Identifying and describing the "meaning assigned to events within the context of individuals' experiences provides an understanding first, of how people develop their ideas about what is important in relation to an event and, second, how their ideas influence their behaviour" (Lynam, 1985, p.328).
The data provide explanations of how these families experience and resolve conflict or disagreement and how they identify health issues associated with the conflict or disagreement. As well, the data identify how the participants seek to balance or bridge the differences between two cultures. As Kurian (1986) noted, the children become the bridge between their parents and the rest of Canadian society. While parents may be trying to keep their children away from the influences of Canadian society, the children are negotiating and pushing out their boundaries, trying to find a balance or compromise between the life they live at home and the life they experience away from home.

These findings need to be considered in relation to providing health care. A health care encounter (figure 2) is experienced within the socio-cultural context of health. The client experience of health, illness or problems plus the client's social, economic and cultural meanings lead to the client's Explanatory Model of Health and Illness which is brought to the health care encounter. The sickness or disease from a biological or psychological point of view is brought to the health care encounter as part of the Health Professional and/or Folk Practitioner's Explanatory Model of Health and Illness, along with the health professional's own socio-cultural meanings which are brought to the experience (Anderson, 1990).

In order to provide culturally appropriate care to the participants of this study and their families, the health professional must include the concept of Lokeen Kee Kehan Gay when participating in a health care encounter. The participant's explanatory model consists of the experience of the illness or problem, and the social, economic and cultural meanings, but in addition, Lokeen Kee Kehan Gay must be considered in eliciting the client's explanatory model. Lokeen Kee Kehan Gay is an essential component in the way that the Indo-Canadian
participants construct their explanatory models and in how they develop and negotiate strategies to balance or bridge an issue or concern. It influences the choice of health care arena (figure 3) that Indo-Canadian families turn to when dealing with health and social issues. We are reminded of Li's (1988, p.4) comment, "Culture is the primary mover of human behaviour." This cultural concept, Lokeen Kee Kehan Gay (as it affects family "izzat" or honour), is a primary social force which dominates many decisions and choices related to family, health, and community. It forms a boundary through which an Indo-Canadian client often must cross to make the decision necessary for resolution of illness, social issues and conflict. The client explanatory model and Lokeen Kee Kehan Gay influence the choice of health sector or arena in which the client will seek help. "Keep it in the Family" represents the choice that some families may make when experiencing conflict. They will remain within the Popular sector or health care arena, but in addition, they will not seek advice or counselling from anyone outside of the immediate or extended family.

A health care encounter will generally result in a decision about the solution of the problem or health care issue. This leads to implementation of the decision, with resolution or no resolution. Some clients may choose to carry on without resolution or they may return to the health care systems and seek an alternate arena.

The literature does not often refer to the concept of Lokeen Kee Kehan Gay as such, but there is mention of the "prestige of the family" which is regarded as sacrosanct in South Asian families in Britain (Anwar, 1976). "Izzat" is described in most literature describing the South Asian culture (Agnihotri, 1987; Ames & Inglis, 1973; Ananth, 1976, 1978, Anwar, 1976, Ghuman, 1991; James, 1974; Koehn, 1993; Kurian, 1991; Manhas, 1979; and Wakil,
Siddique, & Wakil, 1981). In a recent article, Vig (1996) voices concerns about the prevalence of "What will people think?" and its role in gatekeeping of the community.

Jamieson (1995) suggests that social status as one of the important determinants of health is now becoming recognized. When we consider how social status might be affected by gossip, or by community censure within the Indo-Canadian community, we can begin to see what effect this might have on the well-being of a family or a family member and why they might choose not to seek help within or without the community. If a child or adolescent behaves in such a way as to bring down the criticism of the community onto the family, the parents carry the burden, since children are considered to belong to the parents. The behaviour reflects badly on the parents, not on the child, since the parents:

should have prepared the child properly. If a child chooses to marry out of the culture, it is traumatic to the family and to the parents because everything is pivotal on marriage--it is the culmination of everything in your life and that of your children. When your children marry, you know who will look after you and how the future will be. It is the strength of the system...the reciprocity is the important thing which cannot be ignored. And the issue of marrying out means the breaking of the blood ties and obligations of the family" (Indo-Canadian psychologist, personal communication, June, 1996).

"Traditional marriages are not a contract between individuals but rather, join family systems, fulfil parental duties, and realize the tasks of generativity and preservation of the family" (Guzder, 1991, p.275). A child who marries out of the culture, or against the family's wish violates the family "izzat".

The Construction of Gender

Throughout the interviews with Indo-Canadian young women and their parents, gender issues and the role of women in the Indo-Canadian society surfaced. Intertwined with this
was the concept of Lokeen Kee Kehan Gay. Examination of the literature on the traditional role of women in India demonstrates the influence of myth and religion as well as traditions and conventions through the ages on the construction of gender roles (Agnihotri, 1987; Seneviratne & Currie, 1994; Guzder & Krishna, 1991; Stopes-Roe & Cochrane, 1989).

Many of the beliefs and customs relegate women to a subordinate status. For Indian Sikhs, as noted in Chapter Two, Sikh theology combines Hindu and Moslem elements. In the Hindu perspective, women enjoyed many privileges and religious rights in common with men during the Vedic period. During the period that followed there was a marked decline in their status. During this time, known as the Smiritis, the Laws of Manu were developed. From these sprang "many ideas and notions which led to unquestionable male dominance and the subordination of women in Hinduism. "Thus is it written that in childhood a female must be subjected to her father, in youth to her husband, when her lord is dead to her sons, a woman must never be independent" (Manu V: cited in Seneviratne & Currie, 1994, p.598). Women were thought to have a weak and evil nature, and so it was the duty of men to watch and protect women from themselves and to protect their children. The duty of the wife was to worship her husband and live in unquestioning obedience to her husband. Seneviratne and Currie (1994, p.598) note that "these ideas of male dominance and superiority have moulded the lives and behaviour of not only the poor illiterate women but also their educated sisters in the more affluent classes." Guzder and Krishna (1991) note that in spite of social changes that challenge traditional cultural values:

The position of women remains fraught with difficulty. While the relationship of families and individuals to tradition is not rigid or stereotyped, the identity and assimilation of Indian women is still framed by traditional family and
cultural paradigms that both idealize the mythic feminine-maternal and devalue women. For the clinician working with Indian women, psychodynamic understanding of the cultural embedding of identity can play a crucial role in promoting recovery and adaptation to culture change. (p. 257)

In the traditional Indian context, women are identified more transactionally than individually, as daughters to their parents, wives to their husbands, daughters-in-law to their parents-in-law and, in their most valued role, as mothers of sons. (p.273)

Agnew (1996) discusses how literature by community groups traces wife abuse to patriarchal domination and gender stratification within the family. She cites the submission of the South Asian Family Support Services to the Canadian Panel on Violence Against Women which states:

We believe that the crucial variable in the explanation of violence against women is patriarchal power and the resulting social inequality between men and women. Capitalism has encouraged the possession of material property and women are also considered property to be possessed and dispensed with. Gender socialization has always emphasized that man is the "head of the household", "the breadwinner" and "the lord and master" of all. Women are to be submissive, quiet, and obedient. Assertiveness is equated with selfishness...[South Asian women] spend most of their lives under strict supervision of the family, in order to acquire appropriate "gender specific" behaviour. (South East Asian Services, 1992, cited in Agnew, 1996, p.197)

Agnew (1996) goes on to state that:

Patriarchal domination in the family's culture constructs gender roles and beliefs and norms that support inequity within the family. The abuse is often precipitated by the spouse's perception of being thwarted in his desire to exercise exclusive authority over the family's resources, including his wife's wages, and over his wife's domestic work. (p.198)

In her research about elderly Punjabi women in British Columbia, Koehn (1993) discusses the greater significance of the man's decision-making role over that of his wife. She uses a quote from a service provider "to provide insight into the nature of males versus females vis-
a-vis the power structure:

Women always have to look to men for power—first the father, then the husband, and finally the son. Her loss of power as she ages is greater here than in India. There, at least, she has familiarity with the kinship system and social networks (Koehn, 1993, p. 105)

Elderly women expect to be treated with respect by their children and often gain power in family decision-making as they become older. They expect to be consulted about many things and often expect to play an active role in arranging marriages. "Arranging marriages is one way the elderly woman exercises existing powers (Koehn, 1993, p. 107). Community leaders interviewed by Koehn (1993) offered the following comments about this power:

Those women who arrange marriages have more power. They have to have this power in the first place to be able to do this. They can build respect on the basis of their character, social skills, experience, and knowledge. (p. 109)

Arranging marriages is one important means by which elderly women exercise some power. This is the type of thing that gives them covert control in families. Women are overtly subordinate, they are financially dependent, but they have a lot of say in family affairs and may be very powerful as a result. (p. 109)

Elderly women promote arranged marriages. They dictate their ideas to parents (their children), and humiliate the family if they don't follow up on their recommendations—they cause a lot of trouble. They would put a stop to other kinds of marriage—inter-caste, love matches, and inter-racial marriages (which they view as especially bad). (p. 109)

As described earlier in Chapter Four, the role of the mother-in-law leads to a hierarchy of power within the family's women. In order to gain this kind of power, a woman must have sons to gain her a higher status within the family. When the sons marry, the mother gains power over her daughter-in-law(s). The mother-in-law is known as the sas. Several participants in Koehn's study commented on the tension and struggle for dominance between
the sas and her daughter-in-law as well as, at times, jealousy and the competition for the attention of the son. Economic dependency often determines what role senior family members have in Canada. Therefore, role reversal, the loss of power and respect is often experienced by the mother-in-law. "Throughout life until they themselves have daughters-in-law, women have an ambiguous status. Their own families comment 'the girls belong to other families, they are not ours'. The receiving family also does not count them as theirs either but only her male children...the attitudes of families towards girls were that they were wasteful of resources and unnecessary" (Pettigrew, 1988, p. 382). Many families continue to see the roles of women in this framework. Small wonder then, that Indo-Canadian women and young girls cited so many gender issues.

The traditional gender roles which have influenced Indian family life continue to be influential in the lives of the women who participated in this study. A number of participants were actively exploring ways and means to achieve this while staying within the Indo-Canadian community. They recognized the repression of women that gender roles encompass, but they also recognized the strength of the existing power structures within the family and community, including the influence of respect, "izzat", power structures within the family, patriarchy, and the situation of women having power over other women. Some of them defined the trend to increased traditionalism in the community as "more strict". The participants framed their response in terms of how they intend to push for change and equality. Some of them saw this as establishing changes that would benefit their daughters or future children, recognition that societal pressure is very strong and that women will need to support each other to be strong and to stand up for each other, to support each other while
continuing to value the family.

**Strategies of Achieving Resolution: Accessing Support**

When Indo-Canadian families require assistance, they call upon members of the family or very close and trusted friends. Lynam (1985) conceptualized this group as "Kin" (family) and "insiders" (close and trusted friends), usually people who it is assumed would be able to help them because of a common basis of understanding. This model is an adaptation of the village mediation method (*punchayat*) used in some parts of India. The focus is on obeying male family elders, although other family members, especially grandparents, may play strong roles in dispute resolution. The village mediation process involves a group of five village elders acting as a mediation panel to handle disputes (Duryea & Grundison, 1993). An approach which is often utilized to resolve conflicts is mediation. Mediation is dependent on the mediators maintaining neutrality and confidentiality. Also important is that the mediation occur in a common language. The difficulties that lie with the mediation process are that when family members participate, they tend to take the side of the person who is related to them; so a brother-in-law would likely side with the brother, the mother would side with the son, and so on, as described by the participants. And so, coming to a full resolution of an issue may be fraught with difficulties. The other point that needs to be made here is that mediation cannot work if the parties are not willing to accept the proposed solution.

The use of "outsiders" (Lynam, 1985), persons or counsellors, agencies or other community resources were identified by participants as inappropriate most of the time. One reason cited for this by a number of persons was that they do not understand the Indian culture and would pose Western solutions which would not work for an Indian family. The
second and most often cited reason is that many families preferred to "keep it within the family". Older women of the families are often responsible for the family's health and expect to be consulted. A third reason was that many people are not familiar with the concept of counselling, and would not understand the purpose of it.

The Canada-born daughters and mothers were more aware of the kinds of resources which are available, but again, would not necessarily use it because of resistance from the family. Some participants of the symposia mentioned that "never would people go to others within their own community for help" because of the gossip, and they would consider "outsider" help from counsellors or agencies only in the most dire of circumstances.

Chapter Summary

In this chapter the analysis of the data was presented and discussed in relation to the literature. The findings discussed include balancing or bridging between two cultures, Lokeen Kee Kehan Gay and the theoretical framework, the construction of gender, and strategies of achieving resolution and accessing help.

Participants used several ways to balance between two cultures. These were negotiation and compromise, compliance, acceptance and rejection. The concept of Lokeen Kee Kehan Gay was identified as an essential component of the participants' explanatory framework and therefore a significant factor in the choice of a health sector or arena and the health care encounter. The construction of gender and gender roles was examined in relation the literature and to how was experienced by the participants. Finally, conflict resolution and accessing support was considered in relation to the process and resources participants used and to relevant literature.
In Chapter Six, conclusions, implications for nursing and recommendations for further research will be discussed.
CHAPTER SIX: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS FOR PROFESSIONAL PRACTICE

The purpose of this study was to seek from Indo-Canadian adolescent girls and young women and parents of Indo-Canadian adolescents and young women, their perception of conflicts or disagreements as experienced in the context of living within their culture in Canada. In addition, the purpose was to identify related health issues, processes that Indo-Canadian families use to seek solutions to problems, and to identify implications for nursing, health practice and research. The literature was reviewed to provide background information for the study and to examine relevant research done in the area of interest. There was no research found in which intergenerational conflict or disagreement was examined in relation to health. Cultural background about the Indo-Canadian people in British Columbia was developed from the literature and from information obtained from Indo-Canadian community key informants. This provided a general understanding of the Indo-Canadian culture in British Columbia from which to begin investigation.

An ethnographic approach was used to address the questions of the study. The study was guided by the writings of Anderson (1985, 1990), Kleinman (1978); and Leininger (1978, 1991). Anderson (1985) suggests that nurses use a framework for nursing and professional care that allows us to examine the multiple determinants that shape people's experiences and directs us to reflect upon the cultural meanings we bring to the health care encounter. Leininger (1978; 1991) directs nurses to learn about people of different cultures through examination of their lifeways, beliefs and values and to consider value systems of cultures as the basis for providing culturally relevant care. Kleinman (1978) conceives of health and illness as culturally and socially
constructed and experienced within three distinctive and overlapping arenas of health and health care: the popular, folk and professional sectors of care (figure 1). Kleinman (1978) explains that the client's sociocultural construction of health and illness must be elicited in order to determine appropriate strategies for care. In proceeding with the research in this project, the perspectives of Anderson, (1985), Leininger, 1978, 1991; and Kleinman (1978) provided direction for data collection and for analysis of the data.

Indepth semi-focused interviews were conducted over a period of ten weeks with Indo-Canadian adolescents and their parents. Participant observation at three Indo-Canadian parent and youth symposiums provided a rich source of data which proved valuable in validating the information from the interviews and from the literature.

Participants' perceptions of conflicts or disagreements were elicited within the context of their culture and their day to day lives. They explained their concerns, processes for seeking solutions and health concerns which might be related to the concerns. Data analysis was done using a qualitative process of content analysis as described by Lindlof (1995) and Hammersly & Atkinson (1992). The participants' explanatory framework was identified in relation to the concerns in their lives which were related to conflict or disagreement. The two primary concepts which emerged were bridging or balancing between two cultures and Lokeen Kee Kehan Gay? which means "What will the community think?" or "How will this reflect on the Family?" Within these themes, other issues emerged. These were: family and cultural values, issues from the perspective of daughters and mothers and which were mainly related to gender issues, learning and negotiating boundaries, working out conflicts, and access to help.

The findings revealed that in recent years, changes have been occurring within Indo-
Canadian families. Parents have been encouraging their children, including daughters, to obtain professional degrees and take up careers which is a marked contrast to former construction of feminine roles. Women are now expected to work outside the home more, and the conventional image of the female role is slowly changing. Substantial changes are also occurring within the traditional authoritarian structure of family relationships. Parents are finding that their adolescent children want and demand more freedom to date and to go out with their friends. In some cases, they are taking the freedom, with or without parental consent. As a compromise, parents are beginning to allow slightly more freedom for adolescents but they are encouraging their children to associate with others from the Indo-Canadian community rather than friends who are non-Indian.

In summary, insights gained through discussion with the project participants were as follows:

1. Indo-Canadian families tend not to attend forums or symposium, or classes on family matters, parenting, conflict resolution, or health issues.

2. Indo-Canadian families often see non Indo-Canadian health professionals as of no use, because they do not understand the Indian culture. They feel that a non-Indian solution will be offered. Therefore, it is essential for anyone who intends to work with Indo-Canadian families to have an in-depth knowledge of the culture.

3. Parents often don't know where to turn or what to do if there are unresolvable problems within the family, children on drugs or alcohol, or if they are having problems parenting. Added to this, is the reluctance to confide to anyone outside the family about any troubles.

4. Parents may be unaware of how families outside the Indo-Canadian community interact and manage conflict. Since some families have little or no contact with any but Indian families, they may have no frame of reference of non-Indian family values, beliefs and ways of life, except for what they see on television.

5. Fear of gossip and loss of family honour or izzat, concern of how certain actions of family members, especially girls will reflect on the family, is of prime importance for many families. Sometimes this is the basis for decisions made around how an issue may be handled.
6. Indo-Canadian adolescents often have no one to turn to if something goes wrong. They really need to have Indo-Canadian youth workers whom they can trust. They will usually not go to their parents for help and they will not go to the larger community for fear of being talked about and fear of parents finding out.

7. Indo-Canadian adolescent girls who experience disagreements or conflicts with their parents prefer to seek resolutions which are appropriate to their family and cultural values. They may comply with the family or parents' decisions in respect to their education, marriage, and other issues in order to maintain family peace or to make their parents happy.

Conclusions

The following conclusions can be drawn from this study. Indo-Canadian parents and adolescent girls and young women do face the dilemma of differences in values. Often the parents have grown up in a very different culture where sometimes rigid tradition and convention were the norm and every generation faithfully followed the pattern of the one before it. They value strong kinship ties, family values, interdependence, great respect for age and authority. Sometimes, they are greatly resistant to assimilation, which leads to consistent and deliberate efforts to resist change.

On the other hand, in the Canadian host society, while the values are not in complete contrast, they are marked by greater socioeconomic independence and individualism. Families are having to make decisions between adoption of Euro-Canadian ways of life and retention of their own cultural traditions.

The Indo-Canadian adolescent girls and young women interviewed in this study were clear in their desire to achieve a balance between the two cultures to encompass what they perceive to be the good aspects of the Indian culture and also of the Euro-Canadian culture. They are proud to be a part of their Indian culture, but they also wish to see some changes in areas such as gender
roles and education of their parents about the Canadian culture. A number of the interviewed mothers were in agreement.

**Recommendations for Professional Practice**

In order to provide culturally sensitive or culturally relevant care, the client's explanatory model must be elicited. The health care professional must also be aware of his or her preconceptions when working with members of the Indo-Canadian community. In making the attempt to elicit the clients' perspective of a problem and what the effect of it is, the health professional needs to consider Lokeen Kee Kehan Gay? In other words, in addition to asking questions such as "What do you think caused your problem, how do you think it should be treated, what effects does it have on your life?", the health care professional should attempt to elicit the client's own social construction of their reality. Questions such as "How will this affect your family? Is this something that you can discuss at home? Who is affected by this?" will help to determine the whole picture.

Health professionals who work with Indo-Canadian families must understand that as a rule, families do not go to outsiders for help. If they have requested assistance from an outsider, it may well be that they have exhausted all their own resources and that the situation may have gotten out of hand in some way. If adolescents come for help, they may come one time only. A clinical psychologist who treats Indo-Canadian families explained (Indo-Canadian psychologist, personal communication, June 21, 1996) that often, families will permit only one encounter with a counsellor because to permit more would be to admit that there is a problem and that the child has a problem; in other words, it will reflect on "izzat" significantly. A professional should be open, try to develop a long term relationship if possible, but know that this one visit may be the only one
you have. In this situation, the health professional should attempt to establish the neutrality of the professional, and establish the safety and confidentiality. If the client, who is an adolescent, knows that they have access to someone who is a non-judgemental advocate, self-destructive kinds of behaviour may be prevented. Additionally, adolescents need to know that there is someone with whom they can talk in confidentiality and neutrality. They may not be looking for a solution, but rather, need a safe, non-judgemental place to unload and vent. They need a counsellor or health professional who is knowledgable about the cultural values and norms and who will not try to impose a Western solution on them unless it is appropriate. The role of a counsellor or health professional may be to listen, offer support and help bridge the gap between parents and their daughters.

The health care professional must be aware of how parenting and childhood is constructed within the Indo-Canadian society, that the children are considered the property of the parents. Parents need reaffirmation that they have not failed either their culture or their children. Instead of telling parents what they should do, a helpful strategy is to try to identify what the parent values. So, for instance, if a child is good at sports, but the parents will not allow him to spend extra time at school to do sports (because they fear too much time in that environment might contaminate the child) the issues can be reframed. If a detriment (being contaminated by the Western environment) can be perceived from another perspective so that the parents will feel pride in their child's participation, it will be appreciated and accepted. In many cases, because of a position of neutrality, a nurse or counsellor becomes, in a way, a culture broker to the client and may become a part of the process of renegotiating boundaries. We can reframe for the client how to approach certain values or activities to help them see the advantages of both perspectives. It
may be an opportunity to clarify misconceptions between two worlds.

When attempting to build a relationship with an Indo-Canadian client or her family, it is crucial to understand the correct approach to information gathering. In the Western approach, a health care professional would explain what the purpose of their visit is, and then begin the assessment by asking questions. This is not a culturally appropriate approach in the Indo-Canadian community. The health care professional must first establish a relationship if possible with the client and her family. The process is a circular one which will eventually end with the required information, but it is advisable to allocate more time than might be planned for a person of Western background. Part of building the relationship requires that the health professional establish who they are. By this, I mean that in most circumstances, the client will want some personal information or some way of socially establishing the health professional's role and place in society.

In approaching the family, determine who is the person with the authority in the family. In the case of an adolescent, it may be useful to identify adolescent's views of the flexibility of the father and what roles the mother plays. How does she for example, influence decisions?

The health professional must also realize that in working with a family from another culture such as that of the Indo-Canadian one, he or she may have to suspend his/her own views and perceptions of a situation in order to work with the person in the most effective way possible. Solutions which may work with a Western family may not always be appropriate, especially if the solution means that the client must risk conflict with the family. As Anderson (1992, p.281) notes, "even though the family might have been a source of stress, it was the only source of support women had. Also, without the family a woman--whether Greek or Indo-Canadian--had
no place in the ethnic community."

When working with Indo-Canadian adolescents and their families, a health professional who is knowledgeable about the clients' values and social context can assist the client to identify where their culture provides them with strength, support and reaffirmation and to seek ways of dealing with their situation in a culturally acceptable way.

**Recommendations For Further Research**

While it was beyond the scope of this thesis, further investigation from a feminist standpoint of the role gender plays in the lives of the Indo-Canadian family would expand knowledge on the subject. While men have done several studies that identify the differences in role, it has not been closely examined by women within a feminist framework.

Another perspective which sparked my interest and which I feel would yield data relevant to nursing would be to examine closely the influence of cultural paradigms for Indian women and how the cultural embedding of identity is related to mythology (as suggested by Guzder, 1991).

Finally, this research was done with mainly women participants. There are other perspectives which have not been examined, such as that of male adolescents and their parents and the kinds of conflicts or disagreements which may affect how they manage and relate to conflict.
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Appendix A

Interview Questions

The following questions have been developed as a guide for individual interviews of parents and their daughters. During the interview, an overview will be given of the project and the type of information needed. The researcher will review with the informant the right to refuse to participate or withdraw at any time and the statement that withdrawal or refusal to participate in the study will be without prejudice or negative consequences.

Since it is anticipated that the informants may identify issues and/or conflicts which the interviewer may not be aware of, the intent is to direct the conversation along the lines of the framework below, but the researcher will probe areas identified as areas of conflict or differences by the subjects.

Sample Questions for Parents

1. Can you tell me a little about yourself? What was it like for you as an adolescent?
2. Can you tell me about how you met your husband/wife/each other? Probe to elicit values related to marriage customs and expectations for children's marriages.
3. Now that you are experiencing your daughter as an adolescent, how would you see its being different from when you were that age? Alternatively, When your daughter was an adolescent.....
4. Many parents and adolescents experience differences of opinion over things like freedom, dating, clothes, smoking, drugs, or other things. Do (did) you and your daughter have differences of opinion over any of these kinds of issues?
5. How do (did) you work out these differences? Further probing could include asking if the informants resolve conflicts similar to the way other families in their community do, or if they have seen differences in the way their family resolves conflict (differences) since coming to Canada.
6. Were there (are there) health problems that you feel were a result of differences between you and your daughter? Alternate question - do you think there are health
problems that are a result of differences (conflict) between parents and adolescents? Who do they affect?

7. If your adolescent daughter does (did) not behave as you think she should, what would you do about it? How does (did) it affect you and your family? Is there someone who could help you decide what to do? (Probe to explore resources within the community and/or identify what resources would be helpful)

8. Tell me about what you or other Indian parents are experiencing in raising adolescents here in a different culture? Do you think it is different or more difficult here in Canada?

9. Do you think that there are more problems with boys or with girls?

10. I've heard that there were some Indo-Canadian adolescents who were having problems with depression and even some who felt like running away or were suicidal. I'm wondering whether you have heard (or experienced) of anything like this. If so, do you have any ideas about why that might be happening?

11. Is there anything else that it would be important for me to know?

Sample Questions for Girls/Young Women

1. Can you tell me what it's like for you being a teen-ager or young woman growing up in Canada with one or both parents who originally came here from India?

2. Do you find yourself having to balance between different expectations of you at school or work, or with non-Indian friends and the expectations of your Indian family at home?

3. Would you say that your family mainly tends to follow traditional Indian customs at home or do you see them as quite "Westernised"? Probe to clarify - ask for examples.

4. Do you sometimes disagree with your parents over things like behavior, freedom, schooling, friends, clothing, friends, smoking, dating? How do you work out these differences? Alternate question - Are there kinds of issues that you and your parents don't agree on?

5. What happens between you and your parents if expectations for behavior are not met? What are the consequences? Is it similar for your friends?
6. What do you do or where do you turn when you need help to resolve differences with your parents?

7. Do your parents expect you to have an arranged marriage? If so, what do you think about that? Would you agree? What would happen if you did not agree?

8. Are there any situations that you would describe as a major difference of opinion between you and your parents?

9. Have you or your friends ever had a health issue that you might consider is a result of having a conflict situation in your family - ie. feel depressed, use drugs or alcohol, feel ill, gotten pregnant, been abused in some way? What happened? Probe if appropriate.

10. I've heard that quite a few Indo-Canadian adolescents were having problems with depression, and even some who felt suicidal or like running away. I'm wondering if that is something that happens very often and why that might be happening? Have you ever felt that way?

11. Do you think there are health problems that result from family situations where there is conflict or major differences of opinion between parents and adolescents? Probe for what kinds of problems and who is affected by the health problem.

12. Is there anything more that you would like to tell me?
Appendix B
Demographic Data

Name: ____________________________ Phone number ________________
Age: __________ Male __________ Female __________
Parent __________ Daughter __________
Place of Birth __________ Length of time in Canada if not born here __________
Languages spoken __________
What language do you most often speak at home? __________
What language do you speak most often away from home? __________
Education __________
Number of persons in household: __________
Relationship to you __________
Religion __________
Would you consider that your family keeps many of the Indian customs? If so, please list what you consider those to be:

____________________________________________________________________
____________________________________________________________________

Thank you for your assistance.
My name is Noreen Lerch. I am a registered nurse and a student in the Master of Nursing Program at the University of British Columbia.

During the past few years, I have been working towards developing skill in providing culturally sensitive health care for immigrant families in the Victoria area. Lately, I have become aware that there are some Indo-Canadian families who may be experiencing difficulties when their children become teen-agers. Some of the difficulties are due to the ways that families expect teen-agers to behave. For instance, the parents of a family may expect their children to lead a life that is like the traditional Indian ways. The children spend much of their time at school and with friends who may not be Indo-Canadian. They may want to do things that their parents may not approve of, such as dating, wearing Western clothing, cutting their hair, and so on. Parents sometimes may put restrictions on the teen-agers that cause disagreements. Often, there may be more disagreement about what girls do when they are teen-agers or young women than there is when boys are that age.

Sometimes these disagreements can affect the health of the teen-ager or other person in the family. Depression, use of tobacco, alcohol or drugs, running away, or choosing not to eat are some behaviors which can affect health.

I would like to talk with parents and teen-agers from Indo-Canadian Sikh families to discover whether there are health problems that result from disagreement and how it is handled. This may provide information that can help nurses and families to prevent or resolve the resulting health problems.

I will be gathering information by meeting with Indo-Canadian parents and with Indo-Canadian teen-age girls and young women who have experienced disagreements. Each person will be asked to participate in one to three interviews, each lasting one to one and a half hours. Follow-up interviews are intended to be used for clarifying or confirming information from the previous interview.

Interviews will be taped with an audio tape recorder. All information about participants will be kept confidential and will be coded to protect the identity of each participant. At the end of the study, all audio tapes will be erased.
CONSENT TO STUDY

PROJECT TITLE: Indo-Canadian parents and adolescents: Intergenerational disagreement and related health factors

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PURPOSE OF THE STUDY:

The purpose of this study is to identify what factors may contribute to disagreements between Indo-Canadian parents and their daughters (adolescent or young women); to identify if disagreements may contribute to health problems, to identify what the health problems are and how they are resolved.

It is anticipated that the results of this study will provide nurses with a better understanding of the factors which are important to know about when planning culturally sensitive interventions for Indo-Canadian families experiencing health problems related to disagreements.

I, __________________________ agree to participate in the research study described above. I have had the study explained to me. I understand that:

1. I may refuse to comment or answer any question at any time and I may withdraw from the interview at any time without negative effect;
2. I may withdraw from the study at any time without negative effect;
3. It is not the researcher's intent to provide health care or counselling; however, in the event of a serious concern, where possible, referrals will be made to the appropriate person or service;

4. I may not necessarily directly benefit from participating in this study.

I have been informed that:

1. The length of an interview may be from one to one and a half hours in length;
2. I may be contacted by the researcher for a second or third interview to follow-up, clarify, or verify information.
3. I will be completing a written questionnaire that takes about ten minutes to complete.
4. The interviews will be taped and transcribed. The tapes will be erased upon completion of the study.
5. The tapes will be listened to only by the researcher, transcriber and faculty advisors.
6. All tapes and transcripts will be identified only by code numbers; my name or the names of other family members will not appear in any research report, published or unpublished;
7. the content of my discussions with the researcher will be kept in strict confidence by the researcher, transcriber and the faculty advisors.
8. The researcher will answer any questions I may have about the interviews prior to the interview and will be available after the interview if I have further questions or a need to discuss the interview.

I have had the opportunity to ask any questions I wish of the researcher and have had all my questions answered to my satisfaction. I understand that I may ask for more information at any time.

I will be given a copy of this consent form, and I will be given an opportunity to see a report of the study results if I so chose.

________________________________________
Signature of Participant

Name: (printed) ___________________________ Date: ___________________________

I hereby give my consent for my daughter ___________________________ to participate in the study as described above.

________________________________________
Signature of Parent

Date

Name printed.
Appendix E.

VOLUNTEERS WANTED TO PARTICIPATE IN A STUDY
INDO-CANADIAN PARENTS AND ADOLESCENTS:
INTERGENERATIONAL CONFLICT AND RELATED HEALTH FACTORS

The purpose of this study is to identify if Indo-Canadian parents and their adolescent children experience conflicts which may contribute to health problems.

Intergenerational conflict is: disagreement between adolescents and their parents and families over issues of authority, experience, independence, communication and values.

In your family, are there differences of opinion and expectations about how adolescents should act?
Do you agree about who should be friends, associates, boyfriends?
What happens when there is a difference in opinion?
How do families resolve conflicts or differences in opinion about behavior, dating, friends, activities?
Do people in the family have health problems which are considered to be a result of conflicts or disagreements between parents and adolescents?
Do families find themselves caught between two cultures-Canadian and Indian? Does this affect how conflicts come about and what the conflicts are?

In this research project, I would like to interview adolescent girls and young women between the ages of 16 to 25 and parents of adolescent girls and young women who are experiencing or have experienced conflict. I hope to identify whether there are health problems that result from conflict between parents and their daughters. By identifying the health problems and what people do or don't do to resolve them, I hope to be able to identify what would be important for nurses and other health professionals to be aware of when providing care for the health problems.

All interviews will be confidential. There will be one to three interviews lasting from one to one and a half hours. The interviews may be at the location of your preference, or at a location which is mutually convenient. All participants under the age of nineteen will need to have signed parental consent to participate in the project.