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Aging in Diaspora from the Eyes of the OG's: The Elderly Greek Australians

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Almost uniformly elderly Greek Australians describe health as absolute happiness, as their most significant and important possession, a treasure, a gift from God. Among the Greek elderly, health is something that is closely linked to religion and God, as they conceptualize their health as a manifestation of God's will. This group largely perceives their state of health to be an aspect of fate that they do not have control over and that must simply be accepted as their lot in life. As a result, they do not understand poor health to be a punishment or trial. Instead, it is to be accepted and coped with as part of the natural order of things. This paper will describe the ways in which religious beliefs define a conceptualization of health held by many elderly Greeks in Melbourne, Australia, and discuss how their religion supports their ability to cope with and accommodate to ill health associated with increasing age. Just this year (2026) Lulle wrote about diaspora and aging, thus demonstrating its significance and importance at present time.

Keywords: *Greek Australia's elderly, diaspora, healthy aging, transmission, generational, health beliefs*

Background

Migration was described by Marois et al. (2020) as a controversial topic Among the Greek elderly, health is closely linked to religion and God, as they see health as a manifestation of God's will. Savva shared the story of his daughter's illness, "God protected my daughter, she had a terminal illness, was very sick. The doctors were giving me no hope. I prayed to the Virgin Mary and asked for God's help. My daughter's health returned. It was her fate and God's will for her to be ok".

Among the Greek people we see that culture builds resilience, it started among the Greek elderly, and this cultural belief and way of life is followed and believed by the descendants of the elderly.

The usefulness of these transmissions can be very powerful at both a micro and macro level, for individuals, communities and society in general, particularly as cultural contexts can and do influence peoples' lives and their understanding of illness, including prevention and its outcome. This is of significance as the older people of Greek background tend to rely on children and grandchildren for advice and health and medical issues, there may be significant transmission of health knowledge deriving from mainstream Australian culture passed from child/grandchild to parent/ grandparent. Chronic illness is a significant life event on a number of levels.

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One such illness is cardiovascular disease (CVD), which is a major health problem in Australia. In 2011[1] a study was undertaken in Melbourne Australia that investigated the cultural understanding of health and adjustment to cardiovascular disease among the Greek elderly.

Culture influences how people think about illness and/or health as well as their general attitudes towards healthcare. The way individuals adapt to a chronic illness is closely related to the cultural and linguistic factors that are an integral part of personal identity. The Australian Greek population is one subgroup whose linguistic and cultural background is significantly different from the English-speaking mainstream and who display a high prevalence of CVD risk factors.

The findings from this present study show that traditional health beliefs affect the way in which this group respond to medical advice and adapt to their own condition.

The Greek elderly of Melbourne perceive illness in old age as part of an individual's fate and has to be approached with stoic acceptance. This group largely sees health to be an aspect of fate/luck. Acceptance of a predestined lot among these elders is a means of resilience to illness particularly in old age as fate or luck is not random. The belief held by this group is that health in advanced age is a matter of fate that has been pre-determined by God. Since "it's all in God's hands" the prevalent attitude becomes "let's live life and whatever happens, happens".

Religious beliefs provide means of adaptation and resilience for elderly Greek Australians and a way of coping with and understanding chronic illness such as CVD. This resilience, in turn, is shaped by their cultural framework, of which religion is a part, and that has been maintained even in diaspora in Australia. This highlights the importance of culture in shaping experience and suggests, for this population at least, that traditional interpretations still represent a powerful support for resilience and adaptation to illness in old age.

The need for more research is much needed as its quite significant particular among other diaspora communities. Studies like these are important as the basis for interventions to this cultural group and can assist health professionals in developing appropriate services and supports when working with elderly Greek members of the community. Further, similar research examining the conceptualization of health of other cultural groups in Australian society will support a better understanding of the impact of culture on health and allow for the needs of all Australians to be met more research needs to be undertaken. Traditional culture holds a vital role for the overall wellbeing of Immigrants living in diaspora.

This paper will discuss the significance of traditional culture and wellbeing in the life of immigrants and their descendants; particularly how ethnic culture can both be maintained and support assimilation and adaptation for those living in Diaspora.

The findings reported in this paper show the following (1) transmitted ideas about health behaviour; (2) role of language in maintenance – cultural identity and specific cultural health beliefs and (3) the role of religion as a form of resilience and identity factor across the generations. The findings of this research show how the Greek cultural identity of the respondents has shown the centrality of identification

[1]As this group is unique -as they belong to the original group (OG) of the diaspora- the research is still relevant despite it being conducted in 2011 – its relevance is still evident today as the foundations of the OG's have been transmitted to the Australian generations as per Avgoulas (2025).

as Greek in the conceptualization of identity, despite the fact that what exactly constitutes being "Greek" differs and can be viewed as coming from the experiences of each generation.

The identity of all generations was an interesting phenomenon, and in turn influenced transmitted ideas about health, the role of language, cultural identity and cultural health beliefs as well as the role of the Greek Orthodox religion. This occurred predominately through the elements of cultural maintenance that were transmitted to the Australian born generations by the immigrants. Great importance was placed on four key aspects of their Hellenic heritage being religion culture, language and food as being vital across all generations to maintain and transmit. The meaning of Greek changed slightly with each generation; however, the core remained. For example, with the oldest ones, Greekness encompasses virtually every aspect of their identity with English/Australia being a thin layer on top. For the youngest ones, it is the opposite – they are Australian in every way with a few comparatively superficial Greek behaviours, like food and the Greek lifestyle.

Identity for this group along with the concept of who we are and where we belong has been interconnected to their overall positive state of health, as well as, creating a sense of conflicted identity. For the Australian born generations in a sense they were torn in between two identities and hence feeling loyalty towards both their Greek and Greek Australian identity. I recall being told by a member of the Australian born generation of a holiday experiences in Greece and the connection and sense of belonging they felt in Greece that they did not feel or experience in Australia – where they were born, raised and lived. They connected holiday experiences in Greece with the Greek language and the sense that they did not want to be seen as tourists in Greece, as they tried to speak Greek and trick waiters that they were "real" Greeks.

In 2021, a study was undertaken by Devi et al. that examined diaspora, embodied aging in India – the work here was from the perspective of the Indian diaspora. De Haas et al. (2020) have an interesting chapter in the topic of migration and their work is quite fascinating. The onset of chronic illness is a significant life event that poses a frightening challenge at a micro and macro level. The way in which individuals adapt to chronic illness is closely related to the cultural and linguistic factors that are an integral part of personal identity. This research presents the health beliefs of elderly Greek Australians and the way they understand health and disease. The process through which elderly Greek Australians conceptualise CVD and seek medical care is discussed in the context of their specific cultural views and attitudes towards illness.

Research Questions

This research addresses the following questions:

1. What are the health beliefs of elderly Greek Australians?
2. How do elderly Greek Australians conceptualize cardiovascular disease?
3. What are their specific cultural views and attitudes towards cardiovascular disease?

4. How do traditional views and beliefs about health affect the way in which they respond to medical advice and adapt to their own condition?

Aims of the Research

This study explores the health beliefs of elderly Greek Australians and the ways in which they understand health and disease. It examines more closely the conceptualization of health of this group, their understanding of heart disease and the factors associated to becoming a person at risk, and, in turn, the social and cultural determinants of risk behavior. This study provides insight into specific issues affecting this population and can serve as the basis for interventions specific to this population.

Brief Outline of the Theoretical Framework

This study makes use of a cultural epidemiology framework to examine the way elderly Greek Australians understand health and how this may affect their response to illness and disease within their cultural context. This approach allows for an examination of the way in which culture factors specific to this group affect their experience of illness and offers insight into their way in which they view and cope with their own condition.

Brief Outline of the Methodology

An ethnographic approach was taken to collect empirical data on the health beliefs of elderly Greek Australians and the way in which they understand health and disease. This qualitative approach was used to elicit the subjective reality of the participants who took part in this study and to understand the cultural meanings they ascribe to the experience of CVD. Data was collected through in-depth semi-structured interviews, and data analysis undertaken using principles of thematic analysis.

Limitations

This research has several limitations. It is based on interviews with a small number of elderly Greek Australians with experience of CVD. Their views and perceptions may not represent those of all individuals of similar background and experience. Further, this research was conducted in Melbourne and may not reflect the situation of similar populations in other parts of Australia or the world. Additionally, the elderly participants in this study shared a similar background in the Greek language and culture. Their views and perceptions may not be relevant to other population subgroups with a different background culture. Finally, this study does not address the prevalence of health conditions in this population or consider the relative importance of CVD among elderly Greek Australians in comparison to other chronic diseases. It is intended only to assess culturally based attitudes and perceptions, not provide information about the health status of this group

Introduction

Culture is food, language, beliefs, appropriate and acceptable behavior, way of life of a specific population, the backbone of who we are and much more. Culture however also is a natural manifestation of human nature that allows individuals to give meaning to an experience and often this meaning is a product of their culture (Geertz 1973). With reference to health, Mechanic (1992) describes health as a formation of both culture and social structure. As culture can influence one's behavior and overall understanding of health and illness as well as general attitudes towards health care, an understanding of culture is vital in understanding how individuals view their own health. With reference to the Greek culture and cultural attitudes towards illness, for example, misunderstanding can occur regarding appropriate behavior between the family and/or patient and health professionals.

The Greek people are very supportive when a member of their family is sick; instinctively they take on the care role as their responsibility and duty. When a Greek patient is in hospital, their relatives visit and stay with them as long as possible, often disobeying policy and procedures put in place by the medical facility such as visiting hours or number of visitors. This is not a deliberate act to disrespect the rules but a misunderstanding due to cultural interpretations of appropriate behavior. Hartog and Hartog (1983) noted that "medical professionals tend to perceive this type of behavior as peculiar at best or an obstacle to good, efficient, modern medical care" (p. 910).

Cultural background is a significant influence on the cognitive/emotional dimension of health as well, and there is a complex relationship between the biological factors that relate to illness, the social context in which a person experiences them, and that person's cultural and linguistic heritage (Kirmayer and Sartorius 2007). This accounts in part for the differences in how the experience of illness affects individuals and their ability to cope with, adapt to, and/or recover from a given condition. The existence of culture-specific illness behavior is well established (see for example, Roy et al. 2005, Canino and Alegria 2008) and may influence a range of health-related behavior, including whether professional advice is sought, whether that advice is followed, and to what extent the individual believes that health care is an appropriate means to address the situation in question.

In the case of the Greek community specifically, it has been noted that a high degree of dual acculturation is common (Ballotis 2005). Nonetheless, individuals tend to maintain very close, extended family networks that form their central social institutions (Francis and Papageorgiou 2004, Georgas et al. 2006). The reciprocal relationships, between parents and children, older and younger relatives, and so on, have traditionally been a source of strength in times of adversity, including illness, and have allowed for greater resilience than that experienced by some other immigrant groups (Georgiades 2010).

The existence of strong social networks that create a supportive environment and reinforce beneficial cultural patterns (such as a Mediterranean diet associated with lowered risk for heart disease) have been seen as especially significant among Greek Australians whose mortality from cancer and cardiovascular disease is lower than for other groups (Anikeeva et al. 2010). Nonetheless, the prevalence of type 2 diabetes is estimated to be three times higher for this population than for the

Australian born, and levels of obesity are higher as well (Hodge et al. 2004), suggesting the advantageous effects of cultural maintenance may be significant.

Cultural maintenance for Greek Australians centers on interaction with others from a similar background, whether family members or friends is important, and this type of interaction is often seen as crucial for the maintenance of health. A lack of participation in social activities, either through unwillingness or inability, is often seen by Greek Australians as both a sign and a cause of mental illness such as depression which is understood by them to be chronic and social in origin (Kiropoulos and Bauer 2011). This stresses the importance of social networks in the conceptualization of health held by many members of this community and is also an indication of the role such networks play in maintaining and transmitting traditional views, perceptions, and behavior.

Results

A health belief can generally be described as a phenomenon that is formed and shaped by people around us, in particular family, such as parents to children, grandparents to grandchildren and so forth. People's beliefs in life manifest from their culture of origin, their way of life and their ancestral customs. Transmission of such beliefs often spans generations and shape health beliefs and practices which are passed from older to younger individuals. Interestingly, these beliefs are not grounded in medical fact, instead they are learned from the society in which a person lives in and have evolved over time and become embedded in the culture as "trustworthy".

This is exemplified by the Greek population of Melbourne whose understanding of heart disease and the factors associated with becoming a person at risk as well as the social and cultural determinates of risk behavior was examined in a qualitative study undertaken in 2011[2]. Thirteen individuals (five male and eight female) over the age of 60 who had been diagnosed with cardiovascular disease or had a family member that they cared for with this condition and who expressed an interest in participating in this study were interviewed in depth about their experience of illness and the way in which they understand this condition. An ethnographic approach (see Maxwell 2004) was used to identify the way in which cultural precepts that underlie their conceptualization of health are manifested in the meaning given by elderly Greek Australians to the experience of CVD and, further, how this affects their adaptation in the context of this condition. One of the researchers is a member of the Australian Greek community and was able to undertake this research in the language of the participants but, due to differences in age, training and experience, occupied both a position of insider and outsider (see Dwyer and Buckle 2009 for a detailed discussion of this issue).

The Greek population of Melbourne can be described as very religious. It is important to note that, for the migrant generation that was the subject of this study, religion along with the traditions of their culture is of great significance that they often describe as their most valuable possession (Avgoulas and Fanany 2012a). The

[2]Despite the data collection being undertaken in 2011, it is still relevant today as the descendants of the elderly follow in the same footsteps as shown in recent research undertaken and associated publication (please see for example Avgoulas and Fanany 2026a, 2026b).

majority of these early migrants arrived at Station Pier in Port Melbourne with nothing more than a small suitcase containing very few passions and a large store of information about their culture and way of life. It is not uncommon for these elders to say "water and soil from your homeland equals health and prosperity". The early years of their settlement were difficult ones, but they felt that if they kept their homeland and the Greek way of life close to their hearts, things would work out. The Greek way of life, traditions and culture has been kept very much alive and handed down from one generation to the next as the long history and cultural richness of the Greek tradition is a great source of pride for its members, and this is a key characteristic of the Greek community in Melbourne, Australia.

For this population, illness in old age is part of an individual's fate and has to be approached with acceptance. Acceptance of a predestined lot among this population can be seen as a means of adjustment to illness, particularly in old age, as this group does not see fate or luck as random. The events of an individual's life are viewed as being determined by God, and religion serves as the link between the individual and the divine. In this sense, religion can be described as a coping mechanism providing a source of resilience for the misfortunes in life (see Avgoulas and Fanany 2012a). In addition, to drawing personal strength from their religion, this group views its own experience through the lens of faith which suggests a meaning for these events (see Avgoulas and Fanany 2012b, for further discussion on this). Religion, then, supplies and etiology for illness and also suggests various means by which it can be addressed through personal behavior, prayer, ritual, and other activities that give the experience meaning. Meaning based resilience has been observed to be very strong and more enduring, especially among the elderly (Folkman 2008), and religion is one of the most powerful sources of this kind of meaning. Religion plays a very significant part in the lives of the elderly Greeks in Melbourne, Australia socially as well as emotionally. Additionally, in their feelings at least, it binds them to their original homeland and to the cultural experience of their ancestors.

Discussion

There are certain events in an individual's life that can be described as moments of impact or events that occur out of sequence, interrupting the expected progression of the life course. Illness, accidents, or even a sudden romance or separation may all fall into this category. Instances such as these may only take moments to occur, even though the individual may wonder about their cause for the rest of his or her life. Traditional health beliefs, such as those held by the elderly Greeks studied here (in the original study in 2011) are also a dominate finding in the Australian born generations (see for example Avgoulas and Fanany 2026a, 2026b).

Interestingly, for this all generations of the diaspora see that events do not just happen, and everything in life has a reason and purpose. These older individuals accept that each person has a predestined lot, which comes from God and is not random. Without fail, the participants of this study believed that their state of health is an aspect of fate and/ or luck (*τύχη*) that they do not have any control over and must simply accept. More specifically the belief held by this group is that health at

an advanced age is a matter of lot and is associated with an element of luck in their overall fate that has been predestined. Their destiny, in turn, has been predetermined by God in accordance with His judgment for them and cannot not occur. For this reason, they view every occurrence, including those with negative outcomes such as illness, as having a specific meaning and purpose in their life.

Almost uniformly, the elderly Greek Australians that took part in the 2011 study described health as absolute happiness, as their most significant and important possession, as "a treasure and a gift from God". It is important to note that this understanding of the etiology of disease as resulting from divine will and not from individual risk factors, is of great significance as they perceived that there is no real need to change the way they conduct themselves or do anything special about their illness. There was an indication that these individuals felt that following health advice might be viewed by God as them making an effort to take care of themselves, and hence beneficial in terms of pleasing God, but not necessarily changing the outcome of their condition or improving their health in the way doctors or other health professionals intended. One of the participants mentioned that he only took part in cardiac rehabilitation and hence changed his diet to be able to care for his grandson.

> "My heart attack took away my independence and more importantly my daughter was worried that I'm too unwell to care for my grandson and told me that I can only win her trust if I listen to the doctor's advice. I agreed, as picking up my grandson from school and taking him to soccer is more important than great amounts of sugar in my coffee. My daughter thinks that sugar and my unhealthy diet caused my heart attack, she doesn't understand that we cannot avoid destiny".

This statement echoes a view held by most of the participants of this study and, as a result, they were mostly concerned that their illness be manageable and did not feel distress at having a diagnosis of cardiovascular disease. Instead, their distress centered on the possibility that worsening health might prevent them from fulfilling their social role, and isolate them from their peers and families.

Absolute happiness was of great significance to the participants of this study, something that they described as "a gift from God" that they had to protect by not being anxious and stressed about things and, more importantly, never had to question. One of their methods in coping with stress and/or anxiety is through religious expression and by seeking strength in their faith. Religion was also described by a participant of this study as something that has helped her accept her condition and that has prevented her from asking "why?", as questioning God's will can be perceived as a sin. Nonetheless, many of these elderly Greeks felt it was wholly appropriate to request God's intervention in protecting the health and well-being of their loved ones.

One participant described religion as a good luck charm (*φυλαχτό*) stating "in the morning when my children leave for work, I pray for them to be safe, and I know this protects them". This religious act reassures the person involved and allows them to put their concern aside, resulting in peace of mind and acceptance of whatever occurs. Similar ideas are readily expressed by older members of the Greek community who have experienced a serious illness, demonstrated the kind if meant based resilience described by Pargament and Cummings (2010) among others. The ritual of faith offers patterns of behavior in times of trouble but also provide a vehicle of

the expression of emotion as well as reassurance and connection with the larger community of faith.

For this population, evidence shows that religion is in fact a source of resilience and can also offer a framework into which illness fits as an expected potential life experience. Unlike the mainstream Australian population, the elders of the Melbourne Greek community have maintained their traditional culture, and particularly the Greek way of life. Cultural maintenance is of great importance for these migrants and has become a key characteristic of this group. The current economic crisis in Greece has seen a new wave of migrants coming to Melbourne, and the established Greek community of Melbourne has assisted the new wave enormously with their transition to life in a new country. These newcomers often feel the new little Greece of Melbourne is like the old Greece of the 1970's, as Greek society has evolved under its own social, cultural and political forces while the little Greece of Melbourne represents an idealized view of the remembered culture of earlier migrants. The newcomers tend to see Melbourne Greeks as "more patriotic" and Melbourne is said to be more cultural, while Greece has changed over the years to align with 21st century Europe. The aspirations of the original wave have been achieved at present, and subsequent generations of Greek Australians have grown up within the cultural context created by the original immigrants despite being highly assimilated in other ways. It remains to be seen, however, whether faith and/or religion plays a similar role for these younger community members and whether it will serve them as a source of resilience as they move through the life course. Furthermore, it is not yet clear whether the memory culture that was created by the original Greek immigrants will be maintained by 1st and 2nd generation Greek Australians and how the new wave of migrants will influence the Greek community of Melbourne.

For the current population of elderly Greeks, however, their religious faith and culturally based worldview is an integral part of their personal and group identity that affects every aspect of their experience, including the inevitable health issues that are to be expected in an aging population. This situation has significant practical implications as more members of this group require health care and support as their age increases as many of their views are incompatible with the principles of evidence-based medicine and may contravene the usual practices of the health care sector. While this issue is not unique to the older members of the Australian Greek community, their perceptions and experiences point up some of the difficulties that may emerge in relation to aging and age-related health care for culturally distinct population groups relative to the majority culture.

Conclusion

Without fail, the elderly Greek Australians who participated in this study associate their diagnosis of CVD very closely with God's will and largely believe their state of health is an aspect of fate and/or luck that they do not have control over and must simply accept. It is important to note that the words "fate" and "luck" (*τύχη = tyche; γραφτό = graphto*) have a significantly different meaning in the Greek language when compared to the English. "Luck" to this group is not random, which is the usual

connotation of the word in English. *Tyche* (*τύχη*) was used in classical times to refer to a kind of minor deity that controlled the fortune of the Greek city states. This is of significance in understanding the meaning that these older Greek individuals give to the word "luck" in the modern world, which clearly shows that what seems to be random chance is really volitional on the part of a higher being. In the modern context, this is God, but certainly for this group, "luck" does not mean something that occurs without any reason. *Graphto* (*Γραφτό*) means "destiny; something that is written" and contains the root "graph", that occurs in the English words photograph ("written by light"), graphic ("having to do with writing"), and so forth. In its usual usage in Greek, *γραφτό* refers to something that must happen to a person because it is predetermined and cannot not occur.

Acceptance of a predestined lot among this population can also be described as a means of adjustment to illness, particularly in old age, as fate or luck to this group is not random. The belief held by this group is that health at an advanced age is a matter of their individual lot. It is associated with an element of luck and their overall fate that has been predetermined by God in accordance with His judgment for them and hence not random in the sense of having no purpose. It is important to understand that the etiology of disease for the Greek elderly of Melbourne, as resulting from divine will and not from individual risk factors, is of great significance as they perceive that there is no real need to change the way they conduct themselves or do anything special about their illness as illness is part of an individual's fate. For example, there was recognition among this group that certain measures, such as diet and exercise, could be taken to improve health and wellbeing in the context of CVD, however their overall belief was that their health comes from God.

At the same time, there may be little inducement for members of this group to change their behavior in the context of ill health because of a perception that such measures do not really matter, either in the context of their health or in relation to the outcome of disease. There was an indication that these individuals felt that following health advice might be viewed by God as them making an effort to take care of themselves and hence beneficial in terms of pleasing God but not necessarily changing the outcome of their condition or improving their health in the way doctors or other health professionals intended

Recommendations

This study has shown the significance that culture can have on the conceptualisation of health and disease. Elderly Greek Australians were the focus of this research; more specifically this population's health beliefs were examined in the context of their specific cultural views and attitudes towards illness. This study in itself is significant, as it has provided insight into the general health beliefs of elderly Greek Australians and more specifically what their cultural views and attitudes are towards CVD. The findings have shown how traditional health beliefs affect the way in which elderly Greek Australians respond to medical advice and adapt to their own condition.

Studies such as these are important as they can serve as a basis for interventions at a macro level specific to this cultural group and in turn can assist health professionals in developing appropriate interventions, services and supports when working with elderly Greek members of the community. As the findings have indicated, illness in old age is perceived by this population as part of an individual's fate and has to be approached with acceptance. Traditional religious beliefs provide a means of both adaptation and resilience for this group. The role of religion is very significant with reference to elderly Greek Australian's in coping with and understanding chronic illness such as CVD.

In addition, this study has also provided valuable insight for future research that can be undertaken as indicated in the limitations of this research. It is recommended that future research be conducted in this area by exploring a similar population in other parts of Australia. Further, there is likely to be value in similar research examining the conceptualization of health of other cultural groups in Australian society that will support a better understanding of the impact of culture on health and allow for the needs of all Australians to be met more effectively.

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