Living and Writing Dislocated

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My understanding of the world was informed by western discourse and knowledge. As I grew up, I became aware that other ways of knowing are never completely silenced. Ce texte met l'accent sur le pouvoir des histoires vécues et en explore la valeur psychologique dans le domaine de la santé mentale (bien-être) des Iraniennes qui habitent le Vancouver Métropolitain. La question clé est de savoir si ces histoires sont entendues à un niveau qui peut influer sur le changement social.

Critical feminist ethnography has alerted us to the complex ways through which we engage in the process of Othering participants in our research (Abu-Loghod; Behar; Enslin). Feminist methodologies of interactive encounters that speak to the participants as

producers of knowledge have also been found to be problematic as the ethnographer's position of power can lead to manipulation of subjects (Enslin). This crisis of representation has become more complex and layered through the international movement of labour commodities and capital. In the first instance, the international circuits locate the researchers and the subjects in a complex web of relationships, blurring the boundaries between the field site and the home site. People whom anthropologists (of the West) studied in other lands and in another time, form part of the social fabric of the western world while a generation of scholars trained in the West travel to their "home" countries or locales in the West to "study" their own people. Furthermore, the "return of the native" has led to the recognition of multiple and fluid locations of both the researcher and the researched.

In this article, I ground these questions in the act of storytelling. My goal is to pay close attention to the context in which the stories are told and explore their value as a pedagogical tool in the field of mental health. The data is drawn from an eight-month ethnographic study among immigrant Iranian women in North Vancouver.¹ I first present my own story to highlight the dynamics of dislocation of knowledge—an issue that I examine further through the question: "why study mental health." I then present an account of two field situations, a shopping mall and the story of settlement as related by Sultan. In conclusion, I suggest that storytelling, with its underlying theme of "what is knowledge for," ultimately encapsulates basic human concerns: work, social relationships, and meaningful engagement with the world.

My story of epistemological dislocations

I was born in what was then colonial Uganda into a Muslim family that traces its origins to India. This sentence evokes the presence of multiple traditions. I was positioned to draw from African, Asian, Islamic, and also western cultures. This was not to be the case. I studied within the colonial system in Uganda and later in the heart of the colonial world: the United Kingdom and Canada. It was only after I came to Canada in 1972 as a studentrefugee that I began to realize the extent of my loss. I was born and bred in an African country, yet I knew next to nothing about African ways of life. My exposure to elements of polarized Asian and Islamic heritage was fragmentary and confined to the private sphere of family and community life. Paradoxically, as I have noted elsewhere (1994), in the contemporary world of cultural pluralism, my connection to multiple heritage and associated languages (Arabic, Hindi, Gujerati, Kiswahili, English) would be enviable. Acquisition of western education imparted through the medium of English meant subordination of other traditions. Epistemologically then, my understanding of the world was informed by western discourse and knowledge. As I grew up, I became aware of the fact that other ways of being and knowing are never completely silenced. My own experiences of moving in between spaces of South Asian, Muslim, and also western traditions echoes Ong's observation that she is "only comfortable in between the spaces of Asian, American and Chineseness; I cannot be fully at home in any one of them" (352).

Moving between spaces and languages that have been subject to sharp demarcation is not easily accomplished. In the first instance, it requires access to epistemological foundations of subjugated cultures (understood as processes subject to reconfiguration). Furthermore, occupying in between spaces requires engagement with the world through Bakhtin's sense of language. Bakhtin's relational possibilities contained in language foregrounds the "spatial coexistence and temporal simultaneity of all social languages" (Casey 23). This form of engagement eludes us

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in the light of the hegemonic status of western epistemology. Consider the poignant observations made by Roy in her novel on the colonial period in India:

Chaclo told the twins that, though he hated to admit it, they were all Anglophiles. They were a family of Anglophiles. Pointed in the wrong direction, trapped outside their own history and unable to retrace their steps because their footprints had been swept away. (51)

In the same vein, my work among diasporic Muslims in Canada and on the coast of Kenya has been informed by my epistemological dislocations—a condition shared by border subjects who belong to multiple worlds. The academy has framed my endeavor to explore alternative ways of knowing and being (Dossa 1997). As a border anthropologist keenly aware of feminist orientations, as they have shifted gears and moved into the critical and more reflexive mode, I believe in emphasizing engagement with women in areas that would make a difference the lived reality as observed and negotiated in ethnographic field sites. Towards this end, I explore the inbetween spaces of alternative ways of being that have been suggested to me during my research on mental health among Iranian women.

Why study mental health of immigrant women

The vulnerability of immigrant women (including elderly women) to mental/ill health is a theme that has come to the fore in the literature and the discourse of service organizations (see, for example, "Report on the Canadian Task Force on Mental Health Issues Affecting Immigrants and Refugees"). The assumption at work is that an immigrant woman is more likely to experience mental ill health owing to problems of adjustment to a new and often hostile social environment; an elderly woman is perceived to be triply disadvantaged. This double and triple jeopardy hypothesis, although questioned, has found its way into social service discourses where immigrant and elderly immigrant women are constructed as "the service population." As a researcher with an interest in rediscovering alternative but dislocated epistemologies, I have felt the power of this construct. The emphasis on services erases the reciprocity dimension; people engage in receiving as well as the giving of goods, services, and expressive elements that lead to the "social construction of humanness" (Dossa 1990; Bogdan and Taylor).

The narrow definition of mental health is derived exclusively from a biomedical model of care. This term is used for ill health rather than wellbeing. Within the context of medical anthropology, research on mental health has largely focused on highlighting the cultural understanding of factors that lead to ill health (Marsella and White; Kleinman and Good). Given this scenario, the service providers whom I contacted in the field, assumed that I would be An immigrant woman is more likely to experience mental ill health owing to problems of adjustment to a new and often hostile environment.

identifying "cultural" elements that would assist in the provision of services to immigrant women.² The fact that immigrant women's engagement with the larger society includes creative endeavours that promote well-being has received less emphasis. More importantly, these endeavors remain on the margins and in between spaces of the host society in the form of dislocated epistemologies as they form part of the repertoire of knowledge that has not been validated.

What then can we learn from our reading of the migration narratives of women actively engaged in maintaining well-being to address issues of ill health? What do these narratives tell us about mental health as a medium of expression of submerged but alternative epistemologies? These two questions informed my ethnographic teambased research among the Iranian Muslim women. My first encounter took place at the site of a shopping mall where two scripts on mental health were enacted.

Mental health and the shopping mall walking program

Shopping malls encapsulate the capitalistic principle of consumerism. It is therefore unusual to see the enactment of another script on this site: the promotion of mental health for the frail elderly. Pauline, a service provider, had recommended that the mall would be an interesting site for my research as Iranian volunteers had been recruited to assist (white) elderly people walk once a week. The interesting aspect here was the reversal of roles. This was the only visible site where the Iranians were the caregivers as opposed to the dominant image of being the recipients of services. Interestingly, the majority of the volunteers were women, as were the elderly. Pauline explained: "Elderly people are lonely and they need an outing. We have arranged this program for Monday mornings as some of the elderly spend weekends on their own."

"They have poor information about Iran, and this volunteering is a good way to exchange the information and we tell them about our culture and they tell us about theirs."

It is implicitly understood that prolonged experience of loneliness and isolation is likely to affect the mental health of people who are not mobile. The walking program is meant to provide "an opportunity to the elderly to come out and be with people" (Pauline). Given the fiscal constraints under which social service programs operate, a pool of volunteers are need-ed to implement the programs. In Pauline's words: "Another service organization suggested that we recruit Iranians. Being new to the country, they would gain experience and also learn the language. As you know, a lot of them do not speak English." I visited the mall

to understand the dynamics of this unusual situation whereby relatively young Iranians—the newcomers were helping the white seniors on the North Shore—a home to about six thousand Iranians, the majority of whom are post-revolutionary migrants.

As I stood on one side of the Mall waiting for the temporarily-hired Iranian coordinator to join me, I observed one white volunteer driver bringing the seniors two of whom were Iranians. The coordinator had a list of ten participants and quickly assigned one volunteer to one senior. A "cultural" exchange of sorts occurred over a period of one-and-a-half hours. One volunteer related: "When we walk, we tell them about Iran and we talk about the way of life over there. The seniors talk mostly about their families and sometimes about their lives." There are two dimensions here that require comment. First, the conversation takes place between two individuals who have both experienced dislocations in different ways. For the elderly women, a sense of social uprootment is keenly felt as seen in the following extracts that I gathered:

I hardly see my daughter any more. She has moved to Saskatoon. She is very far.

My son is a pilot and is out of town most of the time.

My best friend is living in a [nursing] home. I hardly see her any more. The loneliness attributed by social service organizations to the elderly population is palpably expressed here in terms of fragmentation of social arenas (best described as a space where one's activities and engagement in social relationships are noted and given significance) (Moore). Lived reality is nuanced and I make no attempt to generalize the complex lives of these women. In this specific context, the conversations suggest absence of family, friends, communities, and the opportunity for meaningful engagement with life.

Second, the interaction takes place in an asymmetrical setting. While the Iranians are actively engaged in learning English—the language of the host society—the seniors are not expected to learn even a few words of Farsi. Despite this situation, the communication that does take place expresses human interchange across languages. The content of the conversation among Iranian volunteers focuses on areas ranging from life before the revolution, the Iranian culture, and experiences of settling down in a new place. Consider the following extracts:

While I am with seniors, I talk about an Iranian dish, or about our marriage ceremony, parties, culture, and generally about our country—cities, historical buildings, and climate [sic]. They ask us about our immigration and about our job opportunities and our problems in finding work. They ask us about our English class and how we are doing [sic].

Most of the people don't know about our culture, language, climate and they ask us if we have seen snow or if we have four seasons or electricity in our county. They think we speak Arabic and we are Arab. They have poor information about Iran, and this volunteering is a good way to exchange the information and we tell them about our culture and they tell us about theirs. I think we need to spend more time together....

The content of this conversation-stories that are told in the process of interactions-does not reach the structured space of the programs for further incorporation into practice or for raising critical consciousness of the life situations of newcomers. The conversation comes to an end bringing with it a sharp demarcation of racial and class boundaries. Everyone goes to the nearby cafeteria. The Iranians, the majority of whom are women, sit in one area after moving the tables and chairs to create a round circle. They drink tea or water. The seniors occupy a couple of different tables and order lunch. The informant explained that the Iranians separate themselves from others as they cannot afford to buy lunch. The conversation among the Iranians touches on numerous topics ranging from children's education to health, jobs, and also news of Iranians living abroad or in Iran. Through this exchange there takes place an opening of social and symbolic space. As expressed by one participant:

When we get together and talk [tell our stories], it just makes us feel good. We get the feeling that there is someone to listen to our problems and we learn from each others experiences.

In the context of the project on mental health, the discourse on the table highlights some key issues laid out under the rubric of the "popular health care system" (Kleinman). This notion includes microcosmic understanding of the world at the level of lived reality that excludes the active involvement of professionals. In contrast to the biomedical model, the emphasis is upon maintenance of well-being, but also included are implicit understandings of ill health and preventive measures. It is within the informal space of the popular health care system that subjectivity of social actors is foregrounded as each participant draws on the repertoire of experiential knowledge that surfaces when people tell stories of their lives. Mental health, I argue, is not so much a matter of "ideas" and "beliefs" but that of embodied understanding of the world. It is this understanding that is being articulated at the round table and, beyond that, at other spaces that the participants engage in during the course of their daily interactions.

The marginal space that women occupy in the walking program constitutes one site among others where women get together to "work" and talk³ about health and whatever else they consider as topical. It would therefore be inappropriate to consider the volunteers' role as being confined to the unilinear act of walking. In the words of one woman, echoed by others: "When we are in a new country, it is very useful to be able to talk, listen, and hear other stories, other experiences. Somewhere there is a connection with our stories." While Iranian women told stories about lives that had been disrupted and dislocated-fundamentally dislocated epistemologies-they were also engaged in the process of recapturing the meaning of their lives in a new place one step at a time. It is in this spirit that I relate Sultan's narrative of settlement, chosen at random from a sample of 20, to convey a sense of the "epistemic agency" (Mugambi 213) of Iranian women.

Telling her story: the first steps

Sultan came to Canada as a refugee in 1996. She speaks softly with careful choice of words.

The revolution [in 1979] put an end to my education. I had just finished my high school when the revolution started. All the universities were closed so I decided to work in the bank. I married when I was 26 years old and we went to Germany. My husband was an engineer. I lived there for three years, and then I went back to Iran with my daughter as I was feeling lonely in Germany. I was happy in Iran because I had a job and I was with my family, and I don't have problems living there as I was used to that situation in Iran. Later on, I decided to come to Canada because of my daughter. It was very difficult for me when I came here, especially for the first year, as far as emotionally [sic] language, and culture is concerned, and now life is much better for me as I know the English language, culture, and community better.

Being unable to continue with her education after the

revolution, Sultan resorted to the path open to women: work in a "respectable" genderized ghetto of bank tellers,⁴ and get married. Marriage brought in its wake another change. She went to Germany with her husband. While he could go abroad, this option was not available to Sultan as "it was not common for women to live in another place by themselves." She soon discovered Germany was not the place for her:

My husband was an engineer and busy in his work and I was always lonely and my only hobby was TV and sometimes shopping. They ignore you when you go to stores or they turn their back on you when "They ignore you when you go to stores or they turn their back on you when they see you and in their newspapers they write that foreigners have to leave the country."

they see you and in their newspapers they write that foreigners have to leave the country.

This script resonates with the observations made on the reception of Muslims in present-day Europe and North America. Muslims are singled out as the Other and overtly racialized (Modood). What is of interest in Sultan's narrative is that she takes one more step. She uses the word "you" to engage the reader and "they" to implicate the people (general mass) and the media. We are reminded of Bakhtin's observations that words are born in a dialogue and are oriented towards a "future answer-word: it provokes an answer, anticipates it and structures itself in the answer's direction" (280). Part of the answer's direction is mapped in Sultan's narrative as she explores other avenues, and part of it is embedded in the implicit understanding that eradication of racism and injustice is a collective effort. Finding the situation intolerable, Sultan went back to Iran after the birth of a baby girl and got a divorce. As her daughter started growing up, she realized that she could not continue living in Iran. She wanted her daughter to have a good education and "Iran was not the place where this would happen.... The economy was getting worse and I knew that I had to leave the country." Sultan came to Canada as a visitor and filed an appeal for refugee status. The steps that Sultan took to secure a future for her daughter form part of the larger script of post-revolution migration of Iranians. "I did not come to Canada with too

many expectations," Sultan continued, "all that I want is a job and an education for my daughter." Sultan was soon to realize that the two goals were far apart. Her daughter was placed in a school within a short time, whereas Sultan's own journey had just begun.

Encounters with the social system

At the time of the interview, Sultan was still looking for a job. This scenario may be explained in relation to the primacy of the market-economy model advanced in the work of Eisdorfer. This author states that the marketeconomy model is structured hierarchically with the youth at the top and "dependent" others at the bottom. Society invests resources in the youth, the first group, in the hope that it will become productive in the years to come. The second group of adults are individuals engaged in generating goods and services for the broader population. Society lends assistance to this group at critical junctures, for example, unemployment compensation, and health benefits. The third group is composed of "nonproductive" segment of society: "older" adults, stay-at-home mothers, "unassimilable" immigrants, and the disabled. This group is at the mercy of the welfare system that essentially determines its quality of life and the state of its health. As a non-English speaking woman from a Muslim country ("unassimilable" individual) Sultan falls into the lower rungs of the hierarchy. She explains:

I did not want to stay home. I wanted to work. I went to Manpower and they told me that I had to have experience. Someone suggested that I should do some volunteer work. I was given some addresses and so I went to some of these places and they did not allow me to do work of any kind. They told me that I have to have a proper status. Obtaining the proper status was not easy as the whole process took over a year.

I went through worries for a year as this is the time it took the court to grant me landed immigrant status. This was the most difficult period of my life. I feel much better emotionally as my refugee status is approved. Not only did I worry but these worries were prolonged as I had to prepare four times for my hearing. Every time I prepared myself for the questions for the court, it [was] cancelled due to absence of the Judge or not having the empty room, and then I had to go back after two months. You can imagine how my mind was filled with worries until the next court hearing. In my court, they questioned me for eight hours and because still they were not satisfied and my situation was not clear for them, then they kept it on hold. They were curious to know about my personal life but any way it was solved and I was accepted as a refugee here.

This was Sultan's prolonged exposure to the system. Her shaping of the narrative, however, evokes the reader's response through a temporal structure. "I went through worries for a year.... not only did I worry but the worries were prolonged." First, there was the issue of fixing a court date which in itself took one year; then there were four cancellations. When she finally went for the hearing after a two-month waiting period, she was questioned for eight hours. The year, the months, and the hours constitute a frame that a listener can relate to as our sense of time and its experience constitutes a common ground of communication. The process of temporal distancing of the Other (Fabian), however, has forestalled a situation where we can reach out and experience the world of others which is fundamentally a human world. Narratives provide a space where this human enterprise can be accomplished. The narrators/subjects reconstitute their own stories "in a manner congruent with current understandings; the present is explained with reference to a reconstituted past, and both are used to generate expectations about the future" (Garro 100).

While drawing the reader into her world, Sultan also brings to light the parameters of the larger script of the Canadian immigration system. The latter is evoked in the narrative through the images of the judge, the court room, the long hours of questioning, and the probing of her personal life, all of which take us into the heart of the current debates on immigrants and multiculturalism in Canada. As Foster has shown, the key issue is the conflict and contradiction between the social order and social justice. According to Foster, maintenance of social order requires the existence of fluent social relationships with relative lack of conflict while social justice calls for "egalitarian relationships, guided by the values of liberty, equality and the rule of law" (20).

Sultan's arrival in Canada in the late '90s coincides with the government's recognition of Iranians as a legitimate refugee population; this acknowledgment has only recently been considered in the appeals of female Iranians (Mirfakhraie). Nevertheless, the conflict between social order and social justice looms large and impacts on immigrant women. There are greater resources for a person who fits into the immigration system's normative of "assimilable" category-a male middle-class Englishspeaking individual. Non-English speaking female newcomers do not fare well in Canada, a fact that has been well documented (Ng; Agnew). Sultan's case is no exception, except that her story contains other dimensions. While she talks about her struggles, she simultaneously foregrounds alternative ways of being that bring to light fresh/forgotten insights on the issue of mental health. What Sultan has to say through reconstitution of her narrative may appear to be commonplace-looking for work and searching for meaning are basic concerns of humankind but they need to be highlighted in bold colours, in particular for those who are marginalized.

Sultan's search for a job and her endeavor to create social relationships converge in the larger issue of creating

meaning in her new environment. I discuss the intricate process of meaning-making—an issue with close connections to mental health—through a narrative moment of a story within a story. I find this theoretical construct to be of value as it shows how subjectivity is constituted both through discourse (Dossa forthcoming) as well as through embodied practice.

Moment one: remembering Sultan's encounters November 1998

Sultan has entered the offices of a female service provider:

I went to the Manpower and told them that I wanted to join an English program. The person there told me, there is a long waiting list. Then I told him that I wanted to do some courses in bookkeeping or computers so that I can prepare myself for a job. I said: "For me with a child, I want to be active. I don't want to stay at home and the government pay me for years. This does not give me satisfaction. I like to be active and do something for the community. I started to work when I was young and I want to be active all my life." The officer in charge said: "There is nothing I can do. I have put your name in the waiting list and we'll call you when there is an opening."

The moment captured in Sultan's narration has a context: that of a speaker telling her story to the listeners. By virtue of the fact that stories are grounded in a particular time and place, they are invariably dialogical. The first part of the dialogue refers to the centrifugal dimension (Bakhtin) where Sultan notes that her goal of getting work-related training has been relegated to the margins (long waiting list). She then redirects the conversation to a domain condensed with meaning-essentially a semantic and condensed network. She is a mother who wants to remain active. Apart from moving away from being a recipient of the welfare system she wants to be a contributing member of society. Once again she evokes a temporal framework but this time her efforts are directed towards rejuvenating the past-"I started work when I was young"-to reinscribe it in the present with the goal to remain "active all my life." The narratives bring to light the fact that work and life filled with meaning form the main-stay of mental health.

Sultan's experience with the system leads her in the direction of having to start from scratch. "As it is, it is difficult for anyone to begin a new life in a different place. But when you learn that they do not recognize you and that your past experiences do not mean anything, it is difficult, very difficult." Having realized that she is on her own, Sultan explores in-between spaces to engage with and or circumvent the system. The process of reconstitution is also observable in the way in which she narrates her story. Her switch from the "person" when she is exploring a couple of options (book keeping, computers) to the "officer" (who brings a sense of closure) is telling. A story is told to the former; from the latter one knows where one stands in relation to the system. Having learnt that there was no place for her within the system, Sultan joined a church group that she was introduced to by the mother of her daughter's friend. "At first I felt very uncomfortable joining a church group but I was feeling lonely. I had to come out. This is also the place where I can practice my English."

Sultan's boundary crossing to use the "Christian" space appears to have occurred from her recognition that is needed to maintain a sense of well being: "If I stayed home and did not go out, I am bound to feel sad." Her pragmatic response arose from the fact that other places were "closed" to her. In her search for new resources, she enters into unusual spaces that she had not thought about. Sultan states that she has a mission. "In the church group we talk and I tell them about Iranian culture. This way they have a different picture then what they get from the newspapers." This comment resonates with the observation made by a service provider: "It is through human (cross-cultural) interactions that you can help reduce prejudice." Ironically, Sultan's usage of the church space is in response to the situation that "there are not many other communities here. In Iran you do not look for a community. It is there for you." This may be a romanticized picture of a way of life that has been subject to disruption. However, the important point is that it indicates the need for social interactions.

While in one situation, Sultan accesses the distant space of the church, in another one, she draws resources from within her own (close by) cultural space.

Once I did not have the care card and my daughter fell sick and had fever. I phoned my worker and she told me to take her to a hospital downtown. It was raining and I could not take the bus and the journey was long. I went to the North Shore Health and they did not agree to see my daughter without the card. Eventually I took her to an Iranian doctor on the North Shore.

In response to my question as to whether she can count upon other Iranians for support, Sultan explained:

Just because a person is Iranian, that does not mean that you can count on her. A friend of mine who does not speak any English had an appointment with an English doctor. Her daughter who was to meet her could not make it. My friend went to a nearby Iranian shop and asked the store owner to accompany her. The woman told her that she could not help her as it was not possible for her to close the store. Then she phoned an Iranian doctor and asked her if she could do the translation over the phone. The doctor told her that she does not provide this kind of service. In a second narrative interview, Sultan observed: "Whatever system we have, it will only work if people are responsive." That systems should be established for the people rather than people having to fit into the system is a key point. In Canada, the social security system has a profound impact on people's lives as it determines the resources available to its citizens. Assumptions and images of socially-created categories, such as immigrant women, are elaborated through a set of policies, administrative procedures, and a host of service organizations. Who gets what kinds of services is determined by political decisions on the distribution of scarce resources. While working her way through the system and outside it, Sultan spells out what her needs are:

I would like to be active in my life and have a job. I do not like to stay home and wait until I receive the cheque from welfare every month. I don't like to be useless. This is a perfect place for me to live, if only I could find a job in my profession. It is not just the money. You have to enjoy and get satisfaction. I hope that my child and I could be a useful person for the community. I think if some one is not useful, then it is not good for oneself mentally.

At a fundamental level, Sultan's needs are no different from those of other citizens. She aspires to live a life that brings her joy and satisfaction. She wants to be a contributing member of the society. This is how she defines the issue of mental health. She is also aware that there are situations "when people feel down and unhappy. If this happens to me I take a bus and just ride until my transfer expires.... I try and keep myself busy." As much as Sultan is engaged in making space through her own initiatives and resourcefulness, she is also utilizing the in-between spaces that exist in the community in which she resides while being acutely aware of paradoxes and dilemmas. She knows that she will not be able find a full-time and secure job for herself. At the time of the interview, the very act of looking for one and exploring different avenues had in itself become a "career" as it occupied her fully. Sultan remains hopeful that she will be able to find something one day. "If I give up hope, it would be difficult for me to keep on going," she explains with her last words during the third interview. Sultan's path is not chalked out and treading on it involves a long journey. The first few steps have been taken. Her story is related in words and sentences that are not complete. Sultan's journey into a new world has just begun.

Conclusion

When I first started writing this paper, the uppermost question in my mind has been that of "voice." From the vantage point of someone who has experienced the epistemological dislocation of not being able to write in any other language except that of the West, my field site appeared to be fragmented. The dominant discourse on vulnerability of immigrant women to mental health (read "problems") pulled me in the direction of identification of culture-specific symptoms. Despite the anthropological insight that illness is socially produced, the emphasis on cultural elements remains strong.

During the first few interviews, it became apparent that Iranian women did not want to talk about mental health in isolation. Their inclination was more towards storytelling. A question on how they understood mental health was reworked by the women to foreground issues that they considered as vital: work and social relationships. This demedicalized understanding of mental health seemed to have found expression in embodied practice as it took place in between spaces. Women were then engaged in making space to enable them to engage in conversation on topics pertinent to their life situations. It is in this spirit that I have related Sultan's life narrative.

Storytelling related in bits and pieces in the context of lived reality, in the form of embodied practice of lives inscribed into different landscapes, or the very act of telling poses numerous challenges. To begin with, in the context of social change, storytelling can act as a point of intervention to established knowledge and "to the experience of the world that is not admitted into the dominant knowledge paradigm" (Razack 36). Having said this, it is critically important that we pay heed to critical observations made poignantly by Razack in relation to how and towards what end stories of marginalized women are used. It is worth considering a key question raised by Razack: "Will immigrant women tell a particular kind of story in a forum they do not control?" (37).

It is true that women in this study do not occupy a space from which to tell their stories, let alone be heard. To dismiss them lightly, however, would not be doing justice to the resourcefulness and creativity deployed by the participants. As we have seen in Sultan's case and at the site of the Mall, as women "tell" their stories, they at the same time recreate their worlds cognitively as well as in practice. This process implicates and includes the host society's social institutions. Hearing and listening to the stories in the broader context that implicates the larger oppressive institutions requires a commitment on the part of those who are seeking social change. While we cannot underestimate the struggles that immigrant women go through in relation to making a new life in a largely hostile environment, we must at the same time look more closely at the intervention strategies of women. These strategies address issues of mental health (well-being) as an integral part of their lives. The point is that these stories must also be heard at a level where social change can be effected keeping in mind these stories have a poignancy expressed by Himani Bannerji as: "A whole new story has to be told, with fragments, with disruptions, and with self-conscious and critical reflections" (179). Sultan's story of dislocation, like that of other Iranian women, can best be understood at this level. Our reflexivity on how dislocated stories are heard will determine whether immigrant women a part or apart⁵ of Canadian society.

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'The data included in this paper are from a larger ethnographic study of mental health among three Canadian Muslim communities in Canada: the Iranian, the Afghani, and the Ismailis. The focus of this article is on the Iranian community, more specifically women. Narrative interviews among 20 Iranian women took place over a course of eight months. The participants, in the age group 35 to 69, had been in Canada from three to nine years. The accounts are presented not in the form of a single narrative (used interchangeably with the word story), but in the form of stories-in-the-making. As women's own understanding of mental health has come to light through their stories, I foreground the value of stories as a pedagogical intervention in the field of mental health.

²For an excellent critique of this approach see Razack.

³There is a close connection between "work" and talk. The talk in question only takes place because the participants come to the mall to "work," understood as meaningful activity.

⁴Informants related that the bank is considered to be a respectable place for women to work.

⁵In the title of this article, I use the term "living" in a double sense: to convey my own experiences in the field and capture the lived reality of the participants. I have adopted the words: "a part or apart" from D'aguiar's review of Kenan's work: *Walking on Water: Black American Life at the Turn of the Twenty-First Century.* D'aguiar writes: "... but the idea of a black life, like all testimony, becomes true the moment it is articulated, the second it is breathed and shaped in language, and once it is given utterance, it cannot be taken away" (11). In this article, I relate the dislocated (partial, in-the-making) stories of women in this spirit.

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