

Does a language barrier influence the wellbeing of older Turkish females?

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Older Turkish women in NL

- Aging in an L2 environment: a language barrier?
 - Older Turkish women in NL: 'first-generation' (65+)
 - 0.7% of the total population 65+ in NL
- Worse physical health status
- 50% has no, or a limited, proficiency in Dutch (Dagevos & Gijsberts, 2007)
- Low literacy skills
 - Can impede wellbeing (Koops van 't Jagt et al., 2016)

Language barrier

- Language barrier:
 - Access to and use of (healthcare) provisions;
 - Wellbeing: social interaction and abilities to make problems/insecurities known

Language and wellbeing

- Sufficient communicative L2 abilities ~ use of care provisions
- Interpreter?
- Minimal L2 ability does not **per definition** entail that individuals are 'worse off': it does stimulate **dependence**
- Linguistic anxiety, feelings of belonging
 - Avoiding L2 situations: vicious circle (Sevinç & Backus, 2017)

Research question

- (How) does a limited L2 proficiency contribute to wellbeing for a group of older female Turkish adults in the Netherlands?
 - Language: communicative use and social use
 - Wellbeing:
 - Being content with life and the ability to carry out daily activities
 - Correlation with health, access to/ use of health provisions, social connectedness/belonging.

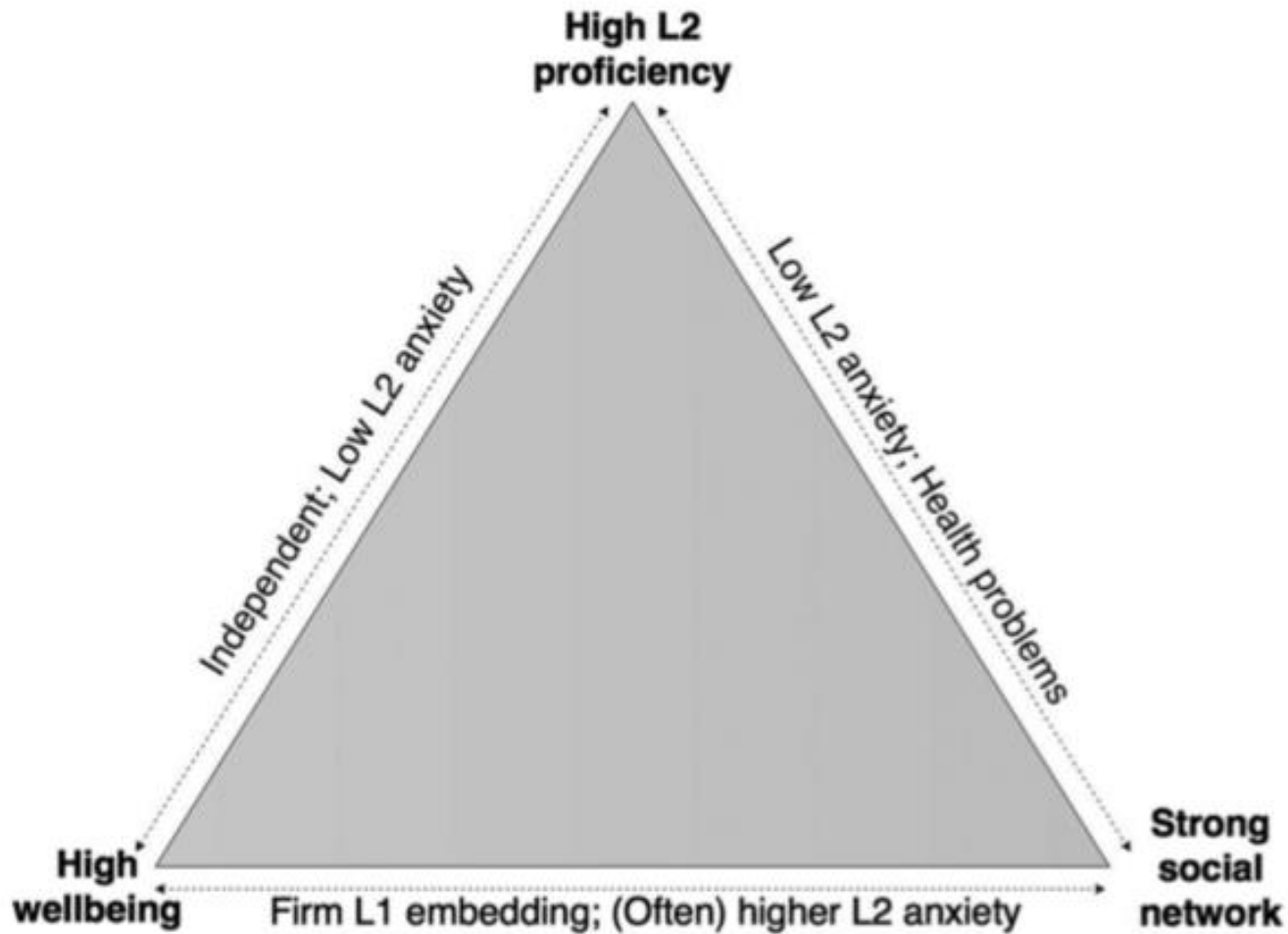
The study

- 42 first-generation Turkish females
 - Age: 51-84 (M=61.8)
 - Length of residence in NL: 18-47 (M=23.4)
 - On average 5 years of education
- Interviews:
 - Migration histories, language use, belonging, social network, healthstatus
 - Instruments: Dutch proficiency/ability, literacy, wellbeing, working memory.

Proficiency

- Low in complexity: 26% of the spoken text could be marked as complete sentences
 - Sd. 10%, so there is some individual variation
- Literacy score was high (M=35.3 with a maximum score of 40)
- Wellbeing: relatively high (M=38.9, sd = 4.7)
- Relationship between proficiency and wellbeing?
 - No clear, direct relationship: high wellbeing and low L2 proficiency, and sometimes a low wellbeing and a high L2 proficiency.

Factors language and wellbeing



Discussion

- Limited L2 proficiency:
 - Linguistic anxieties
 - No necessary/direct correlation with wellbeing
 - Dynamic: different initial conditions
- Communication barrier can be circumvented through an interpreter, but this creates dependence
- When social opportunities are limited, it may be difficult to overcome linguistic anxiety, which may lead to feelings of loneliness and isolation