

Alone Together

Connecting through COVID-19:

The experiences of older CALD Australians

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Introduction

How do older people from culturally and linguistically diverse (CALD) backgrounds connect with family, friends and services during periods of physical distancing and lockdowns? Has technology helped or made connecting more complicated?

Our research shows that people struggled with connecting through technology but that connections in real time with family and friends, council services, community organisations and health services made a real difference to them.

From August–November 2020 an interdisciplinary team of researchers from RMIT University, the University of Melbourne, Monash University, Bendigo Health and the Victorian Department of Justice and Community Safety interviewed ten CALD participants to explore the complex ways in which technology was used in their social lives during lockdown.

Dayani, 75

Since retirement Dayani * (75) who is Tamil and from Sri Lanka has been actively involved in an advocacy group and various cultural activities. She has no problem accessing health services, however, many of her important relationships, lived beyond the five kilometre radius permitted during the COVID lockdown. Dayani's brother died in July and it was devastating to only be allowed 10 people at the funeral and to grieve at home without loved ones: "How do I mourn 70 years of relationship by myself?", she explained. Before the pandemic, Dayani would see her family often and cook for them. Despite being adept with word, email and zoom, the virtual has been a poor substitute for her close-knit family. Her husband has offered to help her with technology, but she would prefer to ask her grandchildren:

“Oh, it is seriously miserable, because it's all on the phone, and I am a people's person. I want to have them visit. I want to hold them. I want to hug them. I can't manage these phone conversations. It's terribly boring. My grandchildren call me on various things, and they appear in the camera, and then they have different faces that they come up with, and I can't cope with that, because I don't know how to respond to those things. So, I am not a technically savvy person (...) I can just cope with my emails. I can do a Word program, and that's it, period (...) Currently they say Zoom conversations, come on the Zoom, try to have conversations on Zoom. No, I'm not happy at all.”

Anastasia, 72

Anastasia (72) is a retired dressmaker who was born in Kalamata, Greece and came to Melbourne as a teenager. A widow, she lives independently with the support of two daughters and uses dialysis services three times a week. Anastasia counts the staff at the health service she accesses as her best friends. She does not use the internet, but is well connected to services and has a Greek speaking doctor. She also is involved in Greek community activities and loves supporting other people when they need help. She enjoys going out for coffee.

Jaixin, 73

Hong Kong born Jaixin (age 73) describes herself as cosmopolitan, having come to Australia as a student, and has lived in Silicon Valley and Sydney. Jaixin calls Adelaide home, where she lives alone. One daughter is in Sydney and another in the US. A social worker prior to retirement two years ago, Jaixin still catches up with former colleagues for a coffee whenever she can. Seeing herself as a 'positive ageing' model, Jaixin likes to learn new things – her current passion is learning a two stringed Chinese musical instrument and speaking Japanese. Maintaining physical distancing, she has managed to keep up her regular activities, including walking and swimming. She is technologically confident, but has missed being able to travel and attending cultural events like concerts. Despite her upbeat disposition, she has struggled with the increased racism that has been directed to people who look Chinese during the pandemic:

“Ethnically, I am Asian, however I don't look out to the world with those eyes, you know. But, as you get older and retired and all that, that is all that, you have to deal with a whole extra layer of prejudices and unconscious assumptions from other people looking at you. I saw there was an old doctor who was the Australian of the Year and so on and so on. You know, the whole idea of the people being prejudiced about this Covid-19 because you're Chinese or something. He said it didn't matter whether I'm the Australian of the Year or what I contributed in medicine, people look at me and say “You're Chinese.””



Sergio, 82

Sergio (82) migrated from Rio de Janeiro (Brazil) to Melbourne in 1973 in his thirties with his wife and daughter, looking for a change and a new life. He has two grandchildren. He is close to a nephew who migrated from Brazil and lives in Brisbane, and speaks with him daily. Sergio's daughter lives nearby and supports both of them by phoning, visiting and taking them to health appointments. Sergio has an active social life with many friends from different cultural backgrounds, a Brazilian community group in Victoria, and the Brimbank Council. Before COVID, Sergio belonged to two social groups facilitated by the local council. Sergio also supports others; he calls his friends to check on them and offer a 'word of comfort.' He is in good health but takes care of himself. He has recently accessed health services by phone but has had the opportunity to have face-to-face consultations, which he prefers because it 'is not the same' on the phone.

Overall, Sergio is very grateful for the care services available to him and thinks that people should be more aware of these services. He enjoys a variety of activities – watching television (in different languages) and tending to his garden. Sergio hopes to do more exercise once the weather improves. He is an avid user of digital devices and online platforms. Owning an iPad, an iPhone and an Apple laptop, Sergio enjoys taking photographs and making videos (e.g., family, trips, activities), editing them in his computer and uploading to his YouTube channel. He also uses Facebook. He keeps many family photographs he brought with him from Brazil. He tries to visit Brazil every two years and has been collecting more family photographs in these trips. Sergio thinks people need to be aware that 'life is too good and too short' and hopes after COVID19 things change for the better. Sergio is philosophical about the pandemic and feels well supported by a range of organisations, family and friends. Yet, he feels for other people:

“Put it this way, the impact of COVID-19 is not only me, it's everybody. Everybody is in the same situation. You cannot socialise, you cannot go outside. You just have to do what is the main thing you have to do, like doctor's appointment, shopping very quickly and straight, you know. Some people lost their jobs. Some people are not working. If they have some support from the government, but the commitment people have got day by day life, is higher, and there is a very terrible bug in the budget or economics for people and everybody, not only me. Thanks God I am all right. But I know a lot of people are struggling.””

Gina, 84

Gina (84) arrived in Melbourne in 1952 from Italy with her husband and her younger sister. They initially lived in Prahran sharing a 3-bedroom house with three other families. Gina's husband passed away several years ago and her sister lives in a nursing home. The pandemic restrictions have made it impossible to visit her and Gina has noticed in phone calls that her sister's memory has deteriorated and she thinks this is because of the lack of personal visits. For Gina—who has two adult children, a number of grandchildren and two great grandchildren—the impact of not being regularly in each other's company feels heavy. Gina has a landline and often gets prank calls asking about her internet. She doesn't have internet. She has a mobile phone, but is not interested in setting it up or learning how to use a contact list. It doesn't have the ability for facetime or taking photos. She can read text messages from her grandchildren but she doesn't reply. Gina's children stay in touch but they are staying away and have directed her to stay away from others to reduce the risk of getting the virus. Gina continues to walk to the shops to help with her arthritis. She is missing the health benefits of her usual activities and feels that she is becoming 'old'. But Gina continues to cook and garden, and others are impressed with great soil and the 'fat worms'. She misses being able to go out for lunch by herself. Living as independently as she can felt important but also enjoying life and family. She is most worried about whether her great grandchildren will recognise her:

“The great grandson was three in April, and the great granddaughter, she is 15 months, and she was – well, I haven't seen her for seven months. So she starts walking and talking, and because I don't have – my mobile phone is only just to dial the number. So they can't send me on Facebook, things like that, you know, photos. I would really like to see them, because I think they're not going to recognise me.”

Gina's GP of 40+ years is very supportive but contact is limited. She received a flu vaccine from a local Dr within walking distance after calling NurseCall, but her GP checks her and listens to her chest. The new doctor didn't check her so she won't go back. Gina liked the idea of My Health Record – she hadn't heard about it but thought that it might help with a future hospital visit because she has to collect X-Rays from her GP. She continues to receive in home care from her physio.

Basel, 67

Basel (67) was born in Egypt, and migrated to Melbourne when he was little with his parents and five siblings. For fifteen years, he has experienced depression and believes he cannot live independently. A former bank worker, he lives with a sister and her son. Socially, he relies on a men's group for outings, unless they are health related when his sister coordinates and manages those appointments. During lockdown he could not attend the group but appreciated a daily phone call from council services:

“It's very difficult, because you know like Brimbank, like the Council, you know, we used to go out to lots of different places and have lunch and things like that, which is very handy.”

Basel says he has no friends, but is very close to his eldest sister who lives outside the five kilometre boundary and was looking forward to visiting her when restrictions were lifted. He has no computer or internet at home, but enjoys watching the television news. He walks for one hour walk every day with his sister and appreciates the time outside.

Conclusion

These vignettes from our interviews show how important family members, friends and social services are for the wellbeing of older adults from CALD backgrounds who both use or do not use technology. More research is needed to understand the complex ways older adults use technology for social inclusion—a situation amplified by the lockdown and restrictions. The gaps in literacy and media access highlight the need for more community-orientated activities around digital media literacy through “social connectors” as explored by organisations like U3A. These early findings show that ageing is not a “problem” of individual responsibility; older people are both givers and receivers of care imbricated in local and transnational networks.