

Immigrants Coping with Transnational Deaths and Bereavement: The Influence of Migratory Loss and Anticipatory Grief

OLENA NESTERUK

This study examines immigrants' experiences of bereavement and coping with the deaths of family members in a transnational context. Data were collected through in-depth personal interviews with middle-aged and older immigrants from different countries of origin, who have been living in the United States for a majority of their adult lives. Thematic analysis of participants' narratives showed that immigrants' geographic distance from family complicated caregiving circumstances and rituals surrounding burial, and impacted the grieving process. At the same time, this distance also served as an emotional barrier and provided protection from prolonged grief. Immigrants' U.S.-based family and work responsibilities served as buffers from prolonged grief. Over time, immigrants became Americanized in their attitudes toward coping with death and favored a fast return to productive activities. Finally, immigrants' experience of migratory loss and anticipatory grief early in immigration, along with their personal growth and resilience developed over time, impacted their bereavement experiences later in life. Considering the limitations and the exploratory nature of the present study, further research is needed to investigate the specifics of coping with loss and bereavement among immigrants.

Keywords: *Transnational bereavement; Migratory loss and mourning; Anticipatory grief; Older immigrants*

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The experience of migration is associated with multiple losses and discontinuities in family relations that persist throughout the life course. As increasing numbers of immigrants enter middle and old age in their host countries, they encounter a variety of developmental tasks typical for later adulthood, one of which is mourning the deaths of parents and extended kin. How do immigrants cope with transnational deaths and grieve losses in origin countries while living in their adoptive country? What is the impact of immigrants' experience with migratory loss and mourning earlier in life on the way they grieve later in life?

Montclair State University, Montclair, NJ.

Correspondence concerning this article should be addressed to Olena Nesteruk, Department of Family Science and Human Development, 4036 University Hall, Montclair State University, 1 Normal Ave., Montclair, NJ 07043. E-mail: nesteruko@mail.montclair.edu.

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LITERATURE REVIEW

Migratory Grief, Loss, and Mourning in Immigration

Following geographic relocation, migrants deal with multiple losses that include the loss of homeland, familiar environment, native language, the company of their family as well as more abstract losses of identity, social status, and social roles (Henry, Stiles, & Biran, 2005; Ward & Styles, 2005; Winbush & Selby, 2015). The loss of any of these is substantial enough to bring about intense grief and require an emotional adjustment (Casado, Hong, & Harrington, 2010). In response to these accumulated losses, immigrants experience a sense of grief that is similar to grief associated with the death of loved ones (Parkes, 1996). Migration loss is both larger and smaller than death: larger because it brings a variety of losses as listed above, and smaller because these losses are not irretrievable (Falicov, 2002).

There is emerging literature on “migratory grief”—mostly qualitative studies that examine grief in immigration and bereavement from the loss of the home country (e.g., Miller & Gonzalez, 2009), culture loss and mourning in immigration (Henry et al., 2005; Winbush & Selby, 2015), strategies used to negotiate the grieving process postmigration and form a new identity (Ward & Styles, 2003, 2005), as well as the development of scales to measure migratory grief and loss (Casado et al., 2010). The experience of being an immigrant has been compared with that of being a widow(er), as both have to adjust to a new life without their significant family members (Disman, 1983). Linking immigrants and other grieving people, Disman (1983) shows that an immigrant’s experience is an instance of the grief experience, a finding supported by other studies that applied Parkes’s grief framework (1996) to loss and mourning in immigration with different populations and countries (Casado et al., 2010; Miller & Gonzalez, 2009; Ward & Styles, 2003). Thus, migratory grief and homesickness are found to follow the grieving process proposed by Parkes (1996) from (a) numbness to (b) searching and pining, which lead to (c) disorganization and despair, and, finally, (d) recovery and reorganization, when a new identity is formed.

The final stage of reorganization, when a bereaved person (i.e., migrant grieving multiple migration losses) forms a new identity, was examined by Ward and Styles (2003) in their study of U.K. women who immigrated to Australia. As a result of leaving the homeland, experiencing the challenges of migration and having to meet new demands, the reinvention of the self occurred. The majority of the women in the study reported experiencing personal growth—feeling more independent, confident, and stronger—because they were able to survive in a new environment without family and social support. This reinvention of the “new me” instilled new emotional strength and self-sufficiency in immigrants (Ward & Styles, 2003). Similar findings of personal growth and development of the new identity came out of Miller and Gonzalez’s (2009) study of Hispanic immigrant women in the United States. These researchers also found support for applying Parkes’s (1996) grief framework to migration losses and grief experienced by immigrants.

A distinction is commonly made between two types of losses: (a) physical (tangible) loss of loved ones or personal possessions; and (b) symbolic (abstract loss) of status, social role, identity, as well as the loss of native language, homeland, and familiar environment. The abstract losses are often not recognized by society. Immigrants’ grief expressions over cultural and personal losses are often dismissed, while there is a strong expectation that they rapidly adjust to their host country (Casado et al., 2010). In consequence, the experience of migratory grief is similar to disenfranchised grief (Doka, 1989)—grieving the losses that are not openly acknowledged, socially validated, or publicly mourned. In a study of Colombian immigrants in the United States, Perry (2010) examined several manifestations of migratory grief, demonstrating how migratory grief is an example of disenfranchised grief.

Coping with migratory grief is an ongoing, circular, and complex process (Perry, 2010). Therefore, the experience of migratory loss and grief may have repercussions for other losses immigrants experience later in life.

Life-cycle Changes, Caregiving, and Communication in Transnational Families

When people migrate to another country, they leave behind their immediate and/or extended family members, thus creating transnational families that maintain economic and emotional ties across continents (Trask, 2010). In the context of global migration, transnational families have to deal with various life-cycle changes and transitions across borders and large geographic distances (Baldassar, Baldock, & Wilding, 2007). Major life events such as births, graduations, illnesses, and deaths may be particularly painful for immigrants left to either celebrate, cope with, or grieve without their extended family (Falicov, 2002, 2016). Recent advances in communication technologies (e.g., email, Facebook, Skype, Facetime, WhatsApp, Viber, etc.) alleviate the pain of separation by helping today's transnational families to stay in touch psychologically and be present virtually in the moments of crisis such as illness or death (Bravo, 2017). However helpful, communication technologies do not replace the satisfaction of face-to-face interactions and contacts, such as exchanging a comforting hug, resulting in transnational connections that are missing the intimacy of shared family life (Bravo, 2017; Skrbis, 2008). The physical absence can be a source of sadness, anxiety, and guilt for members of transnational families in both countries as they learn to live with a lifelong experience of ambiguous loss—loss that is unclear, incomplete, or partial (Boss, 1999).

Geographic distance and the passage of time disrupt and transform care exchanges in translational families (Baldassar, 2007). Adult immigrant children have to negotiate competing demands of the work and families they established in their adoptive country with family demands in the countries of birth, having to balance time and money allocated to both. Immigrants try to fulfill caregiving responsibilities to their aged parents by keeping in touch via phone and Internet, sending remittances to cover medical and/or living expenses, coordinating or delegating the care their parents need, and, as much as circumstances allow, making visits to their origin country in order to provide hands-on care (Baldassar et al., 2007). Patterns of transnational family caregiving may intensify in times of crisis and major life events, fluctuating over the life course of an individual or a stage of family development (Baldassar, 2007). In the context of vast geographic distances and borders, immigrants feel anxious about their parents experiencing health crises that will require their physical presence in the origin country to attend to an illness, an emergency, or a death (Şenyürekli & Detzner, 2008).

The ability to engage in transnational caregiving or to be physically present during crisis moments, such as hospitalization or a funeral, depends on migrants' resources: money to pay for international airfare or to wire remittances to aging parents, how much time they can take off work, and whether their legal status allows for international travel and safe return to the United States (Bravo, 2017; Şenyürekli & Detzner, 2008; Wilding & Baldassar, 2009). When unable to provide care or attend a funeral of a loved one, immigrants may use remittances to compensate for their absence as a way of coping with feelings of guilt, remorse, or helplessness (Bravo, 2017; Solheim, Zaid, & Ballard, 2015).

Although advancements in communication technologies allow for more frequent communication in families separated by long distances, they do not replace real life face-to-face interactions and the intimacy of shared family life. Research studies and clinical work with transnational families reveal that physical absence of family members results in a feeling of chronic loss accompanied by grieving and mourning (Falicov, 2007; Solheim et al., 2015). In addition, a tradition of censoring information, typical for transnational

families, may contribute to the loss of intimacy over time. In an implicit agreement, members of transnational families engage in ambiguous communication—they refrain from sharing bad news, worries, or their true feelings and situations (Şenyürekli & Detzner, 2008; Solheim et al., 2015). Migrants may not admit to parents that they experience difficulties or feel homesick, while parents may not tell children that they have health problems or withhold information about deaths in the family. In essence, both parties cope with life's difficulties largely on their own, leaving social familial support unutilized or utilized only partially. Such practice may lead to increased self-reliance and emotional distance in transnational families (Baldassar, 2007).

Further, the experience of surviving and constructing a new life in another country changes immigrants—they learn of their strengths, develop resiliency, form new bonds, reinvent themselves, and become extremely independent (Falicov, 2016; George & Fitzgerald, 2012; Ward & Styles, 2003). As a result of exposure to new ideas, people, culture, and life situations immigrants experience enormous personal growth (Berger, 2004), which may significantly contrast with the life experiences of family members left behind. This growing apart and gradual loss of closeness among family members in adoptive and origin countries can deepen over time and become evident during immigrants' return visits (Nesteruk & Price, 2015). Modern means of travel and communications notwithstanding, "migration is invariably a process that dissociates individuals from their family and friendship networks" (Skrbiš, 2008, p. 236). In sum, the members of transnational families have to deal with emotional intricacies in relationships that are further complicated by large geographic distances, cultural differences, and the passage of time.

Intersection of Aging, Migration, and Ethnicity

In the fields of migration studies and social gerontology, there is an increasing interest in researching older migrants, the fastest growing segment of the elderly population in Europe and North America (Ciobanu, Fokkema, & Nedelcu, 2017; Zubair & Norris, 2015). Foreign-born elders comprise 13% of the population 65 and older in the United States, and by 2060 they are projected to increase to 26%, comprising over 25 million people (Colby & Ortman, 2015). This growing population of aging migrants will continue to change the demographic landscape in many Western countries, requiring society's understanding of what it means to age in one's adoptive country.

Although the population of "aging immigrants" or "foreign-born elders" is often viewed as homogeneous, researchers increasingly distinguish among the various diverse groups. With some variation, main typologies of older migrants include: amenity-led affluent retirement migrants, aging-in-place/long-term labor migrants, return of retirement (older migrants returning home), and migration in later life (follow-the-children migration or older economic migrants) (King, Lulle, Sampaio, & Vullnetari, 2017; Warnes & Williams, 2006). These classifications and associated research contribute to a better understanding of the diversity of aging migrants and challenge commonly held assumptions of their multiple vulnerabilities and marginalization.

The majority of foreign-born elders in the United States are comprised of long-term immigrants, those who arrived in the United States as young adults and are now aging in place as long-term residents (Batalova, 2012). After decades of living in the United States, working and raising children, these long-term immigrants typically become proficient in English, advance economically and socially, and become integrated into the larger society beyond the immigrant community (Leach, 2009). Although distinctions between late-life and long-term groups of foreign-born elders are acknowledged, there is limited research on the experiences of long-term immigrants aging in their adoptive countries.

As increasing numbers of immigrants enter middle and old age in their host countries, they encounter such developmental tasks in the life course as launching their children, becoming grandparents, retiring from jobs, mourning the deaths of loved ones (in both origin and adoptive countries), and facing their own mortality. Akhtar and Choi (2004) suggest that the losses immigrants experience in middle and old age can feel more profound due to discontinuity of relationships and locations, leaving them more vulnerable than their native-born peers. Mourning can be impeded by nostalgia and idealization of the past places, people, and objects (Akhtar & Choi, 2004). At the same time, immigrants' mourning may be moderated by the distance and time spent away from family and kin in origin countries.

The purpose of this paper is to advance our understanding of long-term immigrants' coping with death and bereavement in the transnational context. Specifically, how do migrants grieve the loss of their parents and kin in origin countries while living in their adoptive countries? What is the impact of their early-life migratory grief on the mourning of losses in middle and later life? How do years of living in the United States and acculturation to its norms affect their bereavement experiences?

METHOD

This paper is based on data from a larger study on *Aging Immigrants* that was aimed at exploring the experiences of the under-studied population of long-term immigrants in middle and later life. A qualitative methodology with in-depth semistructured interviews was used to solicit detailed narratives related to aging as an immigrant and to understand participants' perspectives, subjective experiences, and meaning-making of their circumstances (Daly, 2007). Participants were recruited in the Northeast through senior centers, residential facilities, personal contacts of the author, and snowball sampling. Eligibility was based on: (a) immigrants residing in the United States aged 45 and older; and (b) having arrived to the United States as a young adult (between 18 and 30 years old). Such criteria allowed the recruitment of long-term immigrants who have spent a significant part of their adult lives in the United States.

Data Collection

Data were collected using in-depth personal interviews that lasted an average of 60 minutes and took place in participants' homes, the researcher's office, or public spaces (libraries or senior centers). After signing a consent form, each participant filled out a demographic form, which was followed by a semistructured interview guide. In keeping with the purpose of the larger study, interview questions addressed a variety of topics related to immigration history, connections and visits to the country of origin, heritage language and culture-related activities, ethnic identification, social connections and community ties in the United States, aging, personal growth, coping with losses, and last wishes. I must note that the larger study was not designed to solely and specifically investigate transnational bereavement. Interview questions pertinent to the topic of this paper included:

Over the years, have you experienced losses of people in your country of origin? How do you feel the distance affected the grieving process? Do you think it is easier or harder to grieve for your loved ones across distance? What were the toughest times of your life in immigration? How have you grown as a person as a result of your immigration experience?

Additional prompts and follow-up questions were added for later interviews after I noticed that the concepts related to transnational bereavement were gaining prominence. Interviews were recorded and transcribed verbatim. Immediately following the interview, detailed field notes with observations and reflections were written.

Participants Description

A total of 56 participants (43 women and 13 men) took part in the study. Participants ranged in age from 40 to 93 ($M = 64$), and reported having immigrated to the United States as young adults, at an average age of 25 years. These long-term immigrants spent significant portions of their adult lives in the United States: Average length was 40 years (range 15–74). Almost 60% of the participants fit the category of middle-aged (40–65 years); the rest were categorized as older adults (65+ years). Participants originated from the following 31 countries: Argentina (2), Austria, Belgium, China, Colombia, Czech Republic, Egypt (2), Ethiopia, France, Georgia, Germany (5), Great Britain, Greece, Guatemala (2), Guyana, Holland, India (3), Iran (2), Italy (5), Jamaica, Korea, Kosovo, Lithuania, Mexico (2), Peru, Philippines (5), Poland (3), Romania (3), Switzerland, Taiwan (3), and Vietnam. Participants were diverse in marital status: 31 married, 16 widowed, 3 divorced, 5 never married, and 1 separated. Their educational attainment varied from incomplete secondary to a doctoral degree.

Data Analysis

Data were analyzed inductively with methods informed by phenomenology (Daly, 2007) and grounded theory methodology (Strauss & Corbin, 1998). Phenomenology directed me to view the world through the participants' eyes and to attempt to make sense of, or interpret, phenomena in terms of the meanings people bring to them. Grounded theory provided a set of flexible analytical guidelines that allowed me to follow the data rather than precede it, and provided methods for managing data and examining thematic concepts.

Having conducted 80% of all interviews, I was closely familiar with the data and the context (the remaining interviews were conducted by two trained graduate students). As is common in qualitative research, data analysis started simultaneously with data collection to build a coherent interpretation (Marshall & Rossman, 2011). While studying transcripts and field notes, I began to identify segments of text that contributed to potential codes, and wrote memos about emerging categories and common themes. The goal was to reduce the textual data to coded sections representing the concepts described by participants (Daly, 2007). In an interpretive process, coded sections were compared and contrasted across transcripts as patterns emerged. Following close examination, the concepts were narrowed and the most significant themes in the interview data were identified. Data were organized into files with a record of quotes representing categories and themes that reoccurred across narratives and were significant to the experiences of the participants. Notes, theoretical memos, and my system of color-coding textual data served as useful tools for across-interview analysis.

The analytic process also involved revisiting the literature in related fields after new concepts that required interpretations were noted in the data (Marshall & Rossman, 2011). Based on the participants' descriptions of their reality, I noted emerging concepts that I needed a better comprehension of. I subsequently consulted the literature on bereavement, disenfranchised and anticipatory grief, and migratory loss and grieving. With a more solid understanding of these concepts and related theoretical frameworks, I began to gain a new perspective on the participants' language and experiences. I then worked on updating the review of the literature and adding prompts and follow-up questions to the later interviews. This insight was helpful in transforming meanings from implicit to explicit and facilitated a more accurate interpretation of the data. I then re-read the interview transcripts to make sure that all significant aspects of the participants' experiences were accounted for, and that any exceptions were noted. To ensure confirmability, I retained copies of transcripts, demographic information summaries, observational field notes, and data analysis files.

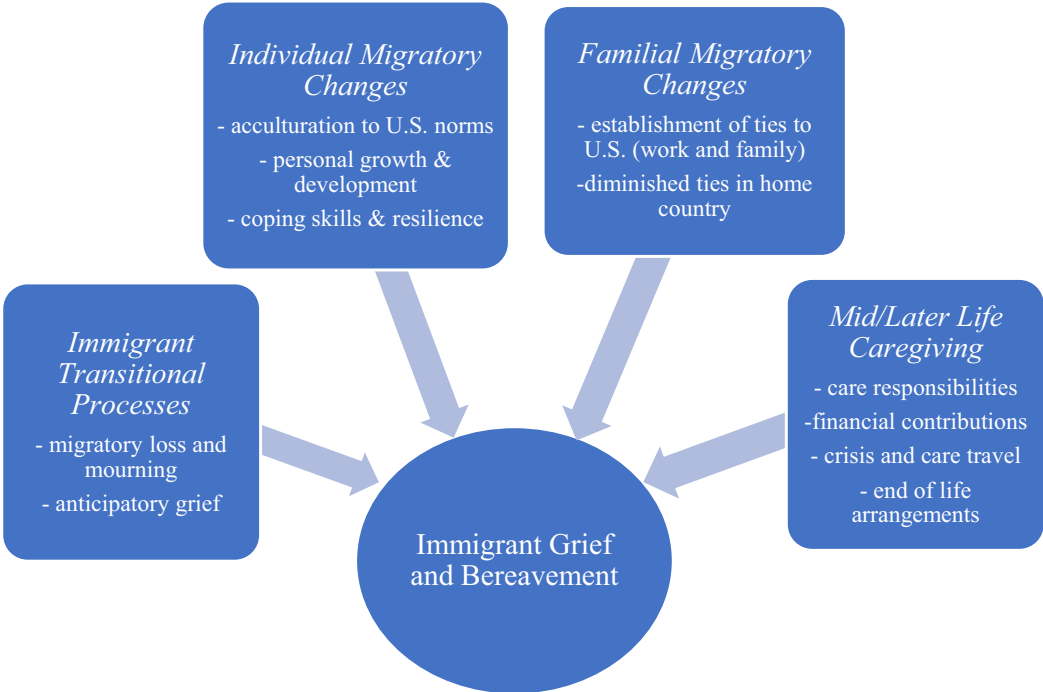


FIGURE 1. Model of Transnational Bereavement
[Color figure can be viewed at wileyonlinelibrary.com]

Reflexivity

Self-awareness and reflexivity about the researcher’s own perspective are important in reducing a bias that may influence data collection and analysis (Daly, 2007). Like my participants, I am a first-generation immigrant in the United States and I am a member of a transnational family that spans three countries. Over the years, I have experienced losses of close family members, and I am familiar with grief over distances. Unlike my participants, I am younger, and have not yet dealt with transnational caregiving or aging in the host country. My “insider” status as an immigrant and a member of a transnational family facilitated participants’ recruitment, helped build rapport during interviews, and was beneficial during data analysis. My “outsider” status as a younger person (relative to my participants), who has not experienced later life-cycle transitions, allowed me to adopt a natural novice attitude and helped some participants not feel intimidated by my position of a “researcher/professor.”

FINDINGS

The complexity of transnational bereavement by immigrants can be represented by a preliminary model (see Figure 1) and discussed using three related themes. Theme one pertains to the combined stressors of caregiving for parents in origin country, balancing work and family in the United States, and managing geographic distances, limited resources, and logistical challenges. Theme two examines immigrants’ experiences with transnational grief and coping, and the impact of distance, participation in the death-related rituals, and acculturation to U.S. norms. Finally, theme three explores how transnational bereavement may be mitigated by anticipatory grief, the resilience

immigrants developed as a result of coping with migratory losses earlier in life, as well as discontinuous family relationships in origin countries and expanded social roles and responsibilities in the United States. Representative quotes from participants are used to illustrate each theme.

Caregiving in Transnational Families

As the health and independence of aging loved ones declined in their home countries, participants described a sense of duty to either provide care directly or financially contribute to this care from a distance. Combined with the desire to assist their aging parents, immigrants also felt a sense of responsibility to their families in the United States—their spouses, children, and grandchildren. Emma,¹ a 67-year-old from Austria, described feeling fortunate that she could visit her ailing mother multiple times at the time of her mother's illness, but also expressed guilt at being away from her family of procreation. Essentially, she struggled with a need to be in two countries at once:

“Toward the end I was visiting twice a year and spending a week with [my mother]. I know I made her very happy, but I have a family and children and grandchildren and a husband [to care for]. I was there as much as I could.”

Valentina, a 63-year-old from Argentina, was unable to provide care directly as her mother's health declined following a stroke. While her sisters provided hands-on care, Valentina felt a responsibility to contribute financially to her mother's care. Unfortunately, this obligation had negative consequences for her retirement savings and her relationship with her husband:

“Initially, my sister took care of our mother, but it became too much. I felt guilty [for living so far away], so we put mother in a home and I was paying \$3,000 dollars per month. And now there is some regret because that was my retirement money . . . and my husband resented this like crazy.”

The sense of obligation and guilt resonated through many of the immigrants' narratives as they reflected on their aging loved ones in the countries of origin. For some, the guilt centered on their inability to be physically present and provide direct care. For others, it stemmed from decades of living apart from their parents and missing out on interactions and closeness; such feelings were especially acute at the time of illness and death. In the event of a transnational death, immigrants experienced feelings of remorse at not being present for the death itself or not being involved in caregiving. Cornelia, a 59-year-old woman from Romania, shared,

“It is not only the grief, it's also guilt for not being able to be there when my father was sick. And [when I did come to visit] I left three days before he passed away — that's the guilt that hits you. I also felt guilty that we didn't make arrangement for my father to come live with us.”

Participants described feelings of distress at their inability to attend a loved one's funeral. Due to geographic distance and the often unexpected nature of death, many immigrants could not make the necessary travel arrangements or afford the extensive financial burden associated with transnational travel. In spite of their desire to be present, time and money constraints, combined with family and work responsibilities, often collided to make an unexpected international trip unrealistic. Oscar, a 63-year-old from Guatemala, explained:

“You get the call, somebody [in your family] died. It's very bad because you can't just get on a plane the next day. You have to look for a ticket, maybe for tomorrow, and it's very expensive, you have to pay \$2,000 dollars.”

¹All names have been replaced with pseudonyms.

Participants also discussed other challenges that prevented them from traveling to attend a funeral such as their work obligations, health challenges, the ongoing war or threat of violence in their home country, and, prominently, immigrants' family responsibilities. For example, one woman shared that, although her husband was supportive of her traveling to attend her mother's funeral, she did not go because she felt she needed to stay at home to take care of her three young children. A number of participants who were unable to travel for a variety of reasons described sending money in place of attending a funeral. This gesture was a way to show their support to their family and to cover the expenses associated with the services.

Traditions surrounding end-of-life services and body disposition vary around the world, thus placing immigrants in difficult circumstances, depending on their countries of origin. Thus, even those participants who felt strongly about attending a funeral were unable to logistically arrange such a trip on a limited timeframe. Maria, a 79-year-old, explained,

"In Mexico by law you have to be buried in 24 hours, doesn't matter your religion. By that time it would have been too late [to travel], it will be finished."

In contrast, Chuang, a 65-year-old woman from Taiwan, described a different tradition,

"Chinese custom takes months. Body is frozen. My brother said 'don't come home because you [are] wasting time. The funeral is not happen[ing] until next year.' That is the Asian way. People feel so sorry for me. But I still have to go to work."

Following her father's death, Chuang continued to go to work, while mourning away from her extended family and traditional rituals.

In sum, immigrants face difficult choices that test their commitments and responsibilities to their parents in their countries of origin and to their children, spouses, and work in the United States. Caregiving responsibilities and end-of-life services in the transnational context are complicated by competing demands over large distances and limited resources of time and money.

Coping with Loss and Transnational Grieving

When describing their experiences of loss, participants who were able to attend funerals in their countries of origin felt that being with their loved ones and participating in rituals associated with death, such as making funeral preparations, sharing meals, praying, and attending services, provided them with a sense of belonging and comfort. Many participants acknowledged that grieving alone in their adoptive country was challenging due to the lack of social support, as explained by Laxmi, a 45-year-old woman from India,

"It is not easy because you are not with your whole family, your relatives, your uncles, and all cousins. Everybody is there together and they are there for each other to give comfort. Here, we are the only ones. [All we can do] is just cry, that's it. So, it is hard."

Being surrounded by familiar rituals and being able to share one's emotions with others who are also grieving helps one process the loss, not feel alone, and facilitate coping. In the absence of a supportive family and community, one's grieving is tougher, as shared by Nino, a 41-year-old woman from Georgia,

"It is more difficult because of the distance. Because you are not making it to the funeral in time, and just not being present. It is harder [to grieve] when you are by yourself."

At the same time, other participants emphasized that being remote from the death of a loved one provided an emotional barrier from the familial upheaval and cultural drama that is often associated with the end-of-life rituals in their countries of origin. For these immigrants, although the loss was upsetting and grieving still occurred, not being directly involved allowed for a faster recovery from the loss. Eleni, a 58-year-old from Greece, admitted:

"Although it is hard to grieve by yourself, it is easier to not be around your relatives, all wearing black and crying. When it comes to death, people back home take it very seriously, it's a lot of crying and a long ceremony. Here you can escape that. Yes, you still feel sad, but it seems easier in the United States."

Both of these perspectives on grief were represented in the participants' stories, as articulated by Radoslaw, a 57-year-old man from Poland:

"It's hard to grieve by yourself, without community and family, but here you get over it faster. For example, when my mother died, I returned to the United States from the funeral and the very next day I went back to work, got busy. That's a good thing and it [helped me not dwell on it]."

Immigrants can find comfort in remembering that the remittances they were sending back home over the years helped their loved ones during their lives, as shared by Rubylyn, a 46-year-old from the Philippines:

"I found it easier for me to emotionally deal with the loss of my grandma because since I came to the United States I have been able to provide for her financially. It made me feel good that for a couple of years before she passed, she had a good life."

When her grandmother died, Rubylyn decided against wasting money on travel, and instead sent the money to her family to pay for the funeral expenses and give her grandmother "a better memorial service."

Increasingly, technological advances in communication enable immigrants to go online to witness the services of their loved ones, see family, and virtually participate in the cultural rituals associated with death. Laxmi described how technology enabled her to be present at her father's funeral without making a trip to India:

"We were on Skype and whatever was going on—I was there. The whole night, sitting online, praying and seeing my daddy until the last moment when they took him away. So, I felt that I was there with him all the time."

Under these circumstances, immigrants can avoid unexpected and costly travel and, at the same time, share their grief with family and friends. Although these technological advancements may not be commonplace in every situation, they do represent an opportunity for immigrants to virtually cross large distances and borders, and to be present at the funeral services for a loved one.

Finally, a number of participants reflected that the longer they lived in the United States the more they acculturated to the habits and traditions of the host culture, including the way they processed their grief. Participants described their perception of the American approach to coping with death as one that expects a quick recovery from loss. The infrastructure of employment and bereavement leave policy are designed for limited periods of grief recovery, and a fast return to productive activities both at work and at home is expected. Sheba, a 50-year-old woman from Ethiopia, explains:

"The more you live in this country, the more you take in the culture, so that helps you. You see your American friends: their parents die—and two days later they are back to work. So you see—that's doable. You kind of get strength from that."

Participants' reports show that the ability to be present, physically or virtually, at the end-of-life services for loved ones brought a sense of comfort, facilitated coping, and alleviated transnational bereavement. At the same time, not participating in the death-related rituals in the country of origin and instead grieving on one's own in the United States, focusing on work and family responsibilities, was also reported as helpful in recovering from loss.

Family Discontinuity and Anticipatory Grief as Mitigating Factors

Immigrants experience profound losses when they migrate and lose physical contact, support, and the presence of family members, which in time may lead to discontinuity of family relationships. Although they keep in touch via phone calls, Internet communication, and occasional visits, the members of transnational families do not share the experiences of daily life and frequent interactions. In addition, these families frequently practice mutual censorship and ambiguous communication. They refrain from sharing the challenges and troubles they experience in order to shield each other from worry. Over time, this leads to a greater self-reliance and the ability to manage change and loss without family support. Immigrants become accustomed to coping with life's challenges on their own, as shared by Firoozeh, a 48-year-old woman from Iran:

"You just get used to it... You get used to being away from your family and just get used to dealing with things emotionally [on your own]. I guess that's also the American way that I've learned and adopted."

Members of immigrant families have to contend with many things that separate them over the years: geographic distance, time zone difference, cultural dissimilarity, and different experiences of daily life. Vincent, a 61-year-old from Switzerland, reflected:

"Over time, I got used to the fact that there was this large distance: geographical distance, time distance ... and you just learn how to deal with it. That is all I can do."

Grieving the loss of the company of loved ones is a component of experiencing homesickness and nostalgia, as immigrants miss the support and presence of their parents, siblings, and extended family both daily and during major life events. Over the years of separation, immigrants grow accustomed to irregular contact with their parents and siblings, so that when death occurs the loss is somewhat mitigated by years of separation, as described by Charlie, a 40-year-old from the Philippines:

"The thing is, you get used to it. When my mother died, it was ... a little bit easier to grieve because I haven't seen her for quite some time."

Another participant similarly reflected on how the change in family dynamics can affect mourning:

"I think the distance made us not to be close to the family and relatives that we left behind, that's why it's easier to get over death."

The experience of immigration involves not only commonly assumed gains and opportunities, but also psychological distress resulting from multiple losses that are grieved deeply. Immigrants lose their home, native language, familiar customs, and surroundings, as well as their social networks—family, friends, and community. This forces individuals to face profound questions of loss, and to cope with discontinuity in life prior to the death of their loved ones. Hyeyoung, a 55-year-old woman from Korea, reflects:

"Through the years you are already used to not having your parents and siblings around, not having daily contacts and interactions with your family and friends. So [when death happens], I believe it's easier to grieve because when you leave your country it is very hard and you always think, 'What about if they die?' or 'What about if I die?'"

This quote also describes the feeling of anticipatory grief, when one mourns in advance of expected death. Anticipatory grief and mourning can exacerbate one's migratory loss early in migration, and appears to affect the grieving process at the time of actual loss years later.

Another factor that may alleviate immigrants' mourning following a death in the origin country is the life they built for themselves in the United States—their family of

procreation and work obligations. As described in previous themes, the demands of their American family and work often compete with immigrants' responsibilities to parents and create additional stress in terms of caregiving over large distances. Further, immigrants' children, spouses, and work duties in the United States also serve a protective role in times of grief by demanding their attention and distracting them from loss. Sofia, an 86-year-old from Italy, remembered:

"When my parents died, I went back to Italy for the funeral. It was hard. . . . But I needed to move on because wallowing in tears won't bring them back and my family in the United States needed me."

Raymond, a 46-year-old man from Peru, commented:

"I had to work, even though I was still mourning. I was busy with work . . . I think that distracted me."

Immigrants have to attend to the needs of their families in the United States and continue to work toward achieving their work-related goals in the host country. Their previous experience of coping with losses following migration as well as the resilience they developed as a result of overcoming hardships and establishing a life in the host country may help with the mourning process.

Finally, in the context of immigration, grief may not follow the typically described trajectory as seen among people not separated by time and place. Instead, it can be experienced in diverse and unexpected ways, as described by Izabelle, a 47-year-old from Colombia:

"I think being far away, you don't grieve through all the way at the time of death, especially if you are not attending the funeral. BUT, every time I had gone back—I felt it! When I return—the grief just hits you."

Return visits to the countries of origin remind immigrants with renewed force about what they have left behind, the missed opportunities to spend time with their loved ones, and countless other migration-induced losses, thereby compounding and intensifying the feelings of grief.

DISCUSSION

The purpose of the present paper was to expand our knowledge of how long-term immigrants in the United States are coping with loss and bereavement in a transnational context, and how this population's experience of migration loss in early life may affect their bereavement experiences in middle and later life. The participants in the current study spent a majority of their adult lives in their adoptive country, the United States. They are members of transnational families that lead globalized lives, in which the places of birth, life, and dying are not the same (Skrbiš, 2008). Large geographical distances and prolonged separations present challenges associated with the dual responsibilities of support to older generations in immigrants' home countries and to the younger generations in the United States. As in previous research on transnational families (Baldassar et al., 2007; Falicov, 2002; Solheim et al., 2015), participants in this study reflected on the feelings of guilt stemming from the inability to fulfill caregiving responsibilities, be physically present at a death, or attend a funeral. These feelings, combined with years of separation, complicated immigrants' bereavement experiences and impacted their coping with the death of family members. At the same time, immigrants' family and work responsibilities in the United States, while adding to competing demands, also played a protective role in times of grief by requiring their attention and distracting them from the loss.

Using their dual frame of reference, immigrants reflected on the different ways death and bereavement are managed in their cultures of origin and in the United States. They commented on the role of community and the importance of being physically or virtually present with their extended family during funerals and memorial services in order to cope with the loss. However, participants also acknowledged that geographic distance from origin family, combined with adopted Americanized attitudes toward death and mourning, contributed to an easier grieving experience. Some remarked that they preferred the “American way” of grieving, which included shorter ceremonies that do not require outward and extensive demonstrations of despair, followed by a fast return to work and daily responsibilities.

Consistent with previous research (Falicov, 2007; Solheim et al., 2015), this study also found that family separations and absences following migration were grieved deeply, often resulting in discontinuity or loss of close family relations over time. Advances in communication technology increasingly allow immigrants to keep in touch with origin families in a transnational context and to be virtually present during major life events such as funerals (Bravo, 2017), however, they cannot fully replace living experiences and interactions in close proximity. For the older participants in this study, some of whom have spent seven decades in the United States, communication technology was not available at the time of relocation, and immigrating meant severing family ties. The middle-aged participants benefited from advances in communication, however, they also noted that immigration was often accompanied by a gradual loss of closeness and growing apart from extended family members.

As a result of starting over in another country and coping with multiple migratory losses, immigrants developed self-reliance, resiliency, and an expanded sense of mastery. Similar to immigrants in other studies (George & Fitzgerald, 2012; Ward & Styles, 2003), these participants’ independence grew from dealing with immigration-related hardships without family and social support. They developed new identities by rebuilding their lives in the host country, and can then rely on these personal resources when dealing with challenges in later life. As described in a previous publication from this study (Nesteruk & Price, 2015), these long-term immigrants also formed new bonds and acquired new roles and relationships through family, employment, and broadened social networks, relying less and less on the social familial support in the origin country. Thus, in addition to geographic distance, transnational family relations are affected by the different life experiences in two countries, cultural transformations (or lack of those), as well as the passage of time, during which immigrants grow accustomed to coping with life discontinuities on their own.

When long-term immigrants enter middle and later adulthood, they carry with them the experience of coping with multiple migratory losses earlier in life: loss of homeland, native language, identity, social status, and familial support. The experience of grief is a reaction to these physical and symbolic losses—“an immigrant’s grief is for the loss of almost everything that once was familiar” (Disman, 1983, p. 110). Migratory grief and homesickness have been compared with grief associated with the death of loved ones and appear to follow the same path: numbness; searching and pining; disorganization and despair; and recovery and formation of new identity (Casado et al., 2010; Henry et al., 2005; Miller & Gonzalez, 2009; Parkes, 1996). Further, migratory grief is an example of disenfranchised grief (Doka, 1989)—a complicated grief that is unacknowledged, invisible, and not validated by the outside world—making it a difficult, continuing, and circular process that immigrants have to cope with over the years (Perry, 2010). As immigrants are learning to accept and live with their migration losses, deaths of relatives back home may evoke migration mourning again, complicating their grief with the feelings of guilt (Falicov, 2002). Consistent with previous research, participants’ narratives in the present study indicated that their experience of migratory loss and grief earlier in life had an impact on how they mourned the deaths of parents and kin in middle and later life.

The narratives of the participants in this study also lend support to anticipatory grief—grief that occurs prior to actual loss. Some of this anticipatory grief and mourning is taking place early in immigration, as a component of homesickness and coping with migratory losses, when immigrants are learning to live alone in a new country. The act of leaving one's homeland and family behind forces immigrants to face profound and difficult questions of loss and discontinuity in life prior to the deaths of their loved ones, as study participants shared. The experience of coping with migratory losses, as well as the resilience immigrants develop, appear to mitigate the bereavement process years later at the time of death of parents and kin in origin countries. When deaths actually occurred, some immigrants felt as if they had already been prepared to live without their loved ones. This finding is consistent with studies that found positive effects of anticipatory grief on postdeath bereavement (Reynolds & Botha, 2006), although research in the area of anticipatory grief was not conducted with immigrant populations. Lastly, in the context of immigration, grief can be experienced in diverse and unexpected ways, intensifying during return visits to origin countries when immigrants are reminded of their multiple migratory losses, years of separation, and missed experiences with loved ones over the years.

LIMITATIONS AND RECOMMENDATIONS FOR RESEARCH

The major limitation of this study comes from the fact that the findings presented here come from a larger study of long-term immigrants, which was not aimed at examining bereavement experiences in detail. Findings related to transnational bereavement emerged in response to several exploratory interview questions that were not followed-up with sufficient prompts at the beginning of data collection, as this was not the main focus of the study. Although concepts and themes that emerged from the inquiry are very thought-provoking, future research is needed to understand the specifics of coping with loss and bereavement in immigrant populations.

In particular, studies should be designed with the specific purpose of investigating the possible influence of early-life migratory loss on the postdeath bereavement among immigrants in middle and later life. Preliminary observations regarding such concepts as anticipatory grief, migratory mourning, immigrants' resiliency, and adoption of U.S. norms related to grieving, as reported in this paper, should be tested and investigated further. Focusing on different ethnic groups and countries of origin, as well as using various methods of data collection and analysis, would greatly enhance our understanding of transnational bereavement among immigrants.

An additional area of future research could be with bereaved individuals who live at a distance but in the same nation. Comparing their grieving experiences with those of individuals in transnational families is likely to add additional insights into the topic and provide implications for practitioners working with these populations.

PRACTICE IMPLICATIONS

Keeping in mind the limitations of the present study and the preliminary nature of some findings, the following implications for family therapists, service providers, and the larger society can be offered.

Understand Migratory Grief and Transnational Bereavement Complications

The life courses of migrants are marked by discontinuity, family separations, and disruptions of familiar socio-economic contexts, which previously provided a safety net and meaning in life (Ciobanu et al., 2017). Practitioners working with this population should

be aware of losses and mourning in immigration not only initially, at the time of relocation to a new country, but also throughout the years, as immigrants undergo life-cycle changes and encounter the deaths of their loved ones in the country of origin. Counselors need to be attuned to the fact that the death of a family member in the context of transnationalism is complicated due to geographic distance, competing demands and logistical challenges of caring for families in two countries, years of separation and feelings of guilt, as well as emotions related to discontinuous family relations.

Recognize Older Immigrants' Personal Resources and Resiliency

While being mindful of the multiple migratory losses and associated grief experienced by immigrants, family therapists should also recognize personal growth and resilience that immigrants develop as a result of coping with discontinuities in life. Although earlier studies of aging immigrants emphasized the double jeopardy resulting from the interaction of old age and migration background, there is a growing awareness of the need to move beyond the problem-focused view of older immigrants (Zubair & Norris, 2015). By exploring the full experience of aging as an immigrant, along with personal growth and resiliency developed as a result of coping with discontinuities in life, clinicians will be able to recognize that older immigrants possess resources and strengths they can implore to surpass vulnerabilities (Ciobanu et al., 2017). Such a perspective will help family therapists, service providers, and the larger society to identify older immigrants' resources and strengths in order to promote healthy adjustment.

Distinguish Between Migrating Elders and Aging Immigrants

It is encouraging that there is a growing understanding of the distinctions between migrating elders (late-life migration) and aging immigrants (early-life migration). At the same time, these two groups of foreign-born elders are either continually treated as one in research studies and reports, or the focus remains predominantly on the socio-economic vulnerabilities and health challenges of migrating elders. The experiences of long-term immigrants aging in their adoptive countries are less well known. Because "aging as an immigrant is not the same as migrating as an elder" (Torres, 2006, p. 1352), practitioners and researchers should avoid generalizations and instead acknowledge the differences between the groups of aging foreign-born. Differentiating between these two groups of foreign-born elders and recognizing immigrants who are aging in place will create fruitful ground for examination of the various issues relevant to clinical work and research advancement. Finally, it is also important not to stereotype all elderly immigrants as disadvantaged or view them as problematic "*others*" requiring special care and a multicultural approach (Torres, 2006). Careful studies of different groups of middle-aged and older immigrants and their experiences with various life-course issues and transitions will help inform appropriate policies and clinical approaches.

CONCLUSION

Immigrants' experience of grieving the death of their parents and kin in origin countries cannot be understood in isolation from previous losses and the larger transnational context. We must consider a multitude of factors, including immigrants' earlier-life experience with migratory loss and coping; relationships and contact with family over the years of living in separate countries (influenced by the frequency and nature of interactions, mutual censorship, visits, reciprocal caregiving, flow of remittances, etc.). Grief experiences of migrants can be complicated by feelings of guilt for being physically absent during the years of immigration, an inability to provide long-term care, to be present at death, or

to attend the funeral. At the same time, immigrants' grief may be assuaged by the demands and distractions that their U.S.-based lives provide. Immigrants' spouses, children, jobs, and expanded social networks and roles that require their time and attention may serve as buffers from prolonged grief. Finally, we must also consider the influence of anticipatory grief as well as the protective role of migrants' personal growth and resiliency developed in immigration, all of which can be valuable resources for coping with losses in middle and later life.

Growing scholarship at the intersection of aging, migration, ethnicity, and transnationalism can be enhanced with the family science perspective. By focusing on immigrant families, how they deal with developmental tasks and respond to changes over the life course, we can deepen our understanding of the connections between aging and migration in the transnational context.

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