

Introduction and Background

The older immigrant population is one of the fastest growing immigrant populations in the U.S. The number of new immigrants 65 and older arriving on an annual basis is more than twice what it was in 2000: 3.3 million in 2000 to 7.5 million in 2019 – a growth of 126% (Camarota & Zeigler 2021).

Despite this growing population, gerontological research and program development in the U.S. have primarily focused on the native-born population or early-life migrants, leaving the unique challenges and needs of older immigrants overlooked (Maleku et al., 2021). *Older immigrants, especially those from developing countries with lower literacy rates, are more vulnerable to a multitude of occupational deprivations because of language, transportation, and many other cultural and political barriers.*

Occupational Deprivation: Situations in which people’s needs for meaningful and health-promoting occupations go unmet or are institutionally denied (Brown, 2008).

This research study explores areas of occupational deprivation, their causes, and related themes and challenges among older immigrants in the U.S. and presents experts’ recommendations on future directions.

Methods

Literature Review (n=13)

Semi-Structured Interview with Participants (n=6)

Multidisciplinary Experts Interview (n=4)

Immigrants Ally, Immigration Lawyer, Refugee Delegate, International OT

Thematic Data Analysis

Compare and Present Findings

Older Immigrant Participants (n = 6)

- 100% live with family members
- Current residency states: Massachusetts, Florida, Rhode Island, New Hampshire

Countries:

Nepal
Colombia
Kenya
Bhutan

Age:

55-86

Gender:

5 F
1 M

Languages:

Nepalese
Spanish
Somali
Bhutanese

Duration of stay:

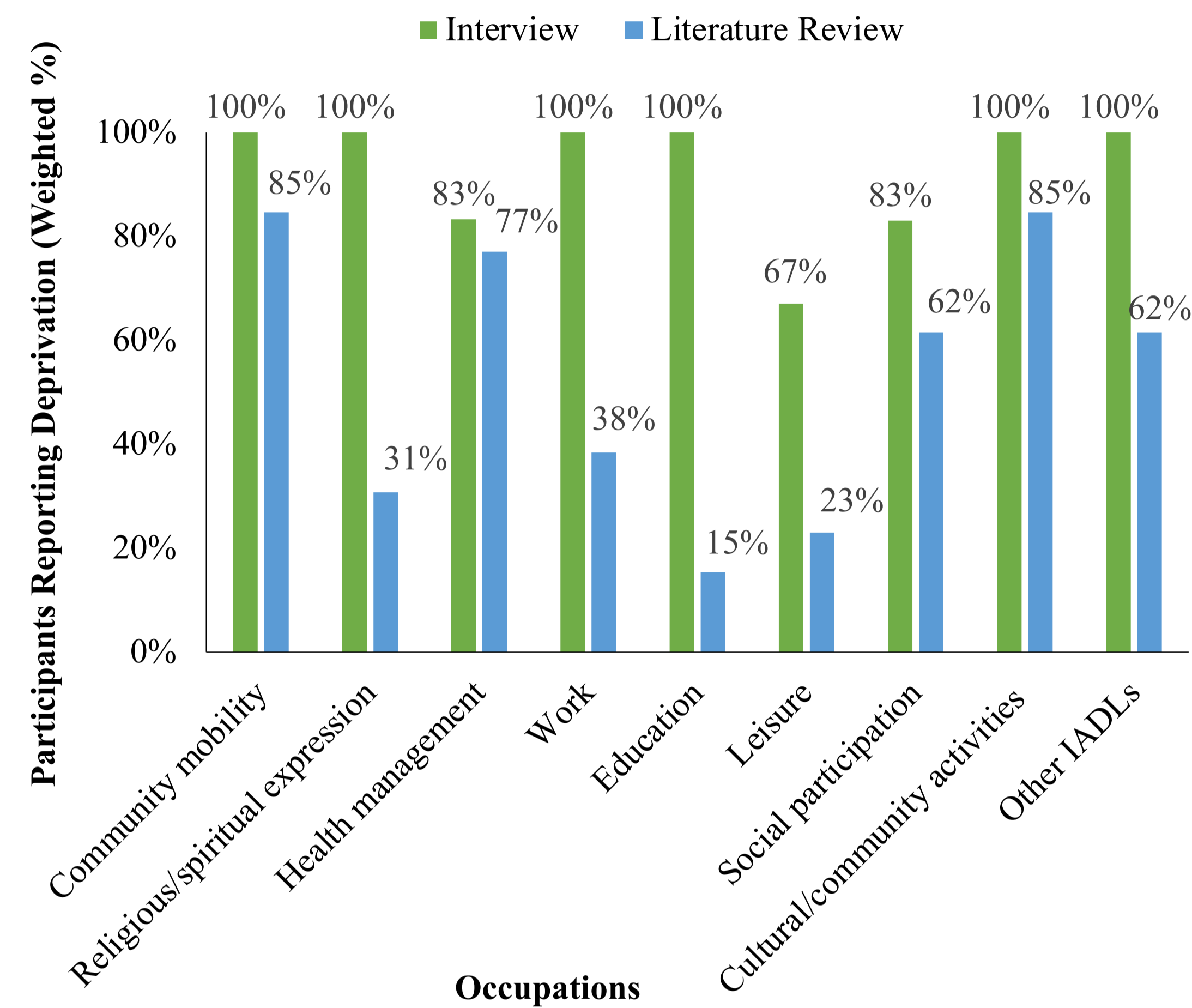
2-22 years

Reason for relocation:

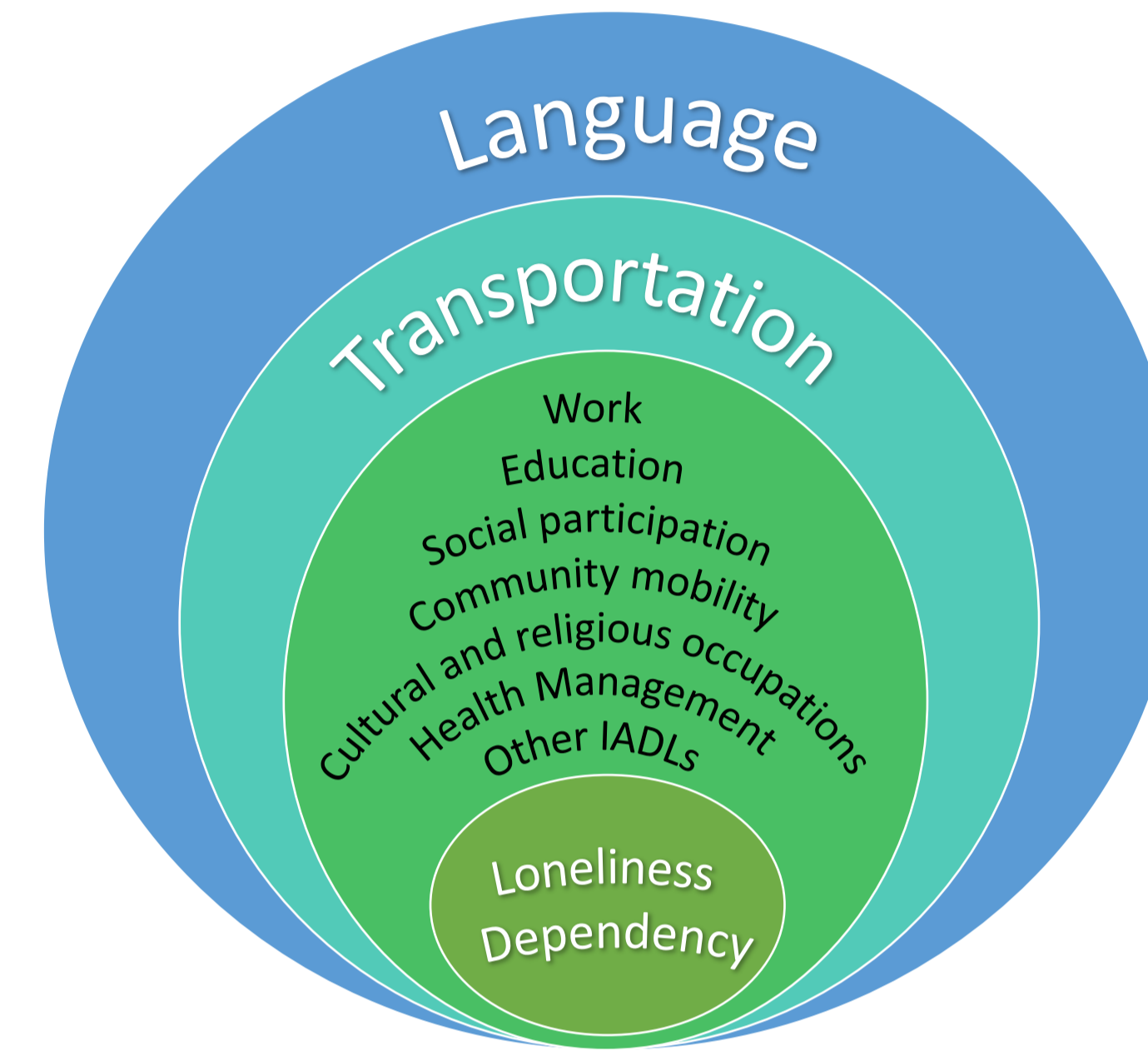
Family
Refugee
Settlement

Results

Reported Areas of Occupational Deprivations



Major Barriers to Meaningful Occupations



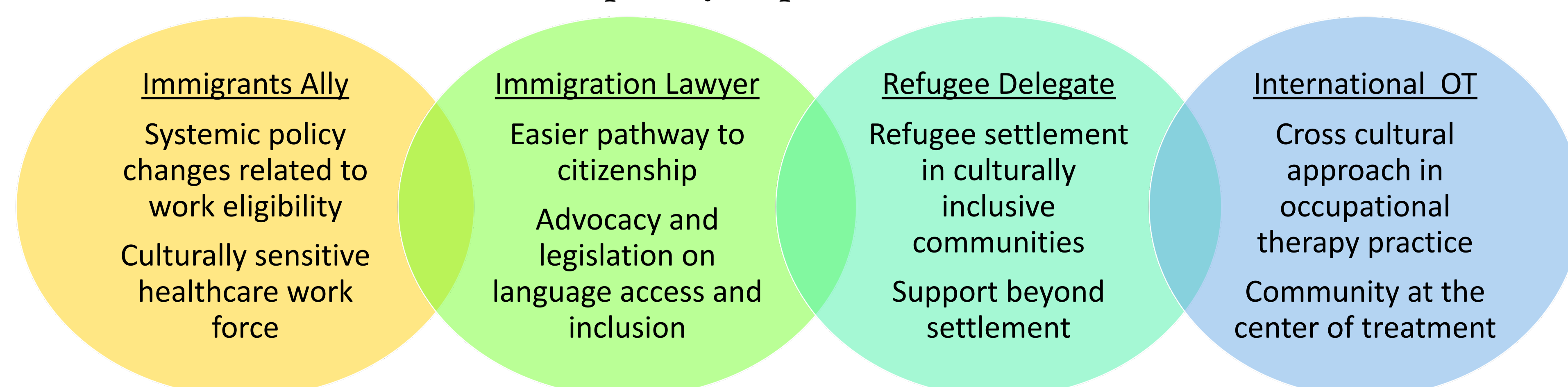
“I am dependent on my children for transportation. They take me out when they have time, or else I can’t leave the house by myself.” (Female, 61)

“My religion holds the deepest meaning for me. I feel lonely and depressed when I’m not able to do those activities.” (Female, 86)

Themes Across Triangulating Sources

Social	Culture and Religion	Work and Education	Personal
<ul style="list-style-type: none"> • Lack of community programs • Lack of sense of community bonding • Aging out of place • Lack of inclusive social programs in the area • Social isolation • Travel restriction with refugees • Loss of valuable social and familial relationships 	<ul style="list-style-type: none"> • Cultural differences within same family • Lack of religious holidays and places of worship in the area • Difference in health belief and practices • Cultural context of aging • Acculturation challenges in older age • Cultural/religious deprivation due to travel restrictions 	<ul style="list-style-type: none"> • Inability to work and generate income in spite of interest and skill level • Lower literacy rate • Differences in work culture • Lack of transfer of educational and work credentials • Lack of educational programs to accommodate non-English speakers • Exploitation of labor 	<ul style="list-style-type: none"> • Loneliness and depression • Dependency and decreased autonomy • Lack of purposefulness • Domestic burden • Challenges of suburban living

Multidisciplinary Experts Recommendations



Discussion

Language and transportation represent key elements related to increased risk for multiple areas of occupational deprivation among older immigrant populations.

- None of the participants had ever driven a car in the U.S., and all of them reported challenges with community mobility and were dependent on others for transportation for IADLs and other daily activities.

Limited research in the US critically exploring this important topic

- Despite 100% of participants reported some level of deprivation in work, education, community engagement, and religious activities, most of the research articles did not address those areas of occupational deprivation.

Challenges with acculturation: The duration of stay (in the U.S) among the participants ranged from 2-22 years. Regardless of their duration of stay, however, barriers and deprivations across all participants were very similar.

Access to resources: Lack of community programs with culturally inclusive services were reported as major barriers by both participants and experts.

Implications for quality of life: Losing ability to engage in meaningful occupations led to loneliness and feelings of purposelessness in participants despite living with family members and, in many cases, having some access to other social resources.

Study Limitations:

Qualitative methodology examined in-depth perspectives and personal narratives regarding occupational deprivation; however, this approach limits the external generalizability of the findings

Conclusion

Overall, this study highlights the severity and frequency of occupational deprivation in older immigrant adults throughout the U.S. It also identifies a gap in current research on migration barriers, health care resources, and program development in areas of community, social, and health care services

Implications and Future Directions

- Increased focus on research investigating unique challenges of late-life migration and acculturation
 - Situate this research in the context of future program development and support systems to meet these unmet needs
- Continue advocacy efforts for inclusion and cultural humility in social and healthcare services including language accessibility, and access to public benefits
- Empower OT practitioners and other healthcare professionals to evaluate, treat, and set intervention and goals reflective of client’s environment with a focus on community integration and culturally inclusive programs
- Develop comprehensive OT assessments for in-depth evaluation of migration challenges and barriers as related to meaningful occupations and participation of older immigrant adults

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