

## **Alone in Paradise: A Review of the Literature Related to Single, Immigrant Mothers in Canada**

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*In most studies, the phenomena of immigration and single motherhood are examined and explored in isolation from each other. In this manuscript, we adopted intersectionality theory as the framework for examining the literature related to the lived experiences of single, immigrant mothers in Canada. We explored single motherhood and immigration in relation to multiple points of intersection concerning dimensions of cultural identity. We began by examining how intersections of gender and ethnicity affect single, immigrant mothers in terms of self-perception, sociocultural experiences, and acculturation processes. Single, immigrant mothers receive specific gendered messages from their families, cultures of origin, and Canadian culture. These messages, specific to the context of mothering, shape their cultural identity and role in society.*

*We also examined the impact of Canadian and country of origin mothering ideologies on single, immigrant mothers, how discourses around these ideologies endorse potentially unrealistic images of the ideal or good mother, and how they affect the mother-child relationship. Single, immigrant mothers hold multiple, nondominant intersecting identities and may not portray adherence to the dominant mothering ideologies, from either Canada or their country of origin. As a result, they are more vulnerable to marginalization, discrimination, and mental health problems. We considered how the intersections of gender, ethnicity, single motherhood, social class, and immigration affected single, immigrant mothers' labour market participation, social support, mental health, and acculturation. We offer insights into the challenges that single, immigrant mothers face and point to ways to improve social and mental health services for these women.*

Being a single, immigrant mother can be a lonely and challenging experience. Many immigrants arrive in Canada with hopes of gaining economic and educational opportunities, particularly for their children (Vesely et al.).

However, they face considerable acculturation challenges, such as acculturative stress, unemployment, culture shock, and loss of support systems (Browne et al.; Vesely et al.; Viruell-Fuentes, Miranda, and Abdulrahim; Zhu). Although there is a growing body of research on immigration and cross-cultural transitioning, little is known about the sociocultural experiences of single, immigrant mothers in Canada (Browne et al.; Zhu).

Single, immigrant mothers often hold multiple nondominant identities related to their immigration status, gender, ethnicity, social class, and status as a single mother. The intersections of, and interplay among, these dimensions of cultural identity affect not only their sociocultural experiences but also their perceptions of the world and themselves (Viruell-Fuentes, Miranda, and Abdulrahim). Intersectionality theory can be instrumental to understanding the multiple points of marginalization, which may influence counselling practices and mental health outcomes for this population (Collins, “Enhanced”; Crenshaw; Viruell-Fuentes, Miranda, and Abdulrahim; Warner, Settles, and Shields). Intersectionality is described as “the complex ways in which social variables, such as race, ethnicity, gender, sexual orientation, social class, and other factors combine to shape a person’s overall life experiences—particularly with respect to the prejudice and discrimination that one may face within society” (García, para. 20). In this article, we examine the interplay between single motherhood, immigration, gender, ethnicity, and social class. We critiqued these intersections and considered each of the following: (a) cultural discourses and norms related to gender; (b) Canadian and culture of origin ideologies of motherhood; (c) the mother-child relationship; (d) vulnerability to marginalization; (e) labour market participation; (f) potential for lack of social support; (g) challenges to mental health and acculturation; and (h) barriers to accessing health and mental health services.

It is rare for single mothers and their children to immigrate to Canada on their own because sole custody or permission from the father is required (Immigration, Refugees and Citizenship Canada). Immigrant women most often migrate with their spouses as economic immigrants in search of a better life for themselves and their children (Sinacore, Kassan, and Lerner; Statistics Canada; Vesely et al.), and they subsequently end up as single parents. Single motherhood has many forms: unplanned motherhood outside of a committed relationship, single motherhood as a result of relationship breakdown or death of a spouse, and, more recently, single motherhood by choice (Daryanani et al.; Kelly). It is important to note that much of the research on single mothering across cultures assumes heteronormativity and positions the institution of marriage as a social norm. We note these dominant discourses (Collins, “Enhanced”), which go beyond the scope of this manuscript, and report these studies using the language of the authors. Following Collins (“Culturally Responsive”), we do not capitalize “euro-western” to counter dominant,

power-over discourses, and we use lowercase white, but we capitalize specific nondominant ethnicities such as “Asian.”

### **Intersections of Gender, Ethnicity, and Motherhood**

Understanding the experiences of single, immigrant mothers begins with recognizing the complex interplay and influence of gender and ethnicity in their countries of origin and throughout the process of cross-cultural transitioning (Palmerin Velasco). It is important to note that the experiences of gender and gender role socialization vary significantly across ethnicities (Curry Rodriguez; Palmerin Velasco). For example, males and females are assigned different gender roles in Mexican families. Housework and childcare responsibilities are exclusive to girls and women; males are given more freedom, permission, and choices (Palmerin Velasco). In South Asian households, girls are taught to nurture, to obey, and to stay inside the house; boys, in contrast, are expected to become successful breadwinners for the family and so are exposed to the outside world (Zaidi et al.). Because these gender roles involve positioning of power in many cultures, females are more likely to fall victim to intimate partner violence (Abraham and Tastsoglou; Du Mont et al.; Palmerin Velasco).

Culturally embedded messages about gender and gender roles often influence choices about, and experiences of, mothering (Wong and Bell). Sociocultural messages and ideologies about how to be a so-called good woman vary across cultures (Schafer; Stoppard and McMullen; Wong and Bell) and reflect deeply entrenched expectations that impact a woman’s self-identity and her place and privilege in society (Wong and Russell-Mayhew). Cultural narratives that convey shared ideas about what it means to be female shape sociocultural pressures that girls and women bear (Wong and Russell-Mayhew). These messages dictate how women should think, feel, and act in ways that follow gender norms in their society (Schafer; Wong and Bell). For example, if the mother from a culture that values women remaining in the home becomes an economic provider in the household, the family may face public scrutiny for their nonnormative power distribution (Palmerin Velasco).

Although Chinese mothers differ culturally from Mexican mothers, they share similar “good mother” socialization (Caplan; O’Reilly; Schafer; Wong). The good mother ideologies, in both dominant and nondominant cultures, define good mothers in accordance with pervasive and potentially oppressive ideals. Chinese mothers, for example, are expected to be consistently giving, caring, nurturing, capable, fulfilled, sacrificing, and happy (Wong). In urban China, mothers are responsible for the physical, emotional, educational, and moral development of the child (Evans). Women adopt the role of the “wonder mother” who must take on all maternal tasks, including the role of the

supportive and empathetic friend (Evans) and be “supereverything” (Choi, Baker, and Tree). Messages about gender roles exist across multiple media and may affect women’s self-identity, experiences, and life decisions (Wong; Wong and Bell).

Women’s experiences of cross-cultural transitioning also are affected by the interplay of gender discourses and norms between their countries of origin and their receiving countries (Browne et al.; Palmerin Velasco; Zaidi et al.). Mexican women, for example, are not granted the same autonomy with regards to cross-cultural transitioning because migration is viewed as a masculine domain (Palmerin Velasco). In other words, women are discouraged from immigrating alone because they do not fit the image of the traditional breadwinner (Zaidi et al. 2014). Upon arrival in Canada, the United States, or other euro-western-influenced countries, immigrant mothers often hold a sense of responsibility to preserve their traditional norms, including their role as women in their cultural community (Browne et al.; Zaidi et al.). However, they may face conflicting views between the dominant individualist ideology in the receiving country, in which autonomy and independence from others are prioritized over connection and mutuality (Collins, “Enhanced”; Lenz), and the beliefs and practices of their country of origin. As a result, many begin to question their self-identity (Zaidi et al. 2014). For example, according to South Asian family norms, the role of the mother is to maintain the traditions and customs of their culture (Zaidi et al; Wong). The reputation of the family is heavily dependent on the mother’s ability to conform to gender-specific norms (Zaidi et al.; Wong). Immigrant women, and immigrant mothers specifically, face tensions as they begin to challenge their traditional beliefs and values related to different family systems (Jamal Al-deen and Windle; Zaidi et al.). The lived experiences of these women, regardless of their immigration status, is greatly impacted by their gender role, which necessitates further exploration of gender in relation to the social, cultural, and institutional influences on mothering in immigrant populations (Curry Rodriguez).

### **Intersection of Mothering Ideologies and Immigrant Women**

Motherhood has long been recognized as a socially constructed concept for which there is no universal definition; as a result, it positions women to raise their children in accordance to potentially oppressive social norms (Hays; Jamal Al-deen and Windle,). The image of the ideal mother exists within euro-western parenting beliefs and practices and is often associated with idealized notions of the white, middle-class, and nuclear family (Jamal Al-deen and Windle; Zhu). In Canada, there are dominant and pervasive myths surrounding the concept of “perfect mothering,” which can make it difficult for mothers to feel confident in their parenting abilities (Sawers and Wong; Wong and Bell;

Wong). So-called failed mothering is often connected with the parenting practices of nondominant groups, including single mothers and immigrant mothers, who do not, or cannot, conform to this dominant Canadian cultural norm (Wong & Bell, 2012; Zhu, 2016). Mothers from nondominant cultures often deviate from the ideological construct of the good mother in euro-western countries, and as such, these so-called bad mothers face social consequences such as marginalization and disconnectedness from society (Jamal Al-deen and Windle; Wong and Bell). These social consequences often negatively affect their mental health and cross-cultural transitioning experiences (Browne et al; Jamal Al-deen and Windle; Zhu).

Immigrant mothers encounter new western ideologies in which more social capital and power is available to the ideal mother than the failed mother (Wong and Bell; Zhu). Immigrant mothers who are unable to mirror dominant euro-western norms for infant care, breastfeeding, and work-life balance are portrayed as bad mothers (Zhu). For example, mothers immigrating from East Asia are confronted with stereotypes and potentially harmful assumptions, such as the image of the “model minority” (Petersen). The model minority discourse is manifested in potentially harmful stereotypes, which are used to position Asian people as overachieving, competitive, successful in math, and so on (Duncan and Wong; Petersen; Wong). Muslim immigrants are further marginalized because they are compared unfavourably to this model minority discourse (Chang). East Asian mothers also encounter the “tiger mother” stereotype (Chua), in which the mother has strict rules and high academic expectations for her children (Duncan and Wong; Wong). Due to this strong and pervasive generalization about East Asian mothers, these mothers are measured against the differing western parenting norms, thus strengthening ideological constructions of motherhood and segregating these women from their new receiving society.

Due to societal pressure, immigrant mothers often find themselves trying to balance their parenting style in accordance with the new culture while maintaining values and norms from their culture of origin (Baum and Nisan). They may face additional social consequences for not fully meeting the good mother discourse from their original cultural group (Baum and Nisan; Kiang, Glatz, and Buchanan). Nehami Baum and Ravit Nisan interviewed immigrant mothers about their experiences of mothering. Participants disclosed that their own mothers laughed and ridiculed them for following “modern” Canadian parenting norms, such as talking to the baby (Baum and Nisan). Indeed, immigrant mothers face familial and societal pressure to instill traditional cultural values in their children (Baum and Nisan; Kiang Glatz, and Buchanan). When these mothers fail to achieve the good mother ideology from their culture of origin, not only do they experience judgment from their families, but they also judge themselves (Baum and Nisan; Kiang, Glatz, and

Buchanan). For example, Lisa Kiang, Terese Glatz, and Christy Buchanan conducted a study on parenting self-efficacy in immigrant families and found that Asian immigrant mothers were more likely to feel competent when they can efficaciously convey heritage and traditional values to their children. The opposite also holds true: Asian immigrant mothers who are unable to transmit these cultural messages may feel less competent in their mothering skills. Within the notion of the ideal immigrant mother, women are expected to follow rules and ideals of mothering (Zhu), which is particularly challenging for immigrant women who face both euro-western and culture of origin social constructions of the ideal mother. These mothers often develop feelings of severe guilt and shame over time because of these unrealistic, and sometimes conflicting, standards (Wong and Bell; Zhu).

### **Mothering Ideologies and Single, Immigrant Mothers**

In addition to the challenges of living up to the good or ideal mother discourses, socially constructed stereotypes of single motherhood and family structure also pose barriers for single, immigrant mothers (Liegghio and Caragata; Wiegers and Chunn). Within the scope of the research on single motherhood, social stigma has been documented as an increasing concern (Liegghio and Caragata; Wiegers and Chunn). The social depiction of single motherhood, often manifested in the form of divorce, has long been considered a “violation of women’s moral code” (Boney 65). There are lingering biases against single mothers in North America despite the increased prevalence of divorce (Liegghio and Caragata; Wiegers and Chunn).

The divorce of two living parents may precipitate experiences and challenges that differ from families who suffer from the death of a parent (Rappaport). For divorced mothers, the mother-child relationship may be weakened. Due to high stress, changes to the family environment, and postmarital conflict, mothers may be less emotionally available to their children (Muhammad and Gagnon; Rappaport). Although divorce is gaining more acceptance in euro-western cultures, many nondominant cultural groups are strongly against the notion of divorce and separation (Wang). Within the Muslim community, Zahra Ayubi notes that women are encouraged to stay in relationships, regardless of any abuse or infidelity that they encounter. A woman who chooses to file for divorce is often characterized as “a woman of little patience and loose morals” (Ayubi 79). For Chinese immigrant wives, their marital role becomes a significant aspect of their self-identity (Yu). In an interview conducted by Yan Yu, one of the Chinese immigrant wives revealed that she had chosen to stay in a marriage that made her feel devalued and inferior to her husband. She stated that “if she divorced ... she [would] lose more than expected and she would struggle financially” (664). Similarly, due to strong

values in familism, Hispanic women feel obligated to maintain the family structure. When these women consider divorce, they risk losing the social support networks of their family and community members (Afifi et al.).

Due to pervasive patriarchal gender roles, American women face pressure in meeting a set of responsibilities that included childrearing, nurturing, and sustaining family relationships (Boney; Ferraro et al.; Wiegers and Chunn). In 2015, Wanda Wiegers and Dorothy Chunn conducted interviews with twenty-nine Canadian women who identified as single mothers to examine experiences of stigma in a heteronormative, two-parent dominated society. The participants described feelings of otherness, shame, and unworthiness due to prejudicial and discriminative attitudes from others. These single mothers were labelled as selfish for depriving their child of a two-parent family or were seen as too incompetent to raise their child in a father-absent environment. These attitudes towards single mothers lead to status loss, isolation, and social exclusion, causing detrimental effects to the mental health of these participants.

Single mothers, particularly immigrant mothers, are expected to stay in relationships and conform to socially constructed norms (Ayubi; Yu). These external expectations can significantly impact their mental health and overall wellbeing (Zhu). The pervasive and potentially harmful effect of mothering ideologies can lead to increased feelings of guilt and shame in this population due to the societal consequences of stereotyping and marginalization (Afifi et al.; Ayubi; Wong and Bell). The experience of being a single, immigrant mother therefore cannot be understood fully through research that explores immigrant mothers or single mothers alone and independently. Instead, careful examination of the complex and intertwining identities of this population, from an intersectionality perspective, is needed.

### **Intersectionality of Immigration and Single Mother-Child Relationships**

Immigrating to a new country can cause tremendous stress to, and imbalance within, the family (Guo et al.; Renzaho et al.). For many migrant families, immigration is associated with acculturative stress, intergenerational conflict, and behaviour problems in children (Belhadj, Koglin, and Petermann; Browne et al.; Renzaho et al.). First generation immigrants often face psychological, social, cultural, and economic barriers for which they lack coping skills and practical resources; the result is acculturative stress (Nassar-McMillan; Rogers-Sirin, Ryce, and Sirin).

In a study conducted by Xinyin Chen and Hennis Chi-Hang Tse, first generation Chinese immigrant children were more likely to develop problem behaviours than their second generation counterparts. In Chinese households, it is both a norm and an expectation for children to take care of their aging parents. However, when immigrating to Canada, the younger generation often

adopts individualist values (e.g., independent living and autonomy in decision making) that conflict with their parents' worldview (Bemak and Chung; Guo et al.; Rodriguez-Keyes and Piepenbring). As a result of this conflict, stress in the mother-child relationship is inevitable (Belhadj, Koglin, and Petermann). Intergenerational conflict and parent-child alienation occurs when the immigrant parents and youth diverge in their acculturation processes, negotiate bicultural or multiple cultural belongings at different paces, or embrace different sets of beliefs, values, and worldviews (Renzaho et al.; Rodriguez-Keyes and Piepenbring). In Arab families, for example, conflicts may exist about choices surrounding education, culture, religion, dating, and marriage (Rasmi). This is especially the case for daughters because females are more restricted than males in Arabic culture (Rasmi).

The intersectionality of immigration and single motherhood adds another layer of complexity to the lived experiences of single mothers and their children (Curry Rodriguez; Viruell-Fuentes, Miranda, and Abdulrahim). When the mother's language competence in English is low, the child and mother may feel stressed and frustrated with the communication barrier (Belhadj Koglin, and Petermann). In Canada, immigrant women are susceptible to poverty, discrimination, and barriers to financial aid (Dlamini, Anucha, and Wolfe; Holumyong et al.). In addition, single, immigrant mothers are more likely than partnered mothers to experience challenges related to physical and mental health as well as social, economic, and parenting demands (Daryanani et al.; Dziak, Janzen, and Muhajarine; Muhammad and Gagnon). Add to this the challenges of dealing with cross-cultural transitions and mother-child conflicts (Dziak, Janzen, and Muhajarine). These cumulative challenges have an effect not only on the single, immigrant mother's experiences but also on the development and mental health of their children (Dziak, Janzen, and Muhajarine; Muhammad and Gagnon). For instance, Elizabeth Nixon, Shelia Greene, and Diane Hogan suggest that youth who grow up in single-mother families are more likely to engage in disruptive and dysfunctional behaviours than youth who grow up in two-parent families. The authors posit that single mothers have difficulty balancing autonomy and control in their parenting practices (Nixon, Greene, and Hogan). Another possibility is that single mothers' parenting is sometimes compromised due to external demands and stress (Daryanani et al.). Although current literature exists on the single mother-child relationship, as well as on the immigrant mother-child relationship (Belhadj, Koglin, and Petermann; Curry Rodriguez; Daryanani et al.; Dziak, Janzen, and Muhajarine; Viruell-Fuentes, Miranda, and Abdulrahim), there is a need for additional research about how the intersections of single motherhood and immigration affect these complex family systems.



## **The Added Influence of Discrimination and Social Marginalization**

Like other nondominant populations, immigrants are more likely to be exposed to discriminatory interactions, practices, and policies (Ginsberg and Sinacore; Ratts et al.). Discrimination and stigmatization can have profound adverse effects on the psychological wellbeing of immigrant populations (Viruell-Fuentes, Miranda, and Abdulrahim; Wilkins-Laflamme). Following the 9/11 terrorist attacks, anti-immigrant sentiments escalated and stimulated anxiety and fear in the United States, which divided American-born citizens and Muslim immigrant populations (Viruell-Fuentes, Miranda, and Abdulrahim). Islamophobia also spiked in Canada (Wilkins-Laflamme) and continues to be experienced by many Muslim women (Saleem). Anti-immigrant messages, through mainstream media and broader cultural discourses, are now visible to Canadian audiences (Wilkins-Laflamme). Islamophobic attitudes include “seeing Muslims as separate from society, as Other with no values in common with Westerners and not influenced by Western culture in any way” and “seeing all of Islam and Muslims as inherently mistreating women and generally traditionalist” (Wilkins-Laflamme 90). As a result of discrimination and stigmatization, immigrant mothers with Arabic-sounding names have experienced an increase in poor birth outcomes and mental health problems (Viruell-Fuentes, Miranda, and Abdulrahim; Wilkins-Laflamme). Some Muslim women in Canada have also been discouraged from covering their faces in public (Wilkins-Laflamme).

Immigrant mothers from a diverse range of countries of origin also experience discrimination in regards to their childrearing beliefs and practices (Fleck and Fleck; Tajima and Harachi). For example, Chinese and Punjabi parenting are described as controlling or authoritative, whereas individualist culture is positioned as normative (Ochocka and Janzen). Such stereotyping may result in immigrant mothers feeling unsupported, confused, and overwhelmed in their new and unfamiliar environment (Fleck and Fleck). In addition, stress is amplified for single, immigrant mothers because immigrants’ education and skills developed in their country of origin are often discounted, which poses a barrier to economic acculturation (Sinacore, Kassan, and Lerner).

All mothers have unique life experiences that cannot be generalized under a single category. It is evident from the literature that single mothers have different experiences from partnered mothers, just as immigrant mothers face different barriers than do Canadian-born mothers. Although some research exists on these mothering experiences, there is a need for further investigation of the experiences of mothers who are subjected to multiple forms of societal oppression, particularly mothers who identify as immigrant and single.

## **Mental Health and Acculturation Challenges**

As a result of their multiple marginalization, based on discourses about motherhood and single motherhood as well as their immigration experiences, single, immigrant mothers are at risk for numerous mental health and acculturation challenges (Lenette). We explore some of the most common challenges in this section: isolation and depression; poverty, unemployment, and underemployment; loss of social support; and acculturative stress.

### ***Isolation and Depression***

Immigrant women need connection to peers and community members who share the same culture (Urindwanayo). Single, immigrant mothers risk experiencing isolation and marginalization (Aydin, Korukcu, and Kabukcuoglu), and mothers who are isolated and raising children without support are at extreme risk for anxiety and postpartum depression (Guruge et al.; Muhammad and Gagnon; Sawers and Wong; Urindwanayo). Good mother ideals and the associated guilt and shame from internal and perceived external judgment elevate the risk of perinatal mood and anxiety disorders for mothers generally (Dunford and Granger). The risk for postpartum disorder is twice as high for immigrant mothers compared to their native-born peers (Thomson et al.; Vigod et al.). Furthermore, being a single, immigrant mother, compared to those who are partnered, is the best predictor for postpartum depression (Guruge et al.), highlighting the significance of intimate partner support in decreasing postpartum anxiety in new mothers during and after pregnancy (Sawers and Wong).

These challenges are further magnified by cross-cultural transitioning, loss of social support, and lack of knowledge of resources (Guruge et al.). Furthermore, single mothers face barriers to these resources, both economic and social, because they have less time available to create connections with community members (Colton, Janzen, and Laverty). Thus, isolation and marginalization can present many challenges for immigrant mothers in receiving support from social institutions, such as schools, childcare programs, and health services (Aydin, Korukcu, and Kabukcuoglu). With weak or no partner support, immigrant women are more likely to experience depressive symptoms (Guruge et al. 2015).

### ***Poverty, Unemployment, and Underemployment***

Single, immigrant mothers face financial and structural barriers that go beyond the work-life balance dilemma faced by other mothers (Knoef & Ours, 2016; Browne et al.). There are increasingly more immigrants living in low socioeconomic conditions and shelters, who are at risk for exposure to violence and poverty (Viruell-Fuentes, Miranda, and Abdulrahim). Immigrant women

have higher unemployment rates than women born within the country (Lu, Wang, and Han) and are more likely to live below the poverty line (Khanlou et al.). The high unemployment and poverty rate in immigrant populations in general is often due to factors such as language barriers, education, culture shock, and discrimination (Dlamini, Anucha, and Wolfe; Lu, Wang, and Han). Nombuso Dlamini, Uzo Anucha, and Barat Wolfe found that immigrant women were likely to encounter the biased cultural assumption that their educational background and work experience were of less value or of lower standards when compared to those of their Canadian counterparts (Dlamini, Anucha, and Wolfe). Unemployment and job loss are contributing factors that may precede immigrant depression, postpartum depression, and other mental health problems (Urindwanayo). This is particularly true for immigrant women who are unemployed and expecting a newborn (Urindwanayo).

These acculturative and systemic challenges are debilitating for single, immigrant mothers who have no choice but to participate in the labour market (Wiegers and Chunn). They often work at low-paying jobs with limited or no employee benefits, and the social standing of single motherhood, even for nonimmigrants, has been associated with employment instability (Wiegers and Chunn). Bibhas Saha suggests that discrimination against mothers in the labour market is linked to the social construction of mothering priorities. Specifically, mothers are expected to accept the competing priorities of children and work demands; this social expectation has been linked to women's lower success in attaining meaningful and long-term employment (Saha). Women who feel societal pressure to raise children are less likely to return to the labour market (Saha).

The high costs of childcare compared to mothers' often limited financial resources are another contributing factor to their challenging experiences in the labour market (Forry). In Canada, safe, reliable, and high quality childcare is expensive (Forry). The cost of fulltime child care per month for infants across Canada can range from \$175 to \$190 in some parts of Quebec to \$1,685 in Toronto; the highest rate for toddlers is in Vancouver at \$1,407 (Macdonald and Friendly). In Alberta, the provincial norm was about \$1000 (Macdonald and Friendly). Single mothers do not have the social and financial support of a partner and are typically the sole providers for their children (Wiegers and Chunn). These mothers with one household income may feel stressed and overwhelmed, and childcare presents a barrier to job stability (Knoef and Ours).

### ***Loss of Social Support***

A common trend for immigrant populations in general is the loss of family and friends after relocating to a new country (Guruge et al.). In particular, single, immigrant mothers are at risk of losing preimmigration social support systems (Vigod et al.). For those coming from cultures that expect women to

hold the family together at all costs, becoming a single mother in the new country means risking the loss of social and financial support from relatives and extended family members (Lenette; Knoef and Ours).

Sources of social support include families, friends, ethnic communities, and networks provided by healthcare professionals and social workers (Guruge et al.). Social supports can assist in decreasing stressors that immigrant mothers tend to experience related to family responsibilities, role confusion, and maintaining family traditions (Msengi et al.). Without these social supports, single, immigrant mothers become susceptible to emotional distress and mental illness (Guruge et al.). As noted above, a lack of social support is associated with increased postpartum depression and other mental health concerns among immigrant women (Guruge et al.; Urindwanayo). Immigrant women are in need of emotional and social support during the antenatal and postpartum period and, unfortunately, do not have their family members or close friends nearby to meet their needs effectively (Morgan et al.; Urindwanayo).

### *Acculturative Stress*

The sociocultural experiences of immigration and single motherhood can result in high levels of stress and anxiety as well as other health challenges (Guruge et al.; Muhammed and Gagnon; Thomson et al.). Researchers exploring the healthy immigrant effect have suggested that migration can have a negative impact on immigrant health (Thomson et al.). Migration issues, such as language barriers, marital conflict, intergenerational conflict, and physical health problems, may increase the risk of postpartum depression for immigrant women (Morgan et al.). In examining parenthood and self-perceived stress among Canadian families, both immigrant and nonimmigrant, Ali Muhammad and Alain Gagnon indicate that single mothers experienced the highest level of stress in comparison to married or cohabiting couples and single men. The reason for this high degree of stress is due to the intersection of factors, such as education, income, and sense of belonging, that single mother experiences (Muhammad and Gagnon). Immigrant women also experience significant stress when their circumstances involve partner violence or conflict (Guruge et al.). In immigrant households with high conflict and cultural obligations to keep the family intact, relatives may minimize the issue of violence, blame the victim, and discourage mothers from leaving (Guruge et al.).

### **Counsellors and Other Healthcare Providers: Part of the Problem or Part of the Solution**

Immigrant mothers, and immigrants in general, are more likely to experience underdiagnoses of health and mental health problems, be underserved within their communities, and be mistreated by health and mental health

practitioners (Thomson et al.; Vigod et al.). Healthcare providers may exhibit similar forms of discrimination and stigmatization towards immigrants as those experienced in the community more broadly, and institutional policies and practices may reduce accessibility and responsiveness of services (Higginbottom et al.; Imel et al. 2011).

In Canada, immigrant populations face significant challenges that limit their access to mental health services. These challenges include lack of awareness of mental health services, cultural barriers to seeking mental health support, and settlement difficulties complicating the process of utilizing services (Saleem and Martin; Thomson et al.). In a review of over twenty years of relevant Canadian literature, Mary Susan Thomson has stated that immigrant new mothers are not aware of services or mental health issues, such as those related to postpartum depression: “Limited awareness of culturally appropriate community health services incapacitate refugee, asylum seeking and new immigrant mothers to cope with post-partum depression” (Thomson et al. 1897). Researchers have identified factors that can influence how immigrant mothers engage in accessing treatment, including the following: gender roles and cultural incompatibility in relationships; their reluctance to seek help due to the stigma of mental health; their preferences, acceptance of mental health issues, and belief in other cultural practices; and settlement barriers, including transportation and limited mobility (Thomson et al.; Vigod et al.).

Complicating limitations to service access, single, immigrant mothers face financial, emotional, social, and cultural barriers that increase their risk for developing mental health problems (Daryanani et al.; Dziak, Janzen, and Muhajarine; Muhammad and Gagnon). In order to help alleviate stress in immigrant populations in general, researchers have suggested a need for a more services that are culturally appropriate and available in multiple languages (Muhammad and Gagnon; Thomson et al.; Vigod et al.). Muhammad and Gagnon have also argued for support related to education, employment, and community engagement. Some authors point to the role of cultural or spiritual leaders and healers in supporting immigrant health (Saleem and Martin). However, the cultural discourses related to single mothering that we have noted throughout this article may pose barriers for some women.

Single, immigrant mothers face challenges surrounding health equity and access to health care due to language and culture (Higginbottom et al.; Urindwanayo). Language can have strong effects not only on employment and mothering experiences but also on communication with healthcare providers (Delara, 2016). Many immigrant women are from countries where the native language is not English. Therefore, language barriers may have an impact on relationships to, and interactions with, the healthcare system as well as on how these women’s needs are addressed (Urindwanayo). Additionally, culture can play an influential role in the lives of immigrant women (Delara; Urindwanayo).

Mahin Delara has proposed that culture influences “perceptions and interpretations of symptoms, help-seeking behavior, decision-making, expectations of the sick role, and coping style and communication with health providers” (3), which, in turn, affects their access to healthcare.

## Conclusion

Although there are community programs and services to address the needs of vulnerable mothers, counsellors, psychologists, and other helping professions have an ethical responsibility to consider the multiple intersecting nondominant identities of single, immigrant mothers and the ways in which these identities can influence their mental health and overall wellbeing (Curry Rodriguez). As Mego Nerses and David Paré, argue, “An intersectional view of identity reveals the complexity and variability of experience, illustrating how it takes place within contexts that can be alternately liberating or oppressive” (180). Our purpose in this article was to highlight some of these intersections with a view to drawing the attention of service providers to the unique experiences of single, immigrant mothers and the need for culturally responsive and socially just counselling, social, and other services. Additionally, this review points to the need for further research related to the intersections of gender, ethnicity, single motherhood, social class, and immigration.

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