The Immigration Experience Among Elderly Egyptian Immigrants In The United States

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THE IMMIGRATION EXPERIENCE AMONG ELDERLY EGYPTIAN IMMIGRANTS IN THE UNITED STATES

BY

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THE CITY UNIVERSITY OF NEW YORK
Abstract

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By

Ihab Girgis

Advisor: Professor Mimi Abramovitz

An increasing mosaic of immigrants comes to the United States’ shores every year for different reasons. An invisible part of those immigrants are the elderly who join their families in the United States. The story of the Egyptian elderly immigrants among them, as one representative group of Arabs, is significant and its investigation is timely. This study explores the context of exit from Egypt, the risk factors for health and mental health distress induced by this transition and how they impede the adjustment process, and the protective factors and processes that buffer the risk factors, foster resilience, and facilitate the adjustment process. This study describes the challenges, difficulties, deficits, opportunities, rewards, skills, strengths, and coping strategies that make up the immigration experience among elderly Egyptians. In-depth interviews were conducted with (30) elderly Egyptian immigrants—comprised of (15) Muslims and (15) Coptic Christians—who came to the United States after turning 60 years of age; they came to join their families but under differing circumstances. Using a stress and coping theoretical lens and descriptive phenomenological analysis, themes were identified within each interview and across interviews.

The main themes identified through data analysis were: Push and pull factors, migratory loss and grief, acculturative stress, opportunities, and coping strategies and mechanisms. Each
theme included a number of categories. Coping strategies and mechanisms had two main subthemes: problem-focused coping patterns and emotion-focused coping patterns, and each subtheme had its own categories. Some findings corroborate previous research about the experience of other ethnic elderly immigrants, particularly the experience of migratory loss and acculturative stress. Some findings were unique to elderly Egyptians, exemplified by such events as the “Egyptian revolution” and the sociopolitical chaos and economic stagnation that ensued. Another distinctive finding—analogues to the widespread chaos and violence across the Middle East that have created urgency for emigration particularly among minority groups—is the push factors among the Coptic Christian minority resulting from the amplified hostilities against them after the revolution. Another unique finding was “circular immigration,” traveling back and forth to Egypt and the United States to manage difficulties related to lack of resources until resolutions are reached.

This dissertation contributes to knowledge about the circumstances and needs of elderly Arab immigrants in general, and elderly Egyptians in particular. With this information, social workers can develop and implement appropriate social work programs, services, and therapeutic interventions for Arabic-speaking elderly immigrants that are geared toward addressing their deficits and building on their strengths.
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“More than any other nation on Earth, America has constantly drawn strength and spirit from wave after wave of immigrants. In each generation, they have proved to be the most restless, the most adventurous, the most innovative, the most industrious of people. Bearing different memories, honoring different heritages, they have strengthened our economy, enriched our culture, renewed our promise of freedom and opportunity for all….”

Bill Clinton

Dedicated to my wonderful parents, Marcelle and Wagdy, whose courageous and driven immigrant spirit brought me here to this land and ignited the torch of my passion, and to my two precious sons, Daniel and Gabriel, whom I hope can bear the torch and maintain its flame
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CHAPTER I: INTRODUCTION AND PROBLEM STATEMENT

Introduction

The demographic landscape of the United States currently is experiencing two major population shifts: aging and ethnic diversification (Mui & Kang, 2006). The elderly population in the United States has surged in recent years as the oldest Baby Boomers reached retirement age. A segment of this growing elderly population is comprised of an aging foreign-born population (those who had immigrated earlier in life) as well as the immigration of older adults as part of family reunification and refugee admissions (Leach, 2009). More specifically, the US elderly immigrant population increased from 2.7 million in 1990 to 4.6 million in 2010, as in that year 11.9 % or one in eight adults aged 65 and older were foreign born (Wilmoth, 2012); that figure is projected to increase to more than 16 million in 2050 (Leach, 2009). Among elderly immigrants overall, the number of late-in-life immigrants aged 65 years and older, whose admissions to the United States also increased in recent years (Wilmoth, 2012), was estimated to be about 10 % in 2010 (Batalova 2012). Thus, there has been a growing interest in the immigration experience of ethnic elders in the United States in recent years. Arab immigrants represent one such segment of this aging population.

Very little is known about the immigration experience of elderly Arab immigrants. There are a few mostly quantitative research studies about this population (Ajrouch 2005a; Ajrouch 2005b; Ajrouch, 2007a; Ajrouch, 2007b; Ajrouch, 2008; Ajrouch & Jamal, 2007; Wrobel, Farrag, & Hymes, 2009). However, none of these studies explores and describes the essence of the immigration phenomenon among them. This study fills this void. It explores the meaning, structure, and essence of the lived immigration experience among elderly Egyptian immigrants, as one representative group of elderly Arab immigrants. It seeks to discover the different factors
that motivate elderly Egyptian immigrants to migrate, the challenges and opportunities that shape their transition, and the mechanisms they utilize to cope and adjust to their new environment.

The purpose of this inquiry is motivated by applicability. The information gathered will provide a multilevel perspective of immigration in late adulthood informed by the ecological model of social work practice, which addresses intra-individual, interpersonal, environmental, and policy factors (Bronfenbrenner, 1977). This includes the contextual and motivating factors for immigration, the changes in cognition, lifestyle, roles, family relationships and socioeconomic status that elderly immigrants experience when they come to the United States, the impact of the experience on their self-esteem, self-image, mental and physical health, and need for care, as well as the different risk and protective factors that shape their coping strategies. The findings can be used to inform therapeutic interventions and guide the development of appropriate programs, services, public policies, as well as opportunities for personal growth and development.

Understanding, for example, the changes in roles, relationships, and lifestyle that elderly immigrants experience when they come to the United States and the concomitant changes in socio-economic status and self-esteem can guide program development and would create different mechanisms to restore self-worth and self-esteem (i.e., per diem employment, vocational training). Also, understanding the elderly immigrants’ relationship dynamics with their family members and the potential strains on these relationships created, for example, by the inability of adult children to provide caregiving needs, can guide interventions that would be aimed at relieving the caregivers (i.e., establishing need to allocate funds or facilitating policies for developing immigrant caregivers’ respite or adult day care programs). Likewise, understanding the risk and protective factors that impact health and mental health among elderly
Egyptians—embedded in their experience of stress and utilization of coping resources and mechanisms—within their immigration and cultural context can inform ethnic-sensitive therapeutic interventions and programs that could be tailored to effectively address their mental and physical health needs during this developmental stage. Beyond the parameters of this study, such knowledge may prompt further research that can shape and inform aging and/or immigrant policy and practices.

**Problem Formulation**

Elderly immigrants face complex challenges. Immigrants to the United States who arrive at an advanced age have different needs from immigrants who have been living in the United States for a number of years, although both groups are considered elderly immigrants. For example, recent immigrants must wait five years to qualify for benefits and entitlements (Binstock & Baptiste, 1999; Gorospe, 2006). The psycho-social transition associated with migration at this stage of the life cycle—the disruption of cultural norms, adaptation to a new cultural context, loss of control, ethnic stereotyping, and adjustment to new living arrangements and restructured lifestyle—may lead to stress that negatively influences physical and psychological well-being and social functioning among ethnic elders (Lee, 2007; Lee & Holm, 2012; Mui, 2001; Mui & Kang, 2006; Wilmoth & Chen, 2003). Their limited English proficiency and difficulty navigating bureaucratic systems are also common problems for elderly immigrants (Gorospe, 2006). As such, they are relatively disadvantaged—compared to their respective non-immigrant and immigrant counterparts who had migrated earlier in their life and have achieved proficiency in the English language, in accessing and utilizing important services, including health and mental health care (Keller, Gangnon, & Witt, 2014; Mui et al., 2007; Sentell, Shumway & Snowden, 2007; Gorospe, 2006). Immigrant elders are thus at high risk of health
and mental health problems such as depression, anxiety, post-traumatic stress disorder, diabetes, hypertension, and heart disease, among others, due to the stress of immigration, acculturation, and family disruption (Casado & Lueng, 2001; Emami & Ekman, 1998; Mui, 1996, 2001; Mui & Burnette, 1996; Mui & Kang, 2006; Silveira, et al., 2002; Torres, 2006; Wilmoth & Chen, 2003).

On the other hand, elderly immigrants who had immigrated earlier in life and have aged in the United States may not have the same immediate needs as more recent newcomers. Nonetheless, they may encounter similar issues by virtue of belonging to a new immigrant group. Although they may assimilate to American culture to various degrees, they are likely to experience identity conflicts and cultural clashes (Ajrouch & Jamal, 2007; Lee, 2007; Mui & Kang, 2006). They may be subject to the same prejudices, stereotyping, and discrimination of the larger society (Lee, 2007). They may also have similar economic and social disadvantages encountered by their recent elderly immigrant counterparts (Angel et al., 1999).

Research on ethnic and immigrant elders does not often distinguish elderly immigrants who arrive at an advanced age from those who have immigrated at a younger age and grown older in the United States. In the same vein, some research studies do not delineate the different needs of the two groups clearly, as they both are clustered into one category. The literature review that follows will distinguish between immigrants who “age in place” and those elderly immigrants who emigrate at an advanced age from Arab countries and will focus on the latter group. These are a uniquely challenged group.

**Research Among Arab Immigrants**

Arabs overall have been viewed as difficult to research. They are too small a proportion of the population to include in statistical analysis of census data or existing surveys and may be overlooked in the total demographic landscape of the United States (Salari, 2002). In fact, they
are classified with non-Hispanic Whites and not as a distinct group (Ajrouch & Jamal, 2007). Nonetheless, research about this group is urgent particularly because of recent worldwide events—such as 9/11 and its aftermath and the revolts spanning the Arab world—which have drawn attention to the Arab and Middle Eastern populations. Political events may have contributed to a generalized notion of what is in fact a complex immigrant group.

In the United States, little is known about the diversity of Arab Americans (Salari, 2002). Arabs are diverse in terms of religion, ethnicity, and country of origin (Salari, 2002). They come from 22 nations in North Africa and Asia and mostly practice the Christian and Muslim faiths, among others (Gualtieri, 2001). Lebanon is the number one country of origin for Arab immigrants to the US, followed by Syria and Egypt (Gualtieri, 2001). Arabs have been immigrating to the United Stated since the early 1900s; however, political turmoil in the Middle East has resulted in increasing numbers of immigrants over the last 40 years (Gualtieri, 2001). “Arab immigrant” is a pan-ethnic term that refers to people who arrive from many Arabic-speaking nations (Ajrouch & Jamal, 2007).

Despite differences, Arabs share a common language and culture. They share an emotional attachment to Arab customs and are committed to traditional Arab values, such as the maintenance of strong family ties, higher education, and economic mobility. Arab American communities often center around religious practices and institutions. Middle Eastern food and the warm hospitality associated with it is central to the identity of Arab Americans. This study will focus on the experience of elderly Egyptian immigrants as one representative group of elderly Arab immigrants.

Arab immigrants are an understudied group in the United States. The circumstances of the elderly among them call for a thorough understanding of how different worlds of aging in the
immigration context contribute to their mental and physical health. An examination of well-being and coping styles among Arab elders is particularly important at a time when they report higher incidents of psychological distress and increased utilization of mental health care (Wrobel, Farrag, & Hymes, 2009). In order to have sound policies, effective programs, and appropriate therapeutic goals and interventions for elderly Arab immigrants, their unique experiences and psychosocial needs must be studied.
CHAPTER II: THEORY AND LATE-IN-LIFE IMMIGRATION

Introduction

Immigration is a complex, intricate, and multifaceted experience. It requires leaving behind one’s country of origin and its familiar ways, memories, legacies, relatives, friends, and achievements. It involves adjustment to a new cultural context and language, changes in identity, status, values, cognition, social roles, family dynamics, financial and living arrangements (Angel & Angel, 1992; Angel & Markides 2000; Zhang et al., 2012). Immigration late in life often intensifies these challenges for the elderly who may also be undergoing changes or losses associated with the aging process (Angel & Markides, 2000; Angel et al., 1999; Lee, 2007; Torres, 2006; Wilmoth & Chen, 2003). On the other hand, late-in-life immigration may also present certain opportunities that may be used effectively in combination with coping mechanisms and strategies to create protective factors that offset such stressors. Therefore, stress and coping theory is essential to understanding the experience of elderly immigrants and will be used primarily to guide and inform this research study (Lazarus & Folkman, 1984).

In addition, both immigration and aging theories can also provide different lenses that would facilitate the understanding of this experience. Theories of immigration are numerous but different in orientation and in the lens through which each explains a certain aspect of immigration (i.e., motives, causes, process, or impact). None of these theories, however, is comprehensive and wide-ranging in the ability to explain the immigration experience on its own, but they all are rather complimentary in this endeavor. Even in combination, such theories may have limited applicability to the experience of elderly immigrants and may need to be supplemented by others. They nonetheless provide some understanding of the immigration experience in general and are thus worthy of mentioning. Likewise, aging theories differ in their
approaches and the lens each applies to understand this experience, and compliment immigration
theories in how they both can explain certain aspects of the immigration experience among the
elderly.

It is important to note that, due to the nature of the subject under study, stress and coping
theory, at relevant points, embodies and shares common denominators or conceptual
underpinnings with both immigration and aging theories, such as themes of transition, potential
loss, disengagement, strain, and availability or lack of resources to cope with such challenges.
Thus, due to its comprehensive utility, stress and coping theory, as mentioned, can effectively
guide and inform the understanding of the immigration experience among elderly immigrants. A
summary of both immigration and aging theories therefore will be followed by an elaboration of
stress and coping theory to point out how each theory can contribute to the understanding of this
experience but more importantly to delineate the latter’s wide-ranging integration of other
theories and its relevance to this research study.

**Immigration Theories**

**Micro, Meso, and Macro Level Theories of Immigration**

Micro level theories focus on psychosocial and individual mechanisms that determine the
individual’s actions. The person’s cognition, values, motivations, skills, and aspirations shape the
decision to migrate (Massey et al., 1994). A cost-benefit analysis of the advantages and
disadvantages of migration is usually at the center of the decision-making process (Massey et al.,
1994). Meso level theories, on the other hand, focus on immigrants’ ties to social networks in the
receiving countries (Lotharweiss, 2003). The ties can range from strong and dense networks to
tangential and weak. Immigrants can utilize and benefit from resources embedded in these ties,
such as different dimensions of social capital and solidarity (Boyd, 1989). Such benefits can be
converted into different forms of capital to help immigrants achieve their desired goals, such as obtaining jobs and improving their status in society (Massey et al., 1994).

Macro level theories point out the social and structural conditions that shape migration. For example, neoclassical economic theory explains that labor market conditions of supply and demand shape immigration. It posits that low demand of labor in countries where there is a large supply tend to force individuals to look for work and migrate to countries where there is a shortage of, and high demand for, a labor supply (Massey et al., 1994). Segmented labor market theory further posits that the emergence of global markets also has created a bifurcated labor market—a primary sector with good wages, benefits and work conditions, and a secondary sector characterized by low pay, limited benefits, and menial work conditions (Massey et al., 1994). Immigrants tend to fill such demand for jobs created by secondary sector positions, which usually are rejected by natives (Massey et al., 1994).

As pointed out, each of the micro, meso, and macro level theories generally shed light on some aspects of the immigration experience, but they do not facilitate the particular understanding of the immigration experience among the elderly. Although one of the motives for immigration among the elderly may be economic, it is but one of many other important factors. Further, macro level theories may explain one of the motives for immigration, which may facilitate the understanding of the immigration context, but it is limited in explaining other aspects. Similarly, the decision-making process, at this juncture of the life cycle, may not be governed so much by labor market demands, skills, and aspirations of the individual, and may not involve a cost-benefit calculus. It is rather a result of reuniting with family members or escaping different crises in the home country. In the same vein, meso level theories facilitate the understanding of how family support and dense social networks can buffer the challenges that
elderly immigrants often encounter in a new social and environmental setting. However, they do not take into consideration structural and institutional mechanisms or individual characteristics that impact such transition.

**Segmented Assimilation Theory**

Segmented assimilation theory posits that the United States is a stratified society with several trajectories that new immigrants can follow and different “segments” to which immigrants may assimilate (Alba & Nee, 2003; Portes and Rumbaut, 2001; Portes & Zhou, 1993). The first path includes increasing acculturation and integration into the American middle class and leads to upward mobility (classical assimilation theory). The second path includes increasing acculturation into the urban underclass and leads to downward mobility and poverty. The third path includes “selective acculturation” and leads to strategic preservation of the immigrant community’s culture and values accompanied by socio-economic integration.

Portes and Rumbaut (2001) along with Alba and Knee (2003) further expand on segmented assimilation theory by specifying the factors that influence these disparate outcomes and highlighting the different “proximate” and “structural” factors that can facilitate or impede the integration of immigrants. Proximate factors include personal motivations and life choices, the forms of human capital migrants bring with them, or solidarity among close-knit immigrant groups. Structural factors are the broader institutional and cultural environments within which the proximate factors come into play, and which either can encourage or prevent immigrants to take steps to integrate into the mainstream. Such factors include the context of reception and modes of incorporation into the host society—any policies involving immigrants in their host country on a broad range of issues such as citizenship, education or welfare, and also more informal contextual forces such as customs and collective racial or religious prejudices.
Segmented assimilation draws upon the importance of absence and availability of coping resources embedded in the context of reception—such as immigration policies, collective societal prejudices, and the characteristics and level of support of the co-ethnic community—in shaping the adjustment trajectories of immigrants. For example, immigrants who have no access to different opportunities or benefits might remain at the bottom of a racial stratification system and face ethnic and racial stereotypes, marginalization, and discrimination. A case in point is Cuban immigrants escaping from Communism who received significant social resources, support, and public benefits that facilitated their integration (Stepick & Stepick, 2009). In contrast, refugees from other Caribbean countries, such as Haiti, who escaped social chaos and political upheaval did not receive the same treatment as Cuban refugees and had difficulty integrating into US society (Stepick & Stepick, 2009).

Although segmented assimilation theory may have limited applicability to immigrant elders, it nonetheless can guide the understanding of the stress and coping process among them. For example, the elderly who come to the United States from non-western countries and whose linguistic and cultural differences are more pronounced experience more dissonance and difficulty in adjusting to American society. They may also tend to retain their distinctive ethnic and cultural elements, more so than their younger counterparts, and may be subject to more prejudices. They may reside in immigrant enclaves where their interaction with people from the mainstream are quite limited. They may be out of the labor market and lack financial means to achieve independence from their children. The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996—which barred new immigrants from receiving federally funded public benefits such as Supplemental Security Income, public assistance, food stamps, and Medicaid for five years—may additionally sever coping resources and simultaneously
induce stress that impacts their adaptation patterns (Chin, Dean & Patchan, 2002; Dordeski & Steffens, 2010; Singer, 2004). Such dynamics may also contribute to problems within the family system. Children who acculturate differently than their parents or grandparents, for example, may have a breakdown in communication between the generations that lead to parent/grandparent-child conflict (Portes & Rumbaut, 2001). This diminishes the parents’ or grandparents’ ability to maintain an influential role, guide or support their children, and leaves them alienated within their family. For example, Arab elders who lack resources (i.e., language ability, economic means, social networks, and general knowledge of the American culture) to match their children’s or grandchildren’s acculturation may experience a role reversal. Instead of fulfilling the cultural role of the “wise” figures that draw family members for advice, they may be dependent on their children or grandchildren for advice or help, and be ignored or even ridiculed for having an outdated or incongruent value system. In contrast, elderly immigrants who have resources and possess education and other skills that are valued in the American society may encounter a more hospitable environment and have a greater opportunity to control their family situations.

**Theories of Aging**

**Disengagement Theory**

In the realm of aging, several theories can help explain certain aspects of the immigration experience among elderly immigrants. Disengagement theory argues that decline in engagement is a natural part of later life. Withdrawal of the individual from society is also inevitable, and it serves both the individual and society. Life satisfaction is highest among those who disengage successfully, as society gainfully redistributes their roles among others (Bengtson et al., 2009). Activity theory, on the other hand, became an explicit theory of aging in response to
disengagement theory. It points out that successful aging is active, as older people have the same psychological and social needs as younger people, and that it is neither natural nor inevitable for people to disengage (Bengtson et al., 2009). Therefore, activity theory emphasizes the importance and benefit of engagement and ongoing social activity for the elderly.

The process of aging can alienate individuals and sever their relationships. Immigration augments this process for elderly immigrants as it severs the ties, relationships, and activities they are used to in the home country. Elderly immigrants have lower exposure to the native language, and their leading role in society is diminished significantly in migration (Gele & Harslof, 2010). Their skills are less likely to be transferable, and employers generally are reluctant to hire them (Gele & Harslof, 2010). Maintaining other roles after retirement—such as familial roles, recreational roles, and volunteer and community roles—helps in maintaining good physical health, self-esteem, positive self-image, and sense of usefulness among the elderly (Gele & Harslof, 2010). The benefits of engagement can be instrumental for the integration of immigrant elders into the host society (Gele & Harslof, 2010; Emami et al., 2005).

**Continuity Theory**

Similarly, continuity theory argues that older adults try to utilize and maintain familiar practices, structures, and arrangements in different areas of life, as an adaptive strategy, to deal with changes that occur during the aging process (Bengtson et al, 2009). Elderly immigrants may have a difficult time maintaining such continuity in a different social and environmental context. Therefore, continuity theory can provide some understanding of some of the adaptive strategies, or other familiar practices, that elderly immigrants may utilize to cope with the aging process in an unfamiliar social and environmental context. It can also guide inquiry into the elderly
immigrant’s inability to sustain and carry on with such familiar arrangements or practices in the United States, and provide some guidance about how to address such barriers.

**Erikson’s Stages of Psychosocial Development Theory**

Erikson's psychosocial development theory can also provide some understanding of the circumstances of immigrant elders. This theory has eight stages that individuals encounter. Within each stage, the person faces a crisis that the person must resolve in order to move forward to the next stage, or experience a negative outcome (Erikson, 1950, 1982). The psychosocial task of late adulthood, in the eighth and last stage in Erikson’s theory, is to maintain ego integrity and avoid despair (Erikson, 1982). Those who succeed at resolving the final task develop acceptance of the life that they have lived and decisions they have made without major regrets while preparing for the inevitability of death (Erikson, Erikson, & Kivnick, 1986; Bengtson et al., 2009). Those who contemplate their past with regret and fixate on their bad decisions or wonder if another path may have been more productive or happier feel despair (Erikson, Erikson, & Kivnick, 1986; Bengtson et al., 2009). Elderly immigrants adjust to various significant changes at this stage: declining health, diminished physical strength, reduced income, death of significant others, unfamiliar social settings, new living arrangements, and different roles and relationships. These challenges can complicate the favorable resolution of this last stage and may intensify the feeling of loneliness, alienation, and despair, and exacerbate maladaptive coping mechanisms, depression, and even suicidal thoughts (Casado & Leung, 2001; Mui & Kang, 2006).

**Social Integration Theory**

Social integration theory for older adults also has implications for elderly immigrants (Rosow, 1967). This theory posits that integration of the elderly in society is contingent upon
their values and beliefs, the groups to which they belong, and their social roles. Social integration of older adults is contingent upon preserving their patterns in these domains. Thus their integration is undermined when there is disruption in their lifestyle, activities, and relationships. The increased risk of personal demoralization and alienation from society is greater among those who experience fundamental changes in those areas. Late-in-life immigrants tend to experience an unfamiliar environment that undermines their values and beliefs, compromises their group membership, disrupts their social roles and activities, and renders them vulnerable and alienated. Those who settle in ethnic enclaves preserve their language and culture inside the group but become isolated from those outside the group, the broader community, health and social service providers, and the mainstream culture. Social integration offers opportunities to develop supportive relationships, increased access to coping resources, and provides meaning to life.

**The Life Course Theory**

The life course theory also provides insight into the experience of elderly immigrants (Elder, George, & Shanahan, 1996). Life course theory posits that people are actors with choices, but their chosen paths are influenced by historical, social, and developmental factors. More specifically, the historical context—time, place, and culture—within which people live their lives interweaves their experiences and worldview and shapes their life course. The timing or stage when an event, transition, or role takes place in people’s lives also is critical and has differential impact on their experience. Moreover, people’s lives are independent and embedded within family relationships; social and historical influences are reproduced and articulated through this network of shared interactions. Thus, people’s choices, actions, and coping strategies and mechanisms, however differential, take place within the opportunities and constraints of historical and social circumstances.
Late in life, immigration is often linked to several life course events: the immigration of adult children, retirement, income decline, and loss of independence or support, among others. For immigrants as a group, migration is a significant transition in the life course for all members. However, different cohorts from different cultures experience this transition at different stages in their life cycles and within different historical contexts. The psychosocial impact of migration—as both an event and a transition—on Arab immigrants and their life course trajectories would therefore vary among cohorts and during different historical periods.

The life course theory has been introduced to explain stress and coping mechanisms and its influence on immigrants. Immigrants make proactive choices among options that construct their life course. These choices are influenced by both social and historical factors. Different cohorts experience this transition at different stages, within different historical contexts. Immigration might have different psychological impacts on people of different ages and in different historical periods. The adaptation of immigrants is associated with their exposure to stressors, actual resources, and access to resources to cope with stress (Gaines, 1998). For example, elderly Egyptian immigrants, as well as their counterparts from Arab countries, who had witnessed the uncertainties, upheaval, and chaos in the aftermath of the “Egyptian revolution” or the “Arab Spring,” may have been impacted to varying degrees according to such an exposure.

Elderly Arab immigrants, for additional example, would experience immigration to the United States after the events of 9/11 or after the passing of PRWORA of 1996 that curtailed social welfare benefits differently from their younger counterparts or from those who immigrated before the events of 9/11 or the passing of the 1996 law. Moreover, elderly Arab immigrants and their adult children are interdependent. The pattern of mutual support between Arab elders and
their children is shaped by life events and transitions across the life course, and often is disrupted by migration and the social and cultural forces of the host society (Hareven, 1996). For example, the authority of elders and traditional pattern of intergenerational support often is compromised in Arab families when the children pick up the new language and cultural norms faster than the adults in the family and take on the role of interpreter and, at times, the decision maker for their parents and grandparents (Hernandez & McGoldrick, 2005). More diversity in life course trajectories among elderly Arab immigrants, as a cohort, can also be expected due to a variation in socio-economic status, gender, religion, marital status, and individual choices and responses.

**Stress and Coping Theory**

Stress and coping theory developed by Lazarus and Folkman (1984) guides an understanding of the various stressors arising from immigration and acculturation experienced by elderly immigrants. Lazarus & Folkman (1984) view stress as arising from a relationship between the person and the environment. Coping is the process used to mediate this relationship. A situation is perceived as stressful when there is the possibility of harm, loss, change, threat, or challenge (Lazarus & Folkman, 1984). The individual then determines what can be done about the perceived stressor. The stress response process involves two components, coping behavior, and coping resources.

Coping behavior refers to actions or strategies taken by individuals to reduce, avoid, or eliminate the stressor (Lazarus & Folkman, 1984; Pearlin, 1999). Coping behavior consists of cognitive and behavioral efforts that are changing constantly due to primary and secondary appraisals and reappraisals of the person-environment dynamic causing the stress. In primary appraisals, the perception and framing of a certain encounter or situation induce certain emotions of relative intensity and frequency (i.e., shame, guilt, fear). In secondary appraisals, the
perception of available coping options impacts the coping strategies utilized to manage the strains of the encounter. The utilization of problem-focused coping strategies increases if the outcome of an encounter is appraised to be responsive to change. If the outcome of a situation is appraised to be not responsive to change, the utilization of emotion-focused coping efforts then increase in likelihood. At times, a certain behavior may serve simultaneously as both an emotion-focused and a problem-focused strategy.

Coping resources come into play as they permeate and influence the appraisal process of the person-environment dynamics. Coping resources are pre-existing assets that individuals possess and can utilize to combat stressors (Hobfoll, 1989; Lazarus & Folkman, 1984). They can consist of personal characteristics, such as patterns of motivation, commitments, values, beliefs, educational level, financial means, and problem-solving-skills. They can also consist of social variables such as social support, family support, employment, social welfare benefits, and institutional assistance, among others. The utilization of any of these resources to combat stressors, however, must be preceded by the recognition that such resources are already available in the person’s repertoire.

In the same vein, Hobfoll (1989, 2001, 2002, 2007) focuses on resources as the key to understand the stress process. He argues that people reserve resources to cope with difficulties, and the loss of resources is the primary cause of stress (Hobfoll, 1989). In addition, threats to resources, failure to replenish resources, and failure to gain from investing in resources also can result in stress (Hobfoll, 1989). Both the actual resources of individuals and their access to those resources are important to the outcome of stress (Hobfoll, 1989, 2001). Some of the resources identified by Hobfoll (1989, 2001, 2002) include self-efficacy, self-esteem, and socio-economic status. For example, self-efficacy is a key mediator between social position and stress. Self-
efficacy represents a sense of subjective control, which assigns cause to outcomes such as success and failure to either personal attributes, such as ability and effort, or to external causes such as fate. A belief in personal control may alleviate stress at times, especially when stressors can be controlled. A sense of control could mitigate the impact of failure by encouraging active problem-solving (Pearlin, 1999).

Relevance of Stress and Coping Theory to the Experience of Elderly Immigrants

The experiences of immigration and acculturation tend to create different levels of stress for the elderly. Stress experienced in the home country may be the trigger for immigration. The decision-making and preparation process to leave the home country is often stress-laden. For example, many refugees or asylees—and some immigrants—arrive in the United States with special mental health needs: trauma, depression, and anxiety due to the devastation of war, rape, loss of loved ones, displacement, fear, and leaving behind familiar people, places, and customs. This is especially true about elderly Arab immigrants who usually are forced to leave the countries and traditional cultures in which they have been entrenched so deeply.

Shuval (1982) argues that forced disengagement from the home country could result in a sense of isolation and withdrawal among elderly immigrants. Compounding their stress is the unfamiliarity, culture shock, disorientation, stereotypical prejudices, and nativist or antagonistic attitudes to which they are suddenly exposed when they arrive to a foreign environment. As a result, these immigrants may become re-traumatized. They may find themselves in a peaceful environment, but in their minds they are still fighting the war or conjuring up images of misfortune that they left back home while struggling to survive in their new environment.

On the one hand, elderly immigrants are often the most vulnerable of any immigrant group and the least equipped to protect themselves against the stress of such transition because
they may experience greater cultural conflict and social isolation due to withdrawal from the labor market. They may lack English proficiency, citizenship status, political connections, economic means, social capital, physical mobility, and different tools of integration into the host society, among other mechanisms which they can utilize readily to advocate for themselves and cope with their new lifestyle (Angel, Angel, & Markides, 2000; Casado & Leung, 2001; Gonzales, Haan, & Hinton, 2001; Mui, 2001; Mui & Kang, 2006). These disadvantages often constitute risk factors linked to depression, anxiety, poor health and mental health, pathological gambling, substance abuse, and passive and active suicidal ideation (Emami & Ekman, 1998; Mui, 2001; Mui & Kang, 2006; Silveira, et al., 2002; Torres, 2006; Torres & Rollock, 2004; Falcon & Tucker, 2004; Stokes, Thompson, Murphy, & Gallagher-Thompson, 2001).

On the other hand, however, such disadvantages and risk factors sometimes are offset by protective factors and processes embedded in social resources and opportunities offered by the host society and personal recourses that serve as adaptive coping mechanisms against stress. For example, elderly immigrants who have English proficiency and high levels of education tend to better maneuver the demands of their new environment and adapt to their new circumstances (Wrobel, Farrag, & Hymes, 2009). Those who can access and utilize available opportunities embedded in health care services, senior programs, and transnational activities are better able to maneuver the demands of their environment. Others strategically utilize family and community support and implement cognitive or behavioral strategies, such as having a sense of hope, practicing religious faith, implementing problem solving skills, or keeping busy with certain activities to serve their needs (Lee & Chan, 2009). Such coping resources and mechanisms constitute protective factors that buffer acculturative stress as elderly immigrants who possess
them are in better mental and physical than are their counterparts who lack them (Gonzalez, Haan, & Hinton, 2001; Wrobel, Farrag, & Hymes, 2009).

In summary, the experience of grief and distress arising from the losses incurred by immigration (migratory loss and grief) and the acculturation process (acculturative stress) is mediated by how the situation is viewed by the immigrant elder in terms of its relevance to his or her well-being as well as to the personal and social resources available to manage the events (Casado & Leung, 2001; Mui & Kang, 2006). Depending on the perception of such personal and social resources and contextual demands (i.e., religious commitment, marital status, educational level, financial means, social capital, family and community support, immigration status, English language proficiency, social welfare benefits and entitlements, among others), coping strategies are formulated, adaptive pathways are developed, and psychosocial outcomes are determined (Casado & Leung, 2001; Mui & Kang, 2006).
CHAPTER III: REVIEW OF THE EMPIRICAL LITERATURE

Introduction: Elderly Immigration Trends

A comparison of the 1990 and 2010 censuses in the United States reveals that the population of elderly immigrants almost doubled in 20 years. According to the 1990 census data, there were about 2.7 million elderly legal immigrants in the United States. According to the 2010 census data, there were about 4.6 million elderly immigrants in the United States. This means that elderly immigrants roughly represented 12%, or one in eight people, of the 40.2 million elderly in the United States in 2010, and roughly represented 12% of the 40 million immigrants in the United States overall. This figure of elderly immigrants has been projected to increase gradually to more than 16 million in 2050 (Leach, 2009). Among elderly immigrants, the number of late-in-life immigrants ages 65 years and older, whose admissions to the United States also increased in recent years (Wilmoth, 2012), was estimated to be about 10% in 2010 (Batalova 2012). Elderly Arab immigrants represent one such segment of the increasing aging population in the United States.

For the purposes of this review, the term, “elderly Arab immigrants” refers to those who arrive in the United States from Arabic-speaking countries after reaching 60 years of age, as opposed to immigrants who arrived earlier in their lives and have aged in the United States. A review of the literature reveals that although there are a number of studies that describe the circumstances and address the needs of older Arab Americans, none is exclusively about those who are the focus of this review. In addition, the studies of elderly Arab immigrants to the United States do not distinguish those who have aged while here and those who have arrived later in life, that is, over the age of 60. Nevertheless, examining available research studies gives direction to the general needs of Arab elders and guides future needs for research.
**History of Arab Immigration to the United States: Push and Pull Factors**

Arab immigrants mainly came to the United States during three waves. The first wave took place between the late 1800s and 1920s, and included predominantly Christian minorities from Greater Syria (present day Syria and Lebanon) who sought economic opportunity and religious and political freedoms (Naff, 1985). Scholars underscore the push factors created by the region’s crippling economy during the mid-1880s and persecution of Lebanese Christians under the Ottoman rule that contributed to the exodus of Arab immigrants from greater Syria during this epoch (Naff, 1985). About half of such immigrants were uneducated and two thirds were unskilled single men, with a minority of writers, poets, and artists, the most famous of whom was Khalil Gibran (Naff, 1985). They settled mainly in metropolitan areas in New York, Michigan, Massachusetts, Ohio, and Pennsylvania, where they developed and inhabited many ethnic enclaves, and mostly worked in the garment, automobile, and steel industries (Abraham & Abraham, 1983).

Arab immigration to the United States was curtailed greatly during the Great Depression and concomitant anti-immigrant sentiments, but recommenced after World War II until the mid-1960s (Abraham & Abraham, 1983). This surge in immigration from Arab countries marked the second wave and included both Christians and Muslims, Palestinian refugees who had been displaced by the 1948 Palestine war and establishment of Israel, and many professionals and elites, particularly from Egypt who left after the 1952 revolution (Abraham & Abraham, 1983; Naff, 1985). Some of the low-skilled immigrants joined their predecessors in the already-established ethnic enclaves of the East coast and Midwest, and some, mainly professionals, settled in the suburbs of these cities (Naff, 1985).
The Immigration Act of 1965, which abolished the quota system, facilitated the creation of a third large wave of Arab immigration that continues to the present (Gualtieri, 2001). This wave has been prompted by different push and pull factors and has included more Muslims and a mosaic of unskilled and semi-skilled laborers, professionals, and entrepreneurs, who, in search for better economic opportunities, came mainly from the Palestinian territories, Egypt, Yemen, Iraq, Lebanon, Syria, Morocco, and Jordan (Gualtieri, 2001). Also, many were driven out of their home countries in large numbers due to regional conflicts, wars, political instability, ethnic and/or religious tension and discrimination, such as the Lebanese during the 1975 civil war and 1982 Israeli invasion of Southern Lebanon; Palestinians from the Israeli-occupied West Bank after the 1967 war; Iraqis during the Iraq-Iran, Iraq-Kuwait wars and the US invasion of Iraq; Yemenis during the civil war; Chaldeans and Assyrians from Iraq as well as Copts from Egypt due to widespread anti-Christian sentiments and discrimination (Abraham & Abraham, 1983; Gualtieri, 2001; Naff, 1985). Also major social and political changes in Egypt, Iraq, and Syria, particularly among the middle class, have made it difficult for people to remain in these countries (Suleiman, 1999). As for the pull factors, the democratic haven, political and religious freedoms, and economic opportunities, have created a strong motivation among these groups to immigrate to the United States (Castles & Miller, 2009; Gualtieri, 2001). Globalization and improvements in transportation and communication further facilitated the process of immigration during this third wave (Castles & Miller, 2009; Gualtieri, 2001).

More recently, oppressive socio-political conditions barring dissent and stifling economic conditions have given rise to popular revolts in the Arab world, stretching from Tunisia, Libya, and Egypt on the African continent to Syria and other countries in the Gulf region and on the Asian continent. Although the toppling of many of the Arab regimes such as Egypt has created
momentum for positive social change, it simultaneously has created widespread chaos, destabilization of law enforcement mechanisms and institutions, further stagnation of economic activities, violence, and persecution, particularly against Christian minorities (Abouzeid, 2011; Dabashi, 2012). For example, the widespread violence, persecution, and systemic discrimination against the Copts of Egypt, exemplified in terrorist acts, bombing and burning of churches, attacking and intentionally killing Copts during peaceful demonstrations, and other harassment and scapegoating mechanisms, has created a strong current of push factors for emigration among this group (Adel, 2013; Elfaizy, 2013; Wallace, 2013). The full multidimensional and latent impact of such sweeping changes in the Arab world has not been realized yet. However, it is expected that such changes would reverberate beyond the Middle East region and further operate as push factors that trigger another flow of immigrants to the North American continent.

**Research on the Immigration Experience among Arab Immigrants**

Early Arab immigrants who came to the United States during the late 1800s and early 1900s encountered nativism of the day, similar to other “white ethnics,” especially Italians and Jews (Suleiman, 1999). Their “whiteness” and right to naturalize was challenged at times, as they often were excluded from institutions run by mainstream whites (Naff, 1985). Nonetheless, they managed to settle in urban and rural areas, established businesses and institutions, advanced their economic status, and thrived artistically (Suleiman, 1999). Their Christian identity also helped early Arab immigrants to develop close relationships with other “white ethnics,” which eventually resulted in a high rate of intermarriage among them (Naff, 1985; Suleiman, 1999). In sum, despite many setbacks, the general Arab experience in the United States in the early part of the 20th century, as numerous scholars point out, is characterized by more social, political, and
economic incorporation, particularly in comparison to such groups as African Americans, Asians, and Latinos (Abraham & Abraham, 1983; Naff, 1985; Suleiman, 1999).

Arabs, particularly second-generation immigrants, continued to assimilate into the mainstream in even greater intensity and numbers, during the post-World War II era, as increasing channels and opportunities for inclusion, coupled with their hard work, persistence, and desire to be accepted as equals to other groups, paved the path for their incorporation (Naff, 1985; Gaulieteri, 2001, Alba, 2009; Alba & Nee, 2003). Arab professionals found residence in suburban areas in larger numbers, and their rate of intermarriage with other white groups increased (Gaulieteri, 2001). They continued to thrive in the social, economic, political, and artistic spheres (Gaulieteri, 2001). In sum, the Arab American experience during this second wave was better than in subsequent years, during the third wave, which generally have been marked by negative perception and attitudes, discriminatory behaviors, lack of social and political inclusion, and increased social distance with other Americans (Bakalian & Bozorgmehr, 2009; Chand et al, 2004; Jamal & Naber, 2008).

Several scholars point out that incidents in the Middle East, during the last decades of the 20th century involving, and creating national crises in, the United States, and accompanying media depictions feeding into Arab stereotypes, culminated into different forms of nativist backlash against Arabs (Abraham, 1994; Bakalian & Bozorgmehr, 2009; Shaheen, 2001; Jamal, 2005; Jamal & Naber, 2008). These incidents included the 1967 and 1973 Arab-Israeli wars, the 1973 oil embargo, the Iranian hostage crisis, the 1983 bombing of a U.S. Marine barracks and the U.S. Embassy in Beirut, the hijacking of TWA flight to Beirut, the first gulf war in 1990, and the 1993 World Trade Center bombing. With each crisis, negative stereotypes were reinforced and nativist hostility increased (Bakalian & Bozorgmehr, 2009).
For example, prejudice against Arabs was supported by several studies. Lipset & Shneider (1977), in analyzing US public opinion, documented a pattern of negative, denigrating, and hostile attitudes toward Arabs. Slade (1981) further observed that defaming Arabs was sanctioned publicly without condemnation. In a study of 43 high school social studies textbooks, Jarrar (1983) found that Arabs were characterized in such negative stereotypes as backward, belligerent, hateful, and malevolent, among other uncouth traits. Jack Shaheen (1984 & 1994) documented negative images about Arabs in television and in comic books, pointing out how they appeared explicitly and implicitly in American popular culture. Also, Shaheen (2001) reviewed Hollywood Arab characters in 900 films during the last decades of the 20th century and found that the vast majority of these films, with a few exceptions, portrayed Arabs as fanatics, belligerent, unintelligent, and lustful of and abusive to women, among other degrading traits. Most of these negative stereotypes appeared when the film industry was reducing such negative images intentionally and giving a favorable image of other ethnic groups. Such measures nurtured the exclusion of Arabs from many mainstream institutions and increased their isolation before 9/11, and created pre-conditions for the collective nativist backlash after 9/11 (Bakalian & Bozorgmehr, 2009; Hing, 2006; Ibish, 2003; Jamal & Naber, 2008).

Research that examined the impact of 9/11 on Arabs in the United States shows that nativism against Arabs was amplified greatly, became more pervasive and institutionalized, and rendered them with a pervasive sense of insecurity and vulnerability (Baker et al., 2009; Bushman & Bonacci, 2004; Canikar, 2004; Ibish, 2003; Jamal & Naber, 2008; Moradi & Hassan, 2004; Naber, 2002; Salaita, 2006; Singh, 2003). There was an increase in negative societal attitudes and prejudice toward Arabs, their culture, language, and religion (Canikar, 2004; Jamal, 2005; Jamal & Naber, 2008; Naber, 2005; Suleiman, 2006). Intrastate migration
and mobility among Arabs decreased to a significant degree; fear forced some Arab immigrants to remain in ethnic enclaves (Kaushal, Kaestner, & Reimer, 2006). Arabs were subject to vandalism, destruction of property, verbal threats and intimidation, public rudeness, insults, refusal of service, and violent assaults that culminated in 11 hate crime murders (Ibish, 2003) and an increase in hate crime statistics in the national origin category from 1,011 in 1999 to 2,507 in 2001 (Singh, 2003).

Some Arabs were subject to intimidation, overt discriminatory practices, and harassment in the workplace (Malos, 2010) that impacted their earnings adversely (Kaushal, Kaestner, & Reimer, 2006). Arab immigrants were singled out, questioned, and searched by immigration and law enforcement officials, and some were detained and deported (Hing, 2006). Some others were identified at airports, carefully screened, and excluded from boarding flights on mere suspicion (Bakalian & Bozorgmehr, 2009). These practices have taken a toll on their mental and physical health as they experienced depression and posttraumatic disorder in significant numbers (Abu-Ras, 2008; Abu-Ras & Abu-Bader, 2009; Chand et al., 2004; Moradi & Hassan, 2004).

Evidence shows, however, that the post-9/11 nativist backlash against Arabs was not uniform in scope or intensity and reflects the complexity and heterogeneity of the Arab population in the United States. The post-9/11 experience among Arabs was shaped differentially by interactive factors such as citizenship status, socioeconomic status, geographical location, religious identity, ethnic and racial identification, and community support (Abu-Ras & Abu-Bader, 2009; Baker et al., 2009). There were interactive mechanisms that either buffered or deflected the nativist backlash for certain Arab individuals and communities. For example, in certain ethnic enclaves and geographical locations, such as New York City, Paterson, Dearborn,
and Los Angeles, where there are high concentrations of Arab Americans, there were fewer violent incidents or hostile confrontations by the public (Bakalian & Bozorgmehr, 2009).

In their book, *Citizenship and Crisis*, based on the landmark Detroit Arab American Study (DAAS), which surveyed more than 1,000 Arab Americans, Baker and colleagues (2009) reveal that the percentage of respondents who reported having a bad experience after the 9/11 attacks in Detroit because of their race or ethnicity was 15%, significantly less than the 25% reported in a national poll (Ibish, 2003; Zogby, 2002). Likewise, the percentage of negative experiences reported by Muslims, at 20%, though higher than those reported by Arab Christians, at 13%, is less than half of those reported nationwide: 42% for Muslims and 26% for Christians (Ibish, 2003; Zogby, 2002). The majority of these discriminatory acts (61%) involved verbal insults or threats. Likewise, the number of DAAS respondents who reported gestures of kindness from non-Arabs after the attacks was slightly more than twice as high (33%) as those who reported discrimination (15%). The study further shows that community support was augmented by public officials, corporate leaders, educators, law enforcement agencies, artists, and other influential figures.

Although post-9/11 nativism adversely impacted Arab communities to a significant degree, it also gave them opportunities for social and political mobilization and means of incorporation (Bakalian & Bozorgmehr, 2009). Arabs quickly took active measures and utilized the civil rights protections and legal avenues to challenge the ideology of nativism and to counteract negative stereotypes and exclusionary practices (Bakalian & Bozorgmehr, 2009). Arab American agencies also established connections and formed coalitions with other ethnic, immigrant advocacy, civil rights, and social service agencies that provided the necessary support, voice, logistics, resources, and funding to conduct regular workshops on civil rights issues,
educational programs, and sensitivity training (Bakalian & Bozorgmehr, 2009). These resources also enabled the establishment of the Arab American Public Museum in Dearborn, the Arab American Center for Civil and Human Rights, and the Khalil Gibran Academy in New York, the first public Arabic language school in the United States (Bakalian & Bozorgmehr, 2009).

**Topics in Elderly Arab Immigration Research**

Research on Arab immigrant elders examines different variables that influence their health and mental health, ability to cope with immigration-related stressors, social support, and experiences with discrimination. A notable aspect affecting Arab elders was the hostile response they endured after the events of September 11, 2001. As pointed out, the sociopolitical situation in the United States exacerbated the targeted suspicion of all Arabs, but it caused unique stress among Arab American elders, especially newcomers (Abu-Ras, 2008; Abu-Ras & Abu-Bader, 2009; Ajrouch, 2005a; Salari, 2002).

**The context of exit: push and pull factors.** The context of exit adds to challenges that elderly immigrants face (Portes & Rumbaut, 2006; Wilmoth & Chen, 2003). These include the adverse circumstances that may have forced the elderly immigrants to leave their countries in the first place. Certain Arab groups—such as Lebanese and Palestinians and more recently Syrians, Iraqis and Egyptians—have been forced to leave their countries of origin because of war, political instability, economic stagnation, religious persecution, and other forms of harassment or marginalization. These events have compelled them to seek entry to the United States as asylees and refugees, or even as visitors who overstay their visitors’ visas. Immigration status, and whether or not an individual is documented, impacts the individual’s adjustment to this transition at an advanced age (Wrobel, Farrag, & Hymes, 2009). Compounding these factors are life events
that specifically impact the elderly, such as immigration of adult children and the desire to reunite with them after retirement for physical, social, emotional, or financial support.

In light of the recent turmoil and violence, particularly in the aftermath of revolutions in Arab countries, some people have left their homeland under duress. The elderly, among whom, may be passive participants in the migration decision-making process. Some elderly live with their children and are dependent on them for support. They may not have much of a choice in joining their children or have a voice in planning for the move. For such passive immigrants, they often experience greater disruption and adaptive difficulties in disengaging from the home country. It is expected that the changing sociopolitical conditions in the Arab world would further create push factors and increased momentum for emigration to the United States.

**The context of reception and settlement.** Immigration and immigrant policies are very important in understanding the experience of immigrants, and reflect how mainstream society views the impact of immigration. They not only determine which immigrants come to the United States, but they also shape their experience of adaptation to the host society. As such, immigration and immigrant policies can have important consequences for immigrant elders’ incorporation patterns, labor market opportunities, physical health, and mental health. Although the Immigration and Nationality Act Amendments of 1965, including the family reunification program, removed many restrictions on immigrants, immigrant and immigration policy is constantly under fire (Hing, 2006). Public concern about the growth in the immigrant population have become widespread, especially during periods of economic stagnation when immigrants are blamed for taking away jobs from natives and abusing social welfare services and benefits. Certain studies, for example, have argued that unskilled and older immigrants are attracted to the United States by the prospect of receiving social welfare benefits, which is funded by citizens’
taxpayer revenues, through the family unification program (Borjas, 1999a, 1999b; Borjas & Hilton, 1996).

A case in point is the enactment of the Personal Responsibility Work Opportunity Reconciliation Act (PRWORA) beginning in August 1996, that banned legally admitted immigrants from receiving federally funded social welfare benefits, including cash assistance, Supplemental Security Income (SSI), food stamps, and Medicaid, for five years (Gorospe, 2006). After the five-year ban is over, immigrants are still under the “deeming period” during which the sponsor’s income becomes available in determining eligibility for benefits. The “deeming period” doesn’t apply when immigrants become US citizens, complete 40 quarters of work requirement, or become a victim of domestic violence (Dordeski & Steffens, 2010). This law also has denied undocumented immigrants access to government benefits and entitlements. Even an undocumented person who has paid into the Social Security system through payroll deductions is not eligible to collect Social Security benefits or obtain Medicare unless an adjustment of immigration status occurs.

For elderly immigrants who have not worked long enough in the United States to qualify for Medicare and lack the financial resources to purchase private insurance, Medicaid is often the only source of health care. Medicaid is a federally funded, state-administered medical benefit for low-income blind, disabled, or aged persons. For elderly immigrants, Medicaid is an extremely important program because it is their greatest source of public funds for long-term medical care and home care. More than one third of elderly immigrants receive Medicaid benefits, a stark reflection of the poverty common among them (U.S. Bureau of the Census 2008).

A critical link to Medicaid coverage for many elderly immigrants is the SSI program. SSI is a federal cash-assistance program used to help economically disadvantaged persons who are
aged, blind or disabled. Under PRWORA, elderly immigrants who entered the country after August 22, 1996, are not eligible for federal cash-assistance programs for five years, including SSI coverage and food stamps, unless they have worked in the United States for more than 40 quarters (10 years) or have obtained citizenship. For elderly immigrants who have not worked long enough to qualify for Social Security benefits, SSI provides a limited source of income. Those who lack access to such benefits are more likely to experience psychosocial difficulties than their counterparts who have access to those benefits (Angel, et al., 2003; Brojas, 2009; Cuellar, Batista, & Braccio, 2004; Gonzalez, Haan, & Hinton, 2001; Lee, 2007; Mui & Kang, 2006).

Responses to PRWORA have varied from state to state. Many states have adopted all provisions of PRWORA, while a number of states have adopted certain variations of PRWORA (Chin, Dean, & Patchan, 2002, Fremstad, & Cox, 2004). New York eventually created an alternative state-funded Medicaid program to cover immigrants for the first five years but has enforced most other aspects of PRWORA pertaining to the ban on food stamps, temporary cash assistance, and SSI (Chin, Dean, & Patchan, 2002).

**Nativism and discrimination.** An important aspect affecting Arab elders, whether US-born or immigrants, is the hostile response they have endured since the events of September 11, 2001. Ajrouch (2005a) reveals that post 9/11, Arab elders, regardless of their immigration status or citizenship, reported experiencing harassment, discrimination, and stereotyping. Arab elders reported experiencing greater ethnic discrimination than younger Arab immigrants. Stereotyped perceptions of Arabs have become the primary means by which most of the people in the United States understand them. The aging experience, compounded by the context of immigration, may have contributed to incidents of discrimination (Salari, 2002). Discrimination based on one’s
ethnicity has been linked increasingly to poor health and mental health outcomes (Jackson, Williams, & Torres, 2003).

**Health and mental health.** In general, immigrants are at risk for developing health and mental health difficulties for several reasons. Prior to their US arrival, some immigrants experience traumatic events in their native countries including extreme poverty, human trafficking, persecution for political or religious beliefs, discrimination, and exposure to war and other crises (Gaines, 1998). Migration involves a significant psychosocial transition, in addition to geographical or physical relocation. When immigrants leave their home countries, they leave all the social ties, bonds, and networks in which they were deeply embedded (Bhugra & Becker, 2005; Bhugra, Wojcik, & Gupta, 2011). They also tend to leave distinct cultural norms, practices, rituals, and climate and geography (Markovitzky & Mosek, 2005). In the meantime, they often encounter many changes in various aspects of the social, economic, political, cultural, and family spheres, and often have to battle societal or individual prejudices and stereotyping (Moussaoui & Agoub, 2011; Nagroo & Iley, 2011; Tran et al., 2000; Yeh, 2003; Ying, 2001). In coping with adverse circumstances, tangible and intangible losses, and adapting to the new challenges, immigrants may experience high levels of internal and external conflict, grief, tension, and stress. As a result, immigration has been linked to increased levels of health problems, psychological distress, anxiety disorders, post-traumatic stress disorder, depression, somatic complaints, and a high risk for suicide (Bhugra, 2004; Bhugra & Becker, 2005; Bhugra, Wojcik, & Gupta, 2011; Black, Markides, & Miller, 1998; Kposowa, McElvain, & Breault, 2008; Pumariega, Roth, & Pumariega, 2005; Ruiz, Maggi, & Yusim, 2011; Tran et al., 2000; Yeh, 2003; Ying, 2001).
Immigration can be a particularly stressful life event for the elderly, as it brings about new financial, psychosocial, and health-related stressors (Shah, 2011). Newly arrived elderly immigrants can become dependent on their families because of their ineligibility for social welfare and health care benefits (Mui & Kang, 2006). They may not have sufficient savings for insurance coverage from their previous employment from their countries of origin. They may lack access to preventive care services such as immunizations, dental care, and cancer screening (Bowen & Nelson, 2002). Access and utilization of health-care services also may be challenging. New immigrants find it difficult to understand the complex US health care delivery system and bureaucratic procedures. In addition to financial issues, language and culture may hinder health care utilization (Gorospe, 2006).

Research on elderly immigrants from different ethnic groups reveals that they experience heightened loss of control and anxiety due to the common stressors of adapting to a new cultural context; adjusting to a new living arrangement; language inadequacy; lack of social and financial resources; frustration associated with unemployment and low income; and a sense of lack of belonging, isolation, alienation and disorientation (Acharya & Northcott, 2007; Angel et al., 1999; Angel et al., 2003; Black & Markides, & Miller, 1998; Casado & Lueng, 2001; Casado, Hong, & Harrington, 2010; Emami et al., 2000; Shah, 2011). All these factors contribute to health and mental health problems and have a detrimental impact on their physical and psychological well-being and social functioning (Emami & Ekman, 1998; Gonzalez, Haan, & Hinton, 2001; Lee, 2007; Silveira et al., 2002; Torres, 2006).

For example, research among elderly Iranian immigrants to Sweden shows that late-in-life migration among this group is associated with increased levels of psychosocial distress due to the experience of cultural adaptation, which often involves major social, familial, and lifestyle
changes (Emami & Ekman, 1998; Emami et al., 2000). One reason was the elders’ discovery that their adult children and grandchildren are much more assimilated into the host society than they expected. Since both their families and the host society were foreign to them, their lives were characterized by a constant “cultural shock” (Torres, 2006).

Emami and colleagues (2000) maintain that elders who move from traditional Middle Eastern societies confront problems of inactivity and social isolation. The way of life in highly industrialized countries is foreign to them. These elders experience what Torres (2006) calls “culture shock inspired role reversal.” This role reversal occurs because of the inability to adapt to new sociocultural surroundings and may be harder to accept than role reversal prompted by age-related physical disabilities. It is for this reason that Torres (2006) differentiates between these two types of role reversal and makes a connection between role reversal and late-in-life migration. Often elders’ social networks and affiliations are too weak and tangential to meet their needs, which is why feelings of isolation, loneliness, and depression are common.

Similarly, Mui and Kang (2006) found that depression occurs frequently in elderly Asian immigrants to the United States because they have limited resources in dealing with the multiple losses associated with the process of adaptation, acculturation, and family disruption. For example, prevalence rates of depressive symptoms based on assessment with the geriatric depression scale among community dwelling elders ranged from 12% to 50%, indicating high rates of possible depression (Mui & Kang, 2006). Despite substantial prevalence rates, symptoms of depression often are underrecognized, underdiagnosed, and undertreated because of barriers related to health care and problems in the organization, financing, and delivery of mental health services for older adults (Mui & Kang, 2006).
Immigration health research also confirms that being US-born is associated with better self-rated health than their immigrant counterparts (Cho, Frisbie, Hummber & Rogers, 2004). Angel, Angel, and Markides (2000) found that newly immigrated elderly Mexicans have poorer health status compared to their Mexican counterparts. Yoo (2001) compared the experiences of Korean elderly immigrants with their younger immigrant and US-born elderly counterparts. He found that elderly immigrants were less likely to have language proficiency, social and political connections, social status, and economic needs necessary to protect themselves when they face incidents of discrimination. He concluded that elderly Koreans who immigrate to the United States at an advanced age are more prone to have health and mental health problems compared to their American-born counterparts, younger immigrants, and in some instances immigrant elders who has been in the United States for a long period and had acquired citizenship. In the same vein, researchers studying the experience of elderly ethnic immigrants in Sweden found that they are at considerable risk of health complications (Emami & Ekman, 1998; Silveira, et al., 2002), particularly cardiovascular disease (CVD) risk factors such as hypertension and smoking due to the stress of acculturation (Koocheck et al., 2008).

Ajrouch (2007a) found that elderly Arab immigrants are no exception, as she notes that US-born Arab Americans generally are in better health than are their immigrant counterparts who are not citizens, regardless of how long they have lived in the United States. Aging Arab immigrants cope with decreasing independence in addition to material, financial, physical, emotional, and role losses often related to advanced age. They are challenged by losing their place of birth, cultural norms, values, and language while adjusting to different living arrangements and an inhospitable environment.
Wrobel, Farrag, and Hymes (2009) further examined the relationship between acculturative stress and depressive symptoms and how it varied according to immigration status, English skills, education level, age, gender, country of origin, and years since immigration to the United States among a sample of 200 elderly Arab immigrants from eight countries that ranged in age from 60 to 92 years. Results showed that elderly Arab immigrants who experience a greater degree of acculturative stress and depression are involuntary immigrants, those with a refugee or temporary resident status. A younger age at the time of immigration also predicted higher levels of acculturation and greater life satisfaction in elderly Arab immigrants, as more recent immigrants showed a greater degree of stress.

In addition to the immigration status and length of stay in the United States, the level of adjustment for these elderly individuals seemed to be impacted by the country of origin. For example, Iraqi refugees reported more difficulty than any other ethnic group, as they felt higher levels of pressure to acculturate and learn the dominant language of the host country. Given the experience of significant loss and trauma in their country in addition to the alienation they experience upon immigration to the United States, Iraqis often feel a sense of urgency to assimilate. Results also showed that a greater level of education and English skills predicted lower levels of stress and served as protective factors against depression among the sample participants. Results related to the impact of gender on acculturative stress were not conclusive, as females and males did not differ significantly on any of the measures of acculturative stress.

**Social and family support.** Social isolation and loneliness are a significant concern among all elderly immigrants in the United States (Gonzales, Haan, & Hinton, 2001). Some research shows that family and social support can be significant factors in helping immigrant elders cope with the difficulties of acculturation and lack of access to formal government support.
such as public assistance, welfare benefits and health care (Gonzales, Haan, & Hinton, 2001). Lee (2007) examined the impact of social and family support on the well-being of Korean elderly immigrants. He found that among those who received greater social and family support had lower levels of anxiety and better general health status. Similarly, the family remains the main source of instrumental, emotional support for older Mexican immigrants. Mexican elderly immigrants reported greater life satisfaction and less anxiety when they received family support (Gonzales, Han & Hinton, 2001).

Mui (2001) found that family support is one of the major factors determining the overall quality of life for elderly Chinese immigrants. Perceived dissatisfaction with the quality of help from family members and living alone were associated with higher depression scores. The size of the family network of the Chinese elders did not correlate with the levels of their depressive symptoms, but the perceived satisfaction with family help did. The perceived satisfaction with family help was a significant variable in explaining depressive symptoms. Mui (2001) found that Chinese elders may have high expectations of family help, but the families of these Chinese elders may not feel the same due to differences in acculturation.

Immigrant and US-born Arab American elders were compared regarding aspects of social support. For example, Ajrouch (2005a) examined social network characteristics and compared social integration and relationship quality between the two groups. Findings revealed that immigrants report smaller, denser networks and generally are socially integrated much less into the larger US society. The quality of social relationships was evaluated and results demonstrated that immigrants were less likely to report that their relationships with their children and friends were good, and they are more likely to confide in their spouses.
In 2008, Ajrouch studied 101 Arab Americans over the age of 55 living in the metropolitan Detroit area. She used standardized measures of social isolation, loneliness, acculturation, and support from an adult child. Compared to US-born Arab Americans, immigrants reported smaller social networks, more frequent feelings of loneliness, less acculturation, and lower overall ratings regarding their relationship with the adult child on whom they rely the most.

In an earlier study, Ajrouch (2005b) examined attitudes and beliefs about social support among Arab immigrant elders in the United States. Through a community-based study of Arab American elders, three factors were explored: nursing home placements, the expectations of children to give care, and state-sponsored support. However, the research did not specify at what age these immigrants came to the United States, which is a significant factor in explaining where these beliefs were shaped. Accumulating evidence indicates that intergenerational family relations among today’s Arab Americans is marked by conflict stemming from traditional notions of familial support with the American context and changing economic conditions. As Lee (2007) illustrated for Asian elders and their family caregivers, gradual socialization produced the most desirable adaptations to elder care. This finding is relevant for Arab Americans, a relatively recent immigrant group, for they are just beginning to experience the care demands associated with their parents reaching the age at which many become dependent.

Ajrouch (2005b) points out that many of the oldest generation left their homelands before having to experience these responsibilities for their own parents; therefore, their norms of elder care have been forged more on the basis of ideals than on learned experience. Moreover, each person’s views are challenged by a partial understanding of the diversity of potential care arrangements in both their native and their adopted countries, in addition to the change in
normative views about acceptable and pragmatic arrangements in the contemporary American society. The findings of this study support earlier studies of social relations and aging among other immigrant groups (Antonucci, 2001; Gonzales, Han, & Hinton, 2001).

**Religious affiliation and spirituality.** Religion and spirituality has been linked to physical health and emotional and psychological well-being among older adults. Lee (2007) obtained a convenience sample of 177 Korean elderly immigrants at adult day health care centers in California to examine the relationship of religiosity and spirituality to general well-being among Korean elderly immigrants. The mean age of the respondents was 76 years old with a range from 65 to 91 years. Results showed that Korean elderly immigrants reporting higher levels of positive well-being were more likely to use more religious or spiritual coping skills and receive greater religious support. Similarly, Angel and colleagues (2000) confirmed that there was a strong positive correlation between strong religious beliefs and well-being among Mexican elderly immigrants.

Arabs—whether of Christian or Muslim faith—view religion as a source of comfort and support. The diversity of religious affiliation among Arab Americans often is obscured by the belief that all immigrants from Arab-speaking countries are Muslim. While the most recent immigrants from Arab-speaking countries tend to be Muslim, the majority of Arab Americans are actually Christian (Samhan, 2001). A major empirical question involves whether Muslim and Christian Arab Americans differ with regard to well-being. The small number of studies that compare Muslims and Christians find little difference in those experiences (Faragallah et al., 1997; Read, 2003). Muslims may differ with regard to well-being, however, not only because their religion differs from that of the dominant culture, but given the anti-Muslim sentiment that exists in the United States post 9/11, it may be that Muslims report lower well-being than their
Christian counterparts. On the other hand, Christians may report lower well-being than their Muslim counterparts due to prevalent anti-Christian sentiments that exist in Arab countries and which lead to discriminatory practices and, in extreme cases, violence and persecution.

Ajrouch (2007b) addressed the diversity of the aging experience by examining the associations among immigrant status and religious affiliation. Data were drawn from a face-to-face survey of 101 Arab American men and women aged 56 years and over living in the metropolitan Detroit area. Correlations demonstrated that mere religious affiliation to Christianity or Islam was not associated with well-being. US-born Arab Americans reported less frequent feelings of depression and greater life satisfaction than did immigrants, but this variation appears to be accounted for by the level of education, level of social integration, and socioeconomic status. However, the degree of religiosity, as exemplified in attending weekly church services or mosque prayers, has been linked to better coping skills and well-being among elderly Arabs. (Faragallah et al., 1997).

**Racial identity or phenotype.** Racial identity is one of the primary means by which immigrants assimilate to the United States (Salari, 2002). Ajrouch & Jamal (2007) examined how the ethnic characteristics of immigrant status, national origin, religious affiliation, and Arab American-ness contribute to the announcement of a white racial identity using a regionally representative sample of Arab Americans. Results indicate that those who were Lebanese/Syrian or Christian, and those who felt that the term “Arab American” did not describe them, were more likely to identify as white. In addition, among those who affirmed that the pan-ethnic term “Arab American” did describe them illustrated that strongly held feelings about being Arab American and associated actions were also linked with a higher likelihood of identifying as white. Such findings suggest different patterns of assimilation among Arab Americans. Some segments of
Arab Americans appear to report both strong ethnic and white identities, while others report a strong white identity, yet distance themselves from the pan-ethnic “Arab American” label.

**Gender.** There is a varied and complex relationship among immigrants between gender, acculturation, and acculturative stress, due to variation in gender roles and division of labor across cultures and subcultures (Foner, 1986; Pessar & Mahler, 2003; Sinke, 2006). Research shows, however, that men and women generally experience and are impacted differently by immigration (Chandra, 2011; Honadagneu-Sotelo, 1992; Sinke, 2006). Women may be more vulnerable than men due to their dependence on their husbands and having less power in the migration decision-making process (Cervantes, 1994; Pessar, 1999). Some women also migrate to the United States with their families as involuntary immigrants and are forced to disengage from their families, social networks, and familiar living arrangements (Chandra, 2011; Pessar, 1999; Portes and Rumbaut, 2006; Sinke, 2006). Women, particularly from traditional or patriarchal cultures, may experience greater cultural differences due to prescribed gender roles that offer less equality and fewer opportunities than for men (Espiritu, 1997). Thus, women have been reported by a number of researchers to have greater difficulty in adapting to the new culture than do men, with either fewer opportunities to acculturate when remaining in the home or due to the demand of employment coupled with a traditional division of labor resulting in a heavy workload overall (Chandra, 2011; Espiritu, 1997; Hondagneu-Sotelo, 1992, 2001). The change from a domestic work role to both domestic and productive work roles, and the expectation to perform both responsibilities at the same time, can increase the level of distress women experience in their new lives in the host society (Chandra, 2011; Grasmuk & Pessar, 1991; Honadagneu-Sotelo, 1992; Sinke, 2006).
Notwithstanding the stresses of combining and balancing both productive work and domestic work roles (and at times child care), women also may have substantial gains in moving to the United States. In her book, *In a New Land*, Nancy Foner (2005) delineates the opportunities that Jamaican women garnered in moving to New York. For example, it provided the majority of these women with employment and economic opportunities that they lacked in their native Jamaica and which equipped them with financial independence, a stronger voice to complain about their spouses, more input in decision-making, and more control in how to utilize household resources. Foner (2005) additionally points out another advantage for Jamaican women created by mainstream American norms that support the increased participation of men in household affairs and family activities. Such values encouraged women to ask their spouses for help and to seek their comfort and companionship, which further impacted their relationship and power dynamics in the home environment. Men, in return, conformed to such expectations and increasingly helped their wives with domestic functions such as handling household chores, performing child-rearing tasks, spending more quality time with their children, and adjusting their working schedules to alternate their shifts with their wives to supervise the children.

A number of researchers observed that male immigrants are in comparatively better mental health than are their female counterparts (Ghaffarian, 1998). Asian female immigrants, for example, reported more psychological symptoms than men (Takeuchi et al., 2007). Similarly Latina immigrants were found to be more susceptible to stress and depression than were their male counterparts (Golding & Burman, 1990). However, other researchers have argued that men and women may experience different types of stress due to their different gender roles. Female immigrants’ depression is associated with separation from original social ties while male immigrants’ depression is more associated with marginalization (Hiott et al., 2006).
Arab immigrant women may be particularly at risk for mental health and health problems since they are pressured to shift and take on additional work roles, manage Western cultural values and the impact on their children, and cope with their own discomforts and struggles (Amer, 2005). Arab women of the Muslim faith appear to be targeted for discriminatory acts (Hassouneh & Kulwicki, 2007) and may be somewhat more identifiable as a target than are Muslim men due to distinctions in dress, such as the wearing of a hijab. However, Wrobel, Farrag, & Humes (2009) noted that elderly Arab women did not differ significantly on any of the measures of acculturative stress when compared to their male counterparts in the study sample. These finding are attributed by the investigators to comparable levels of opportunities, roles, and duties that both elderly men and women have after being out of the work force.

**Coping mechanisms and strategies.** Immigrants utilize different conscious and unconscious, adaptive or constructive, and maladaptive or detrimental, actions and strategies to cope with immigration-related challenges and difficulties (Yakushko, 2010). Such actions and strategies are influenced also by coping resources available to them. Coping resources are preexisting assets that can help individuals to combat or reduce stressors (Pearlin, 1999). Some of the adaptive coping strategies and resources that contribute to resilience among immigrants include self-efficacy, language proficiency, education, socioeconomic status, family networks, social capital, ethnic and community support networks, religious and spiritual practices, among others (Pearlin, 1999; Yakushko, 2010). For example, self-efficacy—which assigns cause to outcomes such as success and failure to either personal attributes such as ability and effort or to external causes such as fate—can be a key mediator between social positions and stress (Aneshensel, 1992). A belief in personal control could alleviate the negative psychological
impact of failure by encouraging and fostering active problem-solving skills (Aneshensel, 1992; Pearlin, 1999).

The concept of transnationalism has been utilized to explain the experience of adjustment among immigrants in the host country (Kivisto, 2001; Portes et al., 1999). It refers to the different forms of immigrants’ activities and interactions that transcend national boundaries and connect home countries and host societies. It can range in scope from buying ethnic food, watching ethnic television, residing in an ethnic enclave, and participating in ethnic or religious organizations to sending remittances, participating in ethnic politics, and managing businesses in the home country. The ethnic ties and cultural practices embedded in the transnational experience can solidify a positive sense of ethnic identity, provide social support, mediate perceptions of inequality and discrimination, and thus serve as a coping resource and protective factor that buffer the stresses of immigration (Mossakowski, 2003; Murphy & Mahalingam, 2004; Smith, 2006). For example, engaging in transnational activities within ethnic enclaves was found to provide a sense of continuity with supportive familiar networks and practices, economic opportunities, and acceptance among Latin and Asian immigrants (Vega & Rumbaut, 1991).

Detrimental or maladaptive mechanisms of coping among immigrants, on the other hand, have been identified as using substances, utilizing violence, getting involved in illegal or risky activities, gambling, becoming isolated, excluding others based on ethno-racial terms, developing fanatic or fundamentalist religious views, or losing one’s cultural identity (Yakushko, 2010). Although residing in ethnic enclaves can be a great protective factor that buffers the stresses of immigration, it can also foster social isolation and dependence among immigrants, limit their social resources and support to co-ethnics, curtail their exposure to and assimilation into the mainstream, and minimize their chances for upward social mobility (Portes et al., 1999).
Conclusion and Implications for Further Research

Immigration in late adulthood is associated with numerous challenges. Among the potential strains that migration can bring about are: leaving behind the socio-cultural contexts to which one is accustomed, culture shock and the feeling of bewilderment, high psychological distress, acculturative demands, communicative challenges, language incongruence, economic downward mobility, different roles and living arrangements, and dependence on others.

Late-in-life immigration cuts off the individual’s ties to familiar social networks, roles, practices, instrumental relationships, and establishments that supported and nurtured the older person throughout his or her life. Compared to younger immigrants, older immigrants have less time to rebuild their social networks and relationships, and their networks may remain forever curtailed (Angel, Angel & Markedes, 2000). Inability to speak the language and lack of knowledge about how the new society functions could impede late-in-life immigrants from feeling that they are valuable members of the society that hosts them and can further marginalize them (Emami et al., 2000). Late-in-life immigration thus has been associated with isolation, psychological stress, and potential health complications, as it is often understood to be one of life’s greatest disruptions (Emami et al., 2000; Lee, 2007; Mui & Kang, 2006; Silveira, 2002; Torres, 2006; Yoo, 2001).

When faced with the absence of public assistance and community support in the United States, some elderly may simply return to their home countries (Wilmoth & Chen, 2003). Others who stay in the United States and do not have the opportunity to accumulate enough resources to support themselves in late adulthood must rely on their families who have to bear the financial responsibility. For elderly immigrants, many of whom are disadvantaged economically, family supports are the only recourse (Wilmoth & Chen, 2003). The responsibility for an older person
can place great emotional and financial strain on family members, especially when the older person becomes ill and incapacitated. The drain on family resources can have negative consequences for the entire family's welfare and social mobility.

Evidence suggests that elderly Arab immigrants are an exceptionally vulnerable group because they are at high risk of discrimination and more susceptible to health and mental health problems compared to their native counterparts and younger Arab immigrants (Ajrouch, 2005a, 2005b, 2006, 2007a, 2007b, 2008; Ajrouch & Jamal, 2007; Salari, 2002; Wrobel, Farrag, & Hymes, 2009). However, literature on the experiences and needs of the elderly Arab immigrants scarcely exists. Little scholarly material explores their particular experiences and needs, and little exists to address their needs.

A thorough review of the literature rendered a few studies that explore the general experiences and needs of elderly from an Arab background. They have been mostly conducted by a few scholars located in Michigan (Ajrouch, 2005a, 2005b, 2007a, 2007b, 2008; Ajrouch & Jamal, 2007; Salari, 2002; Wrobel, Farrag, & Hymes, 2009). Although these studies have shed light to understand some of the unique experiences of elderly Arab immigrants, they are limited in scope and in their capacity to highlight and address their needs. They do not often distinguish elderly immigrants who arrive at an advanced age from those who have immigrated at a younger age and grown older in the United States. Similarly, they do not often delineate the different experiences and needs of the two groups; rather, they cluster both into one category. Ajrouch (2005, 2007) points out that nothing is known of interventions or services for elderly Arab immigrants. These data provide an opportunity to begin thinking about how best to address this gap in knowledge to serve elderly Arab immigrants and their families.
The paucity of scholarship related to the experiences and needs of elderly Arab immigrants must be addressed. Elderly Arab immigrants, as a distinct group, must receive attention in research. It is important to recognize that the experiences and needs of this group are different from any other. Immigration to the United States at an advanced age inadvertently creates unique psychosocial challenges. Addressing these challenges must first begin with narrowing down and identifying this population as the focus of research. Ample research is then necessary to build knowledge about this population. Given the heterogeneity and complexity of elderly Arab population and immigrant experience in the United States, inductive research that explores and discovers their unique and nuanced circumstances is warranted.

Further research is necessary to explore the magnitude and impact of discrimination on elderly Arab immigrants. A major empirical question involves exploring the immigration context, the major shift in their lifestyles and roles, and their coping mechanisms and adaptive strategies. This also requires examining the role of informal systems in providing support and exploring the hindrances they encounter in accessing formal support. Another question is how interactive variables such as religious affiliation, immigration context and status, socioeconomic status, family support, community support, and access to social welfare services have impacted their experience, and how they may have created opportunities for incorporation. Another related question is how these “risk and protective factors” have shaped their responses to the post-9/11 backlash and have impinged on their health, mental health, and coping strategies (i.e., taking active measures to integrate, maintaining transnational practices, embracing ethno-religious identity or remaining in ethnic enclaves).

Available services to the Arab elderly immigrants are grossly disproportionate to the population in need of service. Therefore, interventions must be tailored to address their needs.
Outcome evaluations must be performed to measure the effectiveness of such interventions.

Evidence supporting the effectiveness of interventions would lay a foundation for policymakers and funding sources to increase the availability of services to this vulnerable population.
CHAPTER IV: RESEARCH DESIGN AND METHODOLOGY

Purpose of Study

The purpose of this research was to explore the immigration experience among elderly Arabs. Despite differences of ethnicity, religion, and national origin, Arabs share a common language, culture, and values. This study focused on one representative group of Arab immigrants: elderly Egyptian immigrants who come to the United States after the age of 60. Egyptian immigrants constitute the second largest immigrant group from Arab countries, after Lebanon, and are the fastest growing immigrant group (Census, 2010). The Egyptian population is ethnically and religiously heterogeneous (roughly 90% Muslims and 10% Coptic Christians) with proportionately more Coptic Christians than Muslims in the United States.

Very little is known about the immigration experience of elderly Arab immigrants. Available research examines certain variables that influence their health, well-being, views of social support, social isolation, racial and ethnic identification, how they cope with illness, and their experience with discrimination (Ajrouch, 2005a, 2005b 2006, 2007a, 2007b, 2008; Ajrouch & Jamal, 2007; Solari, 2002; Wrobel, Farrag, & Hymes, 2009). This study seeks to explore the meaning, structure, and essence of the lived immigration experience for this group using a phenomenological theoretical framework. This includes the reasons for leaving Egypt, the nature of the transition to the United States, challenges and opportunities they encounter, and factors that help or hinder adaptation to their new home. The findings can be used to inform potential social work interventions, guide the development of appropriate programs, services, public policies, as well as opportunities for personal growth.
The primary research questions guiding this study were:

1. What are the push and pull factors that cause elderly Egyptians to immigrate to the United States after turning 60 years of age?

2. What are the risk factors for stress and distress induced by this transition—including challenges, losses, difficulties, limitations, and deficits—and how do they impact their mental and physical health, impede their adaptive capacities, and hinder their adjustment efforts?

3. What are the protective factors and processes that buffer the impact of this transition—including rewards, benefits, opportunities, and resources existing within the social and family structure as well as personal resources and strengths, coping skills, mechanisms, and strategies—and how do they counterbalance risk factors for mental and physical health distress, enhance their adaptive capacities, and facilitate their adjustment efforts?

**Rationale**

The paucity of research about the immigration experience of elderly Arabs demands an inductive discovery-driven design. None of the existing few studies explore and describe the essence of this experience, as they are mostly quantitative studies on the topic. It is not necessary to confirm that challenges or opportunities exist for elderly Arab immigrants. Rather, the study presupposes that challenges and opportunities are an inherent part of the transition associated with the immigration experience. It is, however, essential to uncover, identify, and understand the nature and context of such challenges and opportunities, how they impact the elderly, and what tools they utilize to cope with this transition so that future quantitative work can be grounded in a more developed body of knowledge.
Qualitative research is best suited for this type of inquiry as it informs and supports my ontological choice. Qualitative methods seek to discover and assemble the complex details of social situations into a coherent narrative, and to explore and describe information about a phenomenon (Patton, 2002). It is well-suited to explore the context in which a phenomenon occurs, the meaning that people attach to a phenomenon, and how they construct their reality (Bogdan & Biklen, 1983). Qualitative design also permits an in-depth inquiry with careful attention to detail, context, and nuance of the immigration experience, its challenges and opportunities, and how the study participants cope with or utilize them. It offers the flexibility necessary to ask open-ended questions about the context of immigration and opens the door to do the detective work needed to understand the complexity and dynamism of elderly Egyptians. It places the fewest restrictions in discovering the process and understanding the impact of this experience (Mintzberg, 1983). Equally important, this flexibility will allow the respondents to explore their immigration experience without feeling constrained, and may in turn offer the opportunity to take creative leaps regarding understanding the phenomenon under study (Mintzberg, 1983).

Discovering the context of immigration among elderly Egyptians, the transitional difficulties and opportunities they encounter, their emotional reactions, and the meanings they attribute to these events is best achieved through inquiry that allows their experience to be explored in great proximity, depth, and detail. The epistemological stance of qualitative research provides the necessary proximity, flexibility, rapport building, and dialogue (Patton, 2002). It allows a relationship to take place and enhances the possibility for the development of needed trust and rapport. The objectivity, detachment and distance of a positivist approach would limit my openness to and understanding of such lived experience (Patton, 2002). Qualitative
epistemology connecting the investigator and the “participants” (Guba & Lincoln, 1994), and views this connection as a precursor to the formation of knowledge. Both the researcher and participants are viewed as experts in their own rights, and equally impact how knowledge is formulated (Patton, 2002).

This trust and data created in such a transactional relationship promotes discovery-driven inquiry that allows me to understand the experience of elderly Egyptian immigrants through their own eyes (Guba and Lincoln, 1994). The study participants are invited to describe how, when, where, and why they immigrated to the United States and the impact of the experience on them. Equally important, the interview setting allows me to observe their reactions (i.e., fear, confusion, sadness, excitement, or happiness, among others), to seek clarifications, to construct patterns, and to develop ongoing insights as the conversation progresses (Patton, 2002).

The transactional relationship between myself, the inquirer, and elderly Egyptians is important to maximize the richness of data collected and discovery (Guba & Lincoln, 1994; Geertz, 1983). Generally, immigration is a sensitive topic for the elderly since it can trigger feelings of loss and dependence (Casado & Leung, 2001). The closeness, empathy, and dynamism, characteristic of a qualitative research setting, is more likely to connote respect, equality, and acceptance, and may lead to a more productive interview (Briggs, 1986; Geertz, 1983). In contrast, asking elderly immigrants to volunteer information in a rigid manner, by filling out paperwork without developing rapport, can be an obstacle to gathering information. This is especially true when studying an ethnic or cultural group such as elderly Egyptians who may be apprehensive of “authority figures” and view distant and impersonal relationships as lacking respect (Briggs, 1986).
Theoretical Framework

This inquiry uses phenomenological analysis to explore, bracket, compare and identify the nature, context, structure, common essences and core meanings of the lived and shared immigration experience among participants (Bogdan & Biklen, 1983) as experienced through their senses (Patton, 2002). Studying the push and pull factors for immigration, challenges, stressors, opportunities, and coping mechanisms embedded in the immigration experience among elderly Egyptians is approached best as a phenomenon.

This inquiry also uses reflexive methodology (Buckner, 2005) to attend to the voice of elderly immigrants and give them authority to describe their subjective experiences. Reflexive methodology stresses subjectivity, agency, and representations of immigrants, and examines how they derive meaning in a contextually specific way without attributing fixed pre-given meanings. It provides me with the opportunity to challenge negative frames of reference and attributions that are made about elderly Egyptian immigrants. It also provides me with the methodological latitude to reflect on how my own lived immigration experience and limited positionality (as both an insider and outsider) influences the questions I ask, my response to participants, and interpretation of findings.

Methods

Collective Case Study

This research was conducted as a collective case study. A collective case study examines several cases not for their inherent value but because they aim to explore, facilitate the understanding of, and provide insight into, a particular phenomenon of interest among several people who experience it (Stake, 1994). This collective case study examined the relationship among participants who were not part of a naturally reoccurring group but who had a shared
cultural background and immigration experience (Stake, 1994). It was the shared immigration experience among elderly Egyptian immigrants in New York State that constituted a bounded system in this study (Baxter & Jack, 2008; Stake, 1994). A collective case study was best able to capture the characteristics of the lived experience of immigration as it assembled the complex patterns, common essences, and shared meanings among the study participants.

This collective case study examined a number of characteristics or dimensions of the immigration phenomenon among elderly Egyptians (Baxter & Jack, 2008). The first focus was on context and included the reasons the participants left Egypt and the strengths and weaknesses they brought with them to the United States (Lofland & Lofland, 1984). How did these contextual factors shape their overall immigration experience and influence their emotional and material adaptation to life in the United States?

Second, the study explored the experience of immigration from the port of entry through the transition period to post immigration (Lofland & Lofland, 1984). What risk factors induced by this transition contributed to their stress and distress and what risk factors impeded their adjustment efforts? What patterns of changes, challenges, and difficulties emerged from this immigration experience; for example, were the elderly immigrants’ roles, relationships, daily routine, and behaviors impacted as a result of being in a different social and environmental context, and if so, in what ways? What was the nature of their family experience and how was the family system affected by their arrival? What were the strains, stresses, and sources of contention? Did they experience differences in opinion and clashes in cultural values or changes in living arrangements?

Third, the study explored the protective factors and processes that buffered the impact of this transition, tempered risk factors, enhanced their adaptive capacities, and facilitated their
adjustment efforts. In other words, how did Egyptian elders perceive the stressors and opportunities they encountered as immigrants in late adulthood in a new land? How did they cope with challenges, resolve or accommodate difficulties and/or utilize any opportunities that emerged? What were their adjustment strategies, coping mechanisms, abilities, and strengths? How did the availability or lack of resources facilitate or impede their adjustment? How did they view their mental health, physical health, and overall well-being?

**Sampling Plan**

This inquiry seeks to establish internal validity rather than external validity, as it is more focused on discovery rather than on verification or generalizability. Thus, the rich description, details, depth, and credibility of data collected from a small, selective sample of interviews are more important for this study than quantity. The ability to make decisions about what data and from whom are essential underpinnings of any sampling strategy. As I embarked on discovering the subjective, lived experience of elderly Egyptian immigrants, it was essential to assess and select individuals who specifically have had that experience and could speak with insight about the phenomenon being investigated. It was important to be in close proximity with those who have experienced the phenomenon to establish rapport and trust, excavate tacit knowledge, and develop a robust narrative. Thus, this inquiry of discovery necessitated the flexibility and usefulness that non-probability sampling offered as it sought to gather a rich description of the phenomenon under study.

The choice of sampling strategies was influenced by the study’s purpose, feasibility, and resources (Patton, 2002). For the purpose of this study, a combination of criterion and snowball sampling were used. Criterion sampling specifies some predetermined inclusion criteria of importance that serve the purpose of the inquiry, and that all (30) participants who were involved
in the study met (Patton, 2002). As such, all (30) participants who were interviewed had been at least 60 years of age or older, and had immigrated to the United States from Egypt after they had turned 60 years old. At the time of the interview, all participants must have lived in the United States for at least 2 years. This time frame ensured that they have lived in the United States long enough to be able to thoroughly speak to all aspects and dimensions of the lived immigration experience. All participants were residents of New York State and were affected equally by weather conditions, social welfare laws, aging services, residential amenities, and transportation systems.

As mentioned, this study focused on the experience of elderly Egyptian immigrants as one representative group of Arabs. The Arab Republic of Egypt represents one of the 22 nations that make up the “Arab world.” Egyptian immigrants constitute the second largest immigrant group from Arab countries, after Lebanon, and are the fastest growing immigrant group (Census, 2010). Therefore, another important inclusion criterion was that all participants must also speak Arabic as their primary language and identify nationally as Egyptian.

The sample was selected with an equal representation from both the Coptic and Muslim communities. A total of (15) Copts and a total of (15) Muslims were interviewed for the study. The Egyptian population is heterogeneous in terms of ethnicity and religion: roughly 90% Muslims and 10% Coptic Christians. The number of Coptic immigrants, however, as is the case for other minority Christian groups from Arab countries, surpasses their Muslim counterparts in the United States. Therefore, both groups were given equal representation in this study so that their experiences could be compared. Such a comparison provides an understanding of how religious affiliation and ethno-racial identification shapes the immigration experience among elderly Arabs in the United States. This criterion ensures that participants are socialized to
Egyptian cultural norms and values, are representative of the two ethno-religious communities that make up the Egyptian society and Egyptian American immigrant communities, and can speak to the immigration experience as one representative group of elderly Arabs.

It is worthy to note the differential treatment of Copts and Muslims both in Egypt and the United States. In Egypt, Copts generally have endured a hostile atmosphere, faced severe exclusionary and discriminatory treatment, and suffered from flare-ups of persecutory violence for their religious beliefs (Simon, 2013; U.S. Commission on Security, 2012; Wallace, 2013; Zaki, 2010). Numerous researchers and organizations estimate that more than 100,000 Copts left Egypt since 2011, after the Egyptian revolution, to seek refuge or asylum abroad, with the lion’s share immigrating to North America and the United States (El-Faizy, 2013; Stolarik, 2013; Wallace, 2013). In the United States, Copts historically have found refuge from religious persecution, achieved a high degree of assimilation, and generally thrived as a community. Nonetheless, to some extent they have been subjected to anti-immigrant sentiments and negative stereotypes for being immigrants from Egypt with distinct language, customs, skin color, and foreign nationality (Baker, et al., 2009). Muslims, in contrast, do not face religious intolerance or discriminatory measures in Egypt. However, in the United States, in the aftermath of the terrorist attacks on the World Trade Center on 9/11, Muslims generally have been subjected to anti-immigrant sentiments, negative stereotypes, hostile attitudes, and discriminatory measures, even more than their Coptic counterparts (Baker, et al., 2009).

Hence, this unique point of comparison is useful on different levels. First, it is analogous of the heterogeneity of ethnicity and religion among Arabs in general. Second, it would reveal similarities and differences among the two subgroups in relationship to their different home and immigration experiences and their reasons for immigration from Egypt, their transition
experience, and coping mechanisms. Third, it provides an understanding of how religious affiliation or ethno-racial identification shapes the immigration experience among both subgroups, as it provides insight into how it impacts their respective perception of discrimination in the United States as well as their self-esteem, self-image, sense of belonging, and overall well-being, among other aspects that may arise organically.

Snowball sampling was organized around cases that people identified and introduced to the researcher. It was an approach for locating information-rich key informants or critical cases (Patton, 2002). This study used snowball sampling by asking participants to identify or refer other individuals to the study. I identified houses of worship (i.e., churches and mosques) where I had a contact and discussed the purpose of my inquiry with likely candidates. In this chain of introductions, the respondents introduced me to others who were potential candidates.

**Recruitment of Participants**

I recruited participants for this study between January 2013 and November 2014 with the help of a research assistant. I recruited the Coptic participants through two of the main Coptic churches in Nassau and Queens counties. I distributed hard copies of recruitment flyers and also posted them in a conspicuous location in the churches. The final sample was the result of such recruitment efforts and snowball sampling, where some participants introduced or referred me to other potential candidates. I implemented the same recruitment efforts with the Muslim group by contacting a local mosque in Queens County, speaking with some congregants, and posting flyers throughout the mosque. However, I encountered many difficulties in recruiting potential candidates, most probably due to being a man and a Copt, and which may have elicited the congregants’ mistrust or feeling of awkwardness. To address this dilemma, I sought the help of a research assistant, an acquaintance and a colleague in the social work profession, a Muslim
woman, who had access to the community congregants. This strategy was fruitful as she was able to recruit and interview (11) participants and subsequently refer (4) participants who were willing to be interviewed by me.

Sample Characteristics

Descriptive characteristics about each participant are presented in Table 1 (see Appendix F). The Coptic group ranges in age from 62 to 76 years, while the Muslim group ranges in age from 65 to 76 years. At the time of the interview, the Coptic group participants had been in the United States from (2) years to (10) years. The Muslim group participants had been in the United States from (2) years to (5) years. The Coptic participants included (9) women and (6) men. The Muslim participants included (10) women and (5) men. Of the (15) participants from the Coptic group, (15) were professionals who had their career niches in Egypt and had a least a bachelor’s degree or higher, with the exception of (1) participant who had the equivalent of an associate degree. Of the (15) participants from the Muslim group, (8) were professionals who had their career niches in Egypt and had at least a bachelor’s degree or higher. The remaining (7) female participants were homemakers, (4) of whom had a high school education, and (3) of whom had a junior high school education.

All participants from the Coptic group had legal immigration status in the United States and were documented: (10) participants were sponsored for green cards by one of their children, (1) participant was sponsored for a green card by her older brother, while (4) participants were documented through political asylum. All (15) participants from the Muslim group were sponsored for a green card by one of their children. Among the Coptic group, all (15) participants identified nationally as Egyptian or in ethno-religious terms as Coptic, which they described as Egyptian Christian. A similar pattern was observed among the Muslim participants.
who identified nationally as Egyptian or in ethno-religious terms as Egyptian Muslim. At the
time of the interview, among the Coptic group, (7) participants lived with their children and (8)
participants lived on their own in apartments. Among the Muslim group, (14) participants lived
with their children and (1) participant lived on his own in an apartment. Two couples, (4), of the
(15) Coptic participants were cyclical immigrants, going back and forth to Egypt at least once a
year and spending half of their time there. The remaining (11) Coptic immigrant participants
settled permanently in the United States and have not gone back to Egypt since their
immigration. Of the (15) Muslim participants, (5), including two couples, were cyclical
immigrants who traveled to Egypt in the same pattern as their Coptic counterparts and spending
some time in Egypt and the remainder in the United States.

Data Collection

Several qualitative data collection methods exist: observation, interview, focus group,
and document review (Patton, 2002). Each method offered certain advantages and disadvantages
or tradeoffs. Selecting a particular method of data collection depended on the purpose of the
study, time constraints, and resources. The purpose of this study was served best by using an
open-ended structured interview data collection (Patton, 2002).

The structured interview consisted of a set of pre-established questions arranged in a
sequence (see Appendix C). Structured interviewing trades breadth and flexibility for depth and
consistency of focus as each respondent was asked the same questions in the same fashion in
order to capture categories or patterns of behavior (Patton, 2002). Framing the discussion using a
structured interview protocol allowed for an in-depth, directed exploration, and yielded detailed
information about each informant’s lived experience in relationship to the difficulties and
opportunities of immigration (Morgan, 1997). For example, focused discussions on the
respondents’ daily challenges, thoughts, feelings, and behaviors, rather than surface discussions on a broader range of topics, added richness and a deeper understanding of their experiences. This approach was especially time and resource efficient.

Even though structured interviewing had the potential of limiting the organic emergence of data that may further expose me to other dimensions of the immigration experience, it was nonetheless more efficient to begin an inquiry with a predetermined set of questions that were drawn from my practice experience and the literature, rather than allowing questions to emerge on their own (Fontana & Frey, 1994). It was aimed at minimizing errors and facilitating analysis (Patton, 2002). Another potential pitfall of structured interviewing is the curtailment of rapport building with participants (Fontana & Frey, 1994). To compensate for that, during the sample selection process, I met with each participant in advance and attempted to build rapport while simultaneously collecting demographic characteristics.

**Guide development.** An interview guide helped me utilize limited time in an efficient manner (see Appendix C). It enabled me to specify important issues in advance and make decisions about which information to pursue in greater depth (Patton, 2002). For the purpose of the study, I ensured that all questions were open-ended to encourage participants to talk openly and at length in their own words about their lived immigration experience (Patton, 2002). The interview guide maintained temporal sequencing by asking questions in a chronological order of the process of immigration (Patton, 2002). Participants were asked demographic questions before the interview as part of the sample selection process, to verify that all participants met the same inclusion criteria, and were also asked questions during the interview as they related to, and enhanced the understanding of certain contextual aspects of, their immigration experience.
In developing the interview guide, I exercised reflexivity in relationship to the phenomenon under study. Generally, I realized that the topic of immigration elicited certain thoughts, feelings, and behaviors for me. I became aware that I am both an insider and outsider in relationship to the study participants. I was an insider because I emigrated from Egypt to the United States with my parents as a teenager, and I was familiar with the different dimensions, meanings, and challenges associated with the immigration experience. I was an outsider because I had been 15 years of age at the time of immigration, and I was from a younger, more assimilated, cohort group. My immigration experience and familiarity with immigration issues equipped me with valuable insights. My closeness to immigrant communities allowed me to build rapport quickly with participants. Such advantages, however, potentially hindered my empathic neutrality, my ability to construct or pose clear questions, and impartially analyze respondents’ meaning they attributed to the phenomenon (Patton, 2002).

Thus, I exercised what Moustakas (1994) refers to as “epoche,” to identify and temporarily suspend my own meanings, prejudgments, presuppositions and biases about the phenomenon under study and at the same time inform the development of the questions. I had to remember and reflect on my own immigration experience and tap into specific events of what I witnessed in relationship to my parents’ rather difficult immigration experience. I used my memories of these events to examine and surface preconceptions about this topic, such as the immigrant experience being only difficult. I also reflected on the experiences of a number of my immigrant clients and identified how such encounters have contributed to my knowledge about this topic. Such reflections have helped me pose meaningful questions but also avoid presuppositions in formulating the questions. In a role reversal, I reviewed each question as if I were the interviewee. If I felt that a question was confusing or biased, I reworked it.
The first dimension of the interview guide focused on discovering the process and context of the immigration decision (Lofland & Lofland, 1984). My questions specifically intended to discover the circumstances that made the participant think about leaving Egypt; the process of establishing eligibility to emigrate; the preparations for leaving the country; and how the choice to leave influenced the way they saw themselves and others saw them. The second dimension focused on the psychosocial risk factors for stress and distress induced by this transition, how they impacted the participants’ health and mental health, and how they hindered their adjustments to the American culture and society (Whyte, 1984). My questions specifically intended to explore and discover the participants’ perceptions of their challenges, difficulties, losses, deficits, and limitations, as well as the changes in their roles, relationships, statuses, self-perception, identity, and lifestyles and the meanings they gave to them. The third dimension focused on the protective factors that buffered the impact of this transition, counterbalanced such psychosocial risk factors for stress and distress, enhanced their adaptive capacities, and helped their adjustment efforts at this time in their life. My questions specifically intended to explore and discover the rewards, benefits, and opportunities embedded in the social and family structure, such as social, community, family resources and supports, as well as their personal resources, such as coping skills, mechanisms, strategies, and strengths (Whyte, 1984).

The interview process. In-depth, structured, face-to-face interviews were conducted with (30) participants, (15) Copts and (15) Muslims. Each interview lasted between 60 and 90 minutes. I interviewed a total of (19) participants, and my research assistant interviewed a total of (11) participants. My first intention was to interview as many participants as possible in their home environment in part to observe their lives and to provide a context that gives their verbal responses more meaning. For example, the surrounding neighborhood in which they live can add
meaning to the study, especially if it is located within an ethnically homogenous neighborhood where the Arabic language is spoken and ethnic food stores or houses of worship are in close proximity. Likewise, family portraits, home décor, and even furniture can give nonverbal cues about the individual’s way of life, his/her belief system, and coping styles.

However, this strategy proved difficult to achieve with many participants. Due to different constraints of space, timing, and receptivity of family members, only (12) participants were interviewed in their home environments. To facilitate the interview process and accommodate participants, the remainder (18) interviews were conducted in a private room in either a church or mosque. All participants agreed to the use of a digital audio recorder after reassurances of confidentiality. All audio recorded interviews were transcribed later verbatim.

The structured interview guide enabled me to explore the participant’s immigration experience in depth and details, as it yielded nuanced descriptions and information, more than a comparatively semi-structured interview protocol. However, due to the focused intensity of this interviewing technique, it posed certain challenges. In two separate instances, for example, participants showed intense emotions regarding their respective immigration experience after recalling a loss that led to the decision to emigrate to the United States. Although I empathized with and acknowledged their feelings, and asked them if they wanted to stop the interview, I felt uncomfortable because I couldn’t address their feelings in depth as I would in a psychotherapy session. Having to deviate from either the therapist’s and/or geriatric care consultant’s approach, routine, and training protocol upon encountering this experience caught me off-guard and made me reorient myself to my role and purpose of the encounter. In order to balance my role as a researcher, control the direction and flow of the interview, excavate and grasp rich information,
and in the meantime address the participants’ vulnerabilities, after I concluded the interviews, I revisited and addressed different areas of difficulties through different interventions.

Data Management and Storage

Maintaining confidentiality and safeguarding documents was of utmost importance. The information gathered during this study remained confidential in a locked drawer during this project. Only research personnel had access to the study data and information. All transcript summaries were given codes and stored separately from any names or other direct identification of participants. There were no identifying names on the tapes. Participants’ names were not identified in study records or publications. Each participant was given a pseudonym, for reference purposes in the study, which would match his/her religious background. All audio tapes and survey materials were disposed of when the study was complete.

Data Analysis

Thematic analysis was utilized to analyze patterns within the data (Patton, 2002). The analysis mainly followed four phases, and a recursive approach, back and forth between these phases, was used to capture meaning and themes across the entire data set (Patton, 2002; Saldana, 2009). The first phase included listening to the tapes and transcribing the interviews (Patton, 2002). The second phase included reading the transcriptions several times and memo writing (Patton, 2002). The third phase included developing meaning units, categories, and initial codes (Braun & Clark, 2006; Saldana, 2009). The fourth phase included collating codes into themes (Patton, 2002, Braun & Clark, 2006).
Phase 1: Listening to the tapes and transcribing the interviews. Listening to the tapes and transcribing the interviews proved to be a very daunting and time-consuming task. Each interview transcription involved two steps. As I listened to each interview recording in Arabic, I simultaneously translated and transcribed the participants’ words and phrases. I therefore had to constantly stop and replay the tape recorder several times throughout each interview to capture both verbatim words as well as the implied and connotative meaning for certain expressions and statements that could not be translated directly. In addition, I included nonverbal transcription such as pauses, sighs, coughs, and tone of voice. As I am fluent and well-versed in formal and informal, oral and written, Arabic and English, I deliberately chose to translate and transcribe the interviews myself, as opposed to delegating this task to a professional transcription service, to ensure that textual and contextual meanings and connotations of the participants were captured well. Each interview transcription took several hours and took place in two days.

On the first day, I transcribed the entire interview. On the second day, to ensure proper translation, I listened to the tape several times and followed my earlier translation and made adjustments as necessary. For the same purpose, I chose not to transcribe the tape recording from Arabic to Arabic and then from Arabic to English, fearing that the essence of such connotations and meanings would be lost. The rationale for this argument I noted first-hand when I started transcribing the first interview into Arabic as I was listening to the tape recording, with the intention to translate the Arabic transcript subsequently into English. However, this two-step process hampered me from actively listening to the interview and instantly reflecting and capturing the essence of the verbal and nonverbal textual, contextual, and connotative meanings as they were verbalized by the participants. To compensate for this step, however, I subsequently wrote a one-page, hand-written, impression summary of each interview in Arabic, to both
capture the essence and the important points and to start the process of reflexivity and memo writing, and subsequently compared it to the one-page impression summary in English, which was a part of the second phase.

**Phase 2: Reading the transcriptions several times and analytic memo writing.** After reading each transcript several times, I started the memo-writing process, which began with a reflection of the notes that I had written during the interviews. These notes were not transcribed but served as a reminder of the context within which the interview took place and other subtle clues and observations not captured through the audio recorder. I then wrote an impression summary for each transcript. During this process, I paid close attention to the thoughts and feelings that were triggered by the participant’s words and tone of voice and, in the meantime, reflected on my own professional and personal experience and the empirical literature (Strauss, 1987). This step served as a checkpoint of how I interacted with, made sense of, and gave meaning to the data.

As a geriatric and clinical social worker, working with immigrants, among whom are the elderly, I have been immersed in this field of practice and thus have had preconceived notions and ideas. Also, having been a first-generation immigrant myself and having been exposed to immigrant family members, friends, communities, and their situations compounded this challenge. The “internal dialogue” that this process induced was necessary in the management of such preconceived ideas in that it made me realize the unique experiences of the participants and some of my own biases. It further highlighted the area of differences between the emerging data and the empirical literature (Chamaz, 2006). This process of reflexivity triggered the bracketing process that evolved throughout data analysis (Chamaz, 2006; Saldana, 2009). Subsequently, I identified and highlighted key words, phrases, and concepts of importance to the purpose of the
study questions and/or relevance to the literature. This step served as a prelude to the coding process.

**Phase 3: Developing meaning units, categories, and initial codes.** After rereading the transcripts several more times, revisiting the memos written in Phase 2, reflecting on the literature and my practice experience, I developed an initial list of codes (Oliver, Serovich & Mason, 2005). I analyzed the data using the concept of “phenomenological reduction,” by “bracketing out” presuppositions while breaking down the data to significant words and statements that provided an understanding of how participants experienced, and gave meaning to, the phenomenon (Moustakas, 1994), highlighted such statements, and labeled them with specific codes for identification (Patton, 2002). The process of coding functioned as an important classification tool to identify and categorize very basic and meaningful features or elements of the raw data.

This step involved sorting, collecting, combining, and organizing data segments in each interview and across interviews with the purpose of creating summative, essence-capturing, meaning units (Saldana, 2009; Braun & Clark, 2006)). In other words, I used what Patton (2002) calls intra- and inter-case analyses to extract units of meaning that later on emerged as categories. After grappling with the data, collapsing codes, omitting some, and adding others, I developed a set of 16 codes, including attribute codes for data management that capture narrative details, not meaning (i.e., demographic details such as age, ethno-religious identification, gender, and education); structural codes to capture the specific bounded components of the immigration experience among elderly Egyptians; and value codes that capture how they made sense of and coped with their experience (Saldana, 2009).
Some of the codes were derived from the data and the literature. Other codes were derived only from the data as they were absent from the literature. A notable challenge I encountered while coding the interviews was coming up with suitable codes that would capture the complexity or nuances of the meaning embedded in the text. I had competing thoughts about how to label a construct, meaning, or action. Part of this challenge was related to the existence of both semantic and latent content. I eventually mixed both approaches to code the text (Brown & Clarke, 2006). Sometimes, latent content was so obvious that I could not avoid coding it. However, I exercised caution in coding latent content since the code construction and level of analysis was driven by the study purpose and aim, epistemological stance, and phenomenological approach, which focused on understanding the phenomenon and the pattern of the lived experience of elderly immigrants as they perceived it and reported it (Clark & Braun, 2006; Saldana, 2009). Thus, the attribute, structural, and value codes were aimed at capturing the semantic meanings and patterns, not the latent, across-the-data set.

I realized that almost each code had various subcategories, and at times clustering these subcategories under one code conflated or confused these different meanings, categories, or dimensions. Thus, I sometimes resorted to splitting two individual codes into two separate codes to honor the variations embedded within each of them. For example, “cultural shock” was split into two codes: “migratory loss and grief” as well as “acculturative stress,” to discern the different meanings and processes associated with each of them. I also delineated the different kinds of protective factors and resources that buffered the negative impact of immigration-related losses and stressors, and placed them into two separate codes, each with its own subcategories. More specifically, I split “coping mechanisms” into two codes: “opportunities,” to discern and describe the advantages and rewards embedded in the context of reception or the social structure;
and “coping mechanisms and strategies,” to describe human agency or individual adaptive efforts, coping cognitions and behaviors.

During this process, I also dynamically collapsed some codes, omitted others, and changed code labels numerous times to better fit and match the meanings they describe. For example, I initially identified “cognitive dissonance” as a code to describe the conflicting thoughts, emotions, and experiences that elderly immigrants go through when they evaluate their losses and gains resulting from immigration. Subsequently, I realized that this code may be more of a “clinical” or “jargon” term and perhaps devoid of descriptive qualities, so I substituted it with a simpler, more descriptive, term, “conflicting feelings.” However, further reviews of the transcripts and internal debates revealed an additional code, “lifestyle changes,” which also captured such conflicting, positive and negative, feelings of participants. Subsequently, I separated the codes describing the participants’ negative feelings and encounters from those describing their positive feelings and encounters, into two different sets of codes. I eventually collapsed respective codes belonging to each set as I saw fit. Ultimately, as will be pointed out in the discussion of themes formation below, the exercise related to these two sets of codes formation resulted in the development of three overarching themes, each with its own subcategories. The first was “migratory loss and grief,” with several subcategories, to describe the immigrants’ material, psychological, relational and status losses. The second was “acculturative stress,” with several subcategories, to describe the immigrants’ struggle with new cultural values, norms, and psychosocial arrangements. The third was “opportunities,” with several subcategories, to describe the positive feelings and encounters, or protective factors, that deflected, diffused, or tempered the losses and stresses associated with the transition.
Another example would be the code, “language barrier,” that I had chosen initially to describe communication problems that elderly immigrants encountered. I subsequently identified “communication problem” to be another code. However, after some reflection, I combined both codes into “language and communication barriers.” This code better captured how the cultural context alters the meaning of the spoken language, as exemplified by metaphorical or symbolic statements (i.e., saying “Hi, how are you?” without waiting for an answer) and/or idiomatic expressions (i.e., break a leg). Ultimately, as will be pointed out in the discussion of themes formation below, the exercise related to this code formation subsequently resulted in the development of a subcategory, “language and communication barriers” under the theme “acculturative stress.”

Throughout the coding process, I encountered this dilemma several times. As a result, I either discarded the codes and created new ones, collapsed codes, or split individual codes into two separate ones to capture the nuances of each category. In summary, after a long process of reflection, grappling with the data, exercising reflexivity and internally debating different arguments stemming from my professional experience, personal experience, and the literature, collapsing codes, omitting some and adding others, I eventually was able to develop a set of 16 codes.

**Phase 4: Collating codes into themes.** Using thematic maps and constant comparative analysis, significant and coded statements of meaning units were clustered together into themes (Braun & Clarke, 2006; Moustakas, 1994). A theme represented patterned responses across the data and in relationship to the research questions (Braun & Clarke, 2006). As discussed earlier, this was achieved by sorting and analyzing codes, considering patterns and relationships among codes, identifying how different codes may combine to develop an overarching theme, and
collating all relevant coded data within the identified theme (Patton, 2002). Some codes were collapsed among each other or combined while others were discarded. I ensured that the combined data belonging to a theme held together in a meaningful way, maintained clear and bold boundaries, and did not transcend to or become confused with other themes (Patton, 2002). Eventually, I developed five themes, each with several subcategories: “push and pull factors,” “migratory loss and grief,” “acculturative stress,” “opportunities,” and “coping mechanisms and strategies.” “Coping mechanisms and strategies” included two subthemes: “problem-focused coping” and “emotion-focused coping,” each with several subcategories.

Although the main purpose was to identify the common lived experience among participants that gave rise to the essence of the phenomenon, I nonetheless created themes for outliers for comparison. I wrote memos outlining analytical decisions to give a rationale for my analysis and how the themes were formed. I resorted to using visual representations, such as tables or thematic maps, to help sort the different codes into themes. Similar to code construction, semantic thematic analysis, as opposed to latent thematic analysis, was used to capture the essence of the lived experience of elderly Egyptian immigrants according to how they perceived and reported it, not analyzing implicit assumptions or beliefs underlying their assertions (Braun & Clark, 2006). Thematic collation took place within the data set as a whole and comparatively between the Coptic group and the Muslim group to identify similarities and differences. Differential trends and experiences by ethno-religious background were identified and discussed. In the same vein, differential trends and experiences along other variables, including socioeconomic and professional status, gender, marital status, family support, were identified and discussed.
CHAPTER V  PUSH AND PULL FACTORS OF IMMIGRATION

Introduction

The purpose of this chapter is to describe how the respondents in the study decided to come to the United States. A number of push and pull factors played a role in the decision of these men and women who felt that Egypt, the country of their birth, upbringing, and achievements, was no longer the most desirable place to live at his juncture of their life. Like many of their peers encountering the challenges of advanced age, they faced a host of questions and concerns revolving around their safety, accessibility to medical services, and proximity to their children and family members. Notwithstanding the common narratives of participants’ pre-immigration experience, the push and pull factors that contributed to their immigration varied in a number of ways: by religious affiliation, marital status, gender, socioeconomic status, and family support.

Salient Pull Factors

Notwithstanding push factors, which may also create significant momentum for emigration, a number of stand-alone pull factors have directed elderly Egyptian immigrants to the United States as an attractive country of settlement. The information age and globalization has shortened distances, developed intimate channels of communication, and recently has created unparalleled awareness of the social, economic, and lifestyle intricacies among people of the world. This new “consciousness” increasingly has augmented the ever-present incentives for immigrants to settle in the United States. Although needs vary and priorities change as they take different forms with circumstances and age, such core enticements as seeking a better way of life created by family reunifications, freedoms, and socioeconomic opportunities remain a gravitational force and a central theme in the story of elderly Egyptian immigrants.
Family Reunification

The most salient factor that made elderly Egyptian immigrants gravitate towards the United States was reuniting with their children who had immigrated earlier. Arthur, a 70-year-old widower who joined his two sons in New York, described how his decision to immigrate to the United States unfolded:

My two sons left me and went to the United States. My wife passed away. I lived by myself. I was left alone and felt lonely. The close-knit, traditional, family structure that was once there dissipated over time . . . Everybody is nowadays busy in their business, so nobody talks to you or asks about the other. There was nothing left for me in Egypt. I missed my children and I wanted to be with them. I needed to be with loved ones and live among my family during my final days [serious tone]. I needed somebody to take care of me, to keep my company . . . to [interact] with me.

It is important to note that there were no significant gender differences in how men and women verbalized their needs to be reunited with the families in the United States as both men and women expressed their desire of closeness to their children at this developmental stage. Maya, a 72-year-old widow whose three daughters moved to New York in different phases, verbalized her wishes of reuniting with them in the United States, referencing the Egyptian cultural context and identity:

My name in Egypt was always the mother of Amal, my older daughter. Not a lot of people knew me by my first name. I missed my daughters very much and when my oldest daughter [with her husband] left to the United States, my life changed. It actually almost stopped. My whole life revolved around my daughters, their activities, their children . . . I missed all that and always [reflected] on my memories with them. When I had a chance to come here, I didn’t hesitate despite knowing the difficulties of relocation to another country.

Likewise, Amir, a 69-year-old widower, made references about how an important part of his identity revolved around being a father:

People didn’t hail me by my first name. They interacted with me as the father of Ibrahim. My son left and came here. He sponsored me and I came here. I now live with him. I came to be with my son. If my son decides to go back to Egypt, I will
go back. I have a daughter in Egypt. So I am torn between both my son and my daughter. But she comes to visit me, so that makes things better.

Many participants perceived their proximity to their children and grandchildren as enriching to them since they would get to have company, support, and affection. Angela, a 70-year-old widow whose one son and two daughters live New York and who has lived with one of her daughters and family including three grandchildren, puts such strong sentiments concisely:

I thought the country of my children is my country. When others questioned my decision to emigrate, I told them that my loyalty is where [my children’s] loyalty. At this time in my life, to me, there was nothing more important than my children. All I was thinking when I was in Egypt was to be close to my children and grandchildren. In my mind, there was nothing more pleasurable to me than being with them.

Another participant, Anais, a 66-year-old woman, has two daughters who live in New York and two sons who live in New Jersey. Anais, who lived with her oldest daughter and three grandchildren, and who had five additional grandchildren that lived in New Jersey within relatively close proximity, described her thought process which focused on the benefits of being with her children and grandchildren. Not only did those mental images she had conjured up fulfill her need to receive affection and support from them, but they also provided subtle ways of receiving satisfaction:

I came here to be with my family. I had no close family in Egypt. So I thought to myself, I needed my family’s help and they needed mine. They would give me the love and support I needed and I simply would give them back my love and support. Either way I looked at it, it looked promising and fulfilling. I felt I would be needed. I felt I would have a purpose, when for example I advise my grandchildren and provide my children with emotional support or cook for them, or help them study.

For a few participants, deviating from the narratives of the majority of participants, immigrating to the United States was more out of obligation to help their children and grandchildren than to receive support. Amal, a 67-year-old widow, reported on this situation:
My daughter sponsored me to come here to help her with the children. She requested for me to come here to help her out with her children and just be with her for moral support. I have another daughter and a son in Egypt. I’d rather be in Egypt with them. But they have their mother-in-laws to help out. They are all my children and I would love to be with them all but I had to focus with the one who needed help the most. My daughter here didn’t have anybody to help. So I mainly came here to help my daughter raise her children. I love them very much. But I came here because of duty more than anything.

**Access to Health Care**

In this developmental stage, due to the health care needs of this population, living in an environment where medical care and services are accessible was an important consideration and pull factor. Prior to immigration, most respondents felt that the American health care system would be superior to medical care they received in Egypt. Despite the rapid changes and setbacks in the American medical care system, which some participants had known about from reading about the topic or from family members, most respondents had the preconception that they nonetheless would receive appropriate medical care which they had lacked in Egypt. Raef, a 72-year-old male, reported that his secondary incentive, after wanting to reunite with his son, was the availability of medical care:

> What made me settle here, besides that my family is here, was the availability of medical services. In Egypt, I received basic medical care not the extensive kind I had heard about from my friends and family who had settled here. I really thought that my health problems would be effectively addressed.

This preconception was shared by a few more participants who had hoped and looked forward to obtain remedies for certain health conditions they had. Among those participants who shared their thoughts in contemplation of coming to the United States is Maya, a 72-year-old widow who suffered from a chronic health condition which she couldn’t manage in Egypt:

> I thought that my [condition] would better be addressed in the American health care system. Eventually, and after years of extensive efforts and follow-ups, my condition has improved and is stable . . . I had thought that it would be much
easier and much more effective, and [less complex], to go through care here. This was an additional incentive for me for sure. It made me want to come here.

In the same vein, David, a 66-year-old male who had difficulties with medical care in Egypt, had found it to be an incentive to come to the United States to manage and address his health care needs:

I really wanted to take care of my medical necessities. I didn’t have a good experience in Egypt. I wanted to manage my condition appropriately and efficiently. I learned about the American health care system and technology and knew that I would have my problem resolved here.

Despite the complexities and recent policies curtailing the delivery of medical services, among benefits and entitlements, to immigrants, provisions that were later introduced and which transferred medical expenses from the federal level to the state level has made it possible to provide immigrants with medical care through Medicaid. Such changes in the health care policy have impacted immigrants positively in New York. In other states, different rules apply and some of these rules impact the delivery of health services to immigrants. However, New York State has taken over the administration of Medicaid funds for immigrants and has covered the gap created by the federal government’s enforcement of the five-year bar on paying for medical services to immigrants.

Living in a Healthier, Safer, and More Organized Environment

Another factor that attracted participants to the United States was living in a healthier, more organized environment that caters to their health needs. Many participants made specific remarks about having had the desirability to live in an environment conducive to their health, safety, and overall well-being. Their narratives reflected their desire and need to regain a sense of certainty, safety, and stability in their lives that were disrupted by the chaos and uncertainties that followed the Egyptian revolution.
Ekbal, a 68-year-old female who suffered from an asthmatic condition, emphasized the importance of how living in a healthier environment impacted her decision to immigrate to the United States:

I had imagined myself living in a fresh environment, less dust, more cleanliness in the streets, less garbage, less traffic, less noise, more access to care . . . I followed American shows on TV, and heard from people too, and saw a positive environment, healthier and cleaner . . . This was something that I had longed for in general but in particular also because of my breathing condition and the necessity to be in a less dusty environment.

Amani, a 65-year-old woman who had been the manager of the marketing department of her company and who had exposure to the American system, reported that not only had she desired to be in a healthy environment but also longed to live in an organized environment. To her, the American ways of life, timeliness, effectiveness, responsible behaviors, efficient business practices, policies of checks and balances, and democratic procedures, were incentives to relocate to the United States:

I learned through my work experience and talking to my American counterparts and of course through the media how effective the American system could be, the transportation system, traffic laws and how they are enforced, how organizations were run . . . I also saw how [respectfully] people were treated as citizens, how they received urgent medical attention and other necessary services, and how the needs of the elderly among them were addressed. I understood that there was no perfect system and I was particularly privy to the pitfalls of the American system, but compared to my own experience in Egypt, the American way of life, particularly doing business, was superlative.

George and Antoinette (a couple), one of whose aspirations was to live in a healthier and safer environment, described their thought process as they reflected on their experience prior to making their decision to come to the United States:

Antoinette: I went to France a couple of times to study and I obtained my Master’s degree from there. In my mind, I had always compared the United States to France in how both, as Western countries, were similar in their organization and respect for rules, laws, and human rights. In France, times were honored, traffic rules were obeyed, cleanliness in the streets were observed, access to
medical care was provided, people were treated with respect and consideration, knowledge was accessible, debates that included different dissenting opinions were allowed. So with the knowledge I have about the United States from the media, when I imagined the United States, I automatically imagined my positive experience in France.

George: I was also exposed to other western cultures before coming here. I traveled to Europe and saw how things were. So I had a similar experience to Antoinette. When we both had a chance to be here with our son, we both imagined that our positive experiences would be replicated. So this was a definite plus for us.

Amal, a 67-year-old woman who was a homemaker in Egypt, reported on her simple desire to live in a place where traffic laws existed and were obeyed:

I loved watching the American shows on TV. Everything looked neat and organized. People seemed to appreciate traffic laws, I noticed. I thought to myself that if people obeyed something that we never obey in Egypt, then they had a tendency to obey other rules. So that was something that I looked forward to, safety and security.

Martin, a 68-year-old former college professor and human rights activist, focused his conversation on how he sought to live in a country that honored human rights:

I always wanted to come to the United Sates but I couldn’t because I was very involved in my kind of work in Egypt and it was necessary for me to be there. But when the time was right, I moved forward. I had desired being in a place where my thoughts and feelings were honored and my struggles recognized. I also appreciated the culture, the separation of church and state for example, the struggle for equality, the organization, the progressive and goal oriented way of thinking, the quietness and safety of the streets.

**Economic Incentives**

A number of participants, particularly those who had retired shortly before coming to the United States and had the physical capacity to be productive, identified employment and financial aspirations to be one of the pull factors in their decision to immigrate. Such aspirations, paradoxically, were salient among those participants who had professional careers and were from a higher socioeconomic sector in Egypt, as opposed to those participants who had limited means
and would otherwise have looked to better their socioeconomic situation. This finding is exemplified by a number of participants who reported on some of the potential opportunities they had imagined and solidified their decision of immigration.

Amani, a 65-year-old woman who had been the head of the marketing department in her company, exemplified such aspirations and her underlying desire behind her decision to immigrate to the United States:

I had imagined myself using my credentials and experience in the same fashion and confidence that I used them in Egypt . . . I envisaged a scenario where I am employed in a good company with a descent salary, enough to maintain a similar lifestyle that I had in Egypt, a good car, a nice spacious apartment, but in a better, healthier, more organized environment that appreciates hard work, intelligence, and dedication.

Similarly, a couple, George, a former accountant, and Antoinette, a former French teacher, 72 and 69 years of age, respectively, reported similar sentiments as they were considering the pros and cons of the decision to immigrate to the United States:

George: I was always motivated to work. I had worked inside of Egypt as an accountant and outside of Egypt in the health care field in my youth, in Italy and in Iran. So I naturally felt the urge and had the drive to better our conditions and kept dreaming of the opportunities ahead of us in terms of having a better lifestyle.

Antoinette: (nodding) Indeed, I felt the same way too as I worked as a French teacher for over 40 years. I foresaw a scenario where I was employed in one of the French institutes as a teacher. I am French educated, both in Egypt, since elementary school through high school and college . . . and in France where I obtained my Master’s degree in pedagogy. So I wanted to transfer my skills to the labor market . . . and live a good, peaceful life, a better life, of whatever remains of it.

David, a 66-year-old male who had been a former engineer in Egypt, and Aida, a 63-year-old former health care professional and lab technician, echoed similar sentiments as they recalled the underlying economic incentives behind their decision:
David: I wanted to secure a job in my field. [Upward mobility] was definitely a goal in my mind, and just having a better lifestyle. I had wanted to immigrate to the America earlier in my life and I should have for that reason, economic gains, but my dream never materialized due to many factors. When the opportunity came along, that was one among the first incentives that crossed my mind.

Aida: I also wanted to get a job in a related field of mine. I dreamt of more financial independence and more appreciation for my efforts in the material sense.

Olivia, a 67-year-old former teacher in Egypt, was the only participant who was not sponsored by her child for permanent residence, as she was sponsored by her older brother. She immigrated to the United States with her adult daughter and her adult son. She reported that among the things she had sought in coming to the United States was landing a job and more economic security:

I always worked in Egypt and supported my family despite the relatively poor compensation, and I wanted to continue working in America. My brother had sponsored us [including her son and daughter]. I had planned my life as such and that was an enticement for me, especially after my husband passed away and I became the sole breadwinner. I had heard that it would be difficult for me to land a job in my field from my brother so I planned my moves accordingly and asked my brother to reach out for people in his social network to see if there were any job prospects.

Salient Push Factors

In addition to pull factors, push factors played a significant role in shaping the respondents’ decisions in coming to the United States. There were significant differences between the push factors experienced by the Coptic group as compared to the Muslim group. Fear was the most common emotion identified among the Coptic respondents and which pushed their efforts to settlement in the United States. Most Coptic participants described a common narrative permeated by discriminatory measures and harassment and in some instances persecution, hostilities, and violence perpetrated against them, family members, and/or people from their community or church. This scenario, which plagued many of the respondents’ lives,
was amplified in the aftermath of the “Egyptian Revolution” or what has been known to be called the “Arab Spring.” As for Muslim participants, the push factors among them were not as salient or urgent as for the Coptic group. Nonetheless, push factors also played a role in their emigration from Egypt. The chaos and lack of safety in the aftermath of the revolution along with economic stagnation and generally oppressive social conditions were conducive to, and in some cases expedited, their departure to the United States.

**Persecutory Measures and Hostilities Pushed Elderly Copts to Emigrate**

Of the (15) participants, (4) participants applied for political asylum after their arrival in the United States. Those participants reported that they had both personally experienced and witnessed several incidents of discrimination, harassment, or hostile acts involving physical assaults. Of the (15) participants, (7) reported that they either had experienced discriminatory measures or witnessed violence perpetrated against different members of their religious community or properties belonging to them. The remaining (4) participants did not experience direct discrimination or personally witness violence, partly due to living in an upper-middle-class neighborhood, but nonetheless reported feelings of uneasiness due to what they heard on the news or from other family members who lived in different parts of the country.

Those who sought asylum spoke about the underlying feelings that impacted their decision about applying for asylum and the preparation for that process. Seeking safety, freedom of religion and expression, a number of Coptic participants planned to overstay their tourist visas to escape “systemic discriminatory and oppressive practices” against the Coptic minority. Some described their situation as “living in severe depression,” and some described how they “were sleeping without any safety and feeling very worried about the children’s future.” The common
treatment that these participants reportedly received from their neighbors and colleagues involved straightforward hostility marked by prejudice and discrimination.

Maria, a 68-year-old former social worker who had come to the United States on a tourist visa and subsequently applied for asylum, recalled her experience:

We lived in the governorate of Menia by the Nile. The treatment we received was not good at all. They discriminated at work. I am retired now but I worked as a social worker. There was a general sense of discrimination. My colleagues directly observed me and my work. Lately, it became very blatant. My supervisor overly reprimanded me in front of my colleagues for the slightest things she perceived that I did wrong. For example, I was helping a child and my colleagues went to my supervisor and complained that I gave children preferential treatment based on their religion, and my supervisor was very tough with me. Both Muslim and Christian children used to come to me and confide in me and that created huge problems. My colleagues did not even say good morning to me. I was bypassed for many promotions. I was also written up several times.

The push factors took on a different meaning for David, who reported that he was not afraid for himself so much as he feared for his children and how they would be coerced to change religion by force or harassed and even physically attacked because they are Christian:

My son, as he was walking home from private tutoring, was intentionally attacked by other guys who had machetes and clubs. My son ran fearing for his life, and decided not to go to tutoring anymore. Right before we came here, my daughter was getting off the bus and there were 2 guys waiting for her on a motorcycle, they approached her with a fast speed. One of them snatched the small chain and crucifix she’s wearing around her neck. The other one grabbed her bag. My daughter was tough enough to hold on to her bag but the motorcycle kept going and she was dragged for [about 2 blocks] and she finally had no choice but to let go. She sustained many injuries. She was lucky enough not to be stabbed in her arms to be forced to let go of it. These practices occur daily and they mostly target Christians. Christians can easily be identified because they are the only ones who are [not covered]. Besides crosses or religious icons that Christians wear, most Christians have that [tattoo] of the crucifix on their wrists, so they are distinguishable.

Aida, a 63-year-old former health care worker, described the intricacies of her daily routine with different discriminatory acts and hostilities she had commonly received from different people around her:
Before we came, the restrictions were increased. They prohibited perfumes for women; the dress code has to include long sleeves and turtlenecks. Christians did not have any rights or privileges. We even had to pay more for the same merchandise. In my neighborhood, my son faced a number of difficulties, people used to crush glass on the ground and put nails where he used to park his car so he wouldn’t be able to park his car in those spots anymore. They observed him when he walked by and talked about him while making hostile references that he’s Christian. They tried to extort money from us in exchange for protection. Of course these people claim that they provide us with safety but it’s all false. Other people pretend they were fine with us but in reality they turned their face the other way and cursed at us behind our backs. This happened often enough that made us scared and paranoid.

Martin, a 68-year-old former college professor and human right activist, recounted his experience in Egypt and the day he made the decision to leave Egypt for the United States and seek asylum. Martin reported that his decision was an accumulation of years of oppression and dissatisfaction with how things were going in Egypt. He commented on the inflammatory sermons he sometimes heard from a hard-line imam in a nearby neighborhood and the different accommodations he made to avoid negative reactions from some of his fanatical neighbors. He was visibly upset as he described the negative and derogatory references that were made against Christians to demean them and paint them in an unfavorable light:

I heard them say let their wives be widows and their children be orphans. The extortion of [Christians’] money is lawful. The unbelievers are unfit to be among us and they either should pay a special religious tax or convert to Islam. No mercy should be shown to monkeys and pigs . . . worshipers of polytheistic gods.

Agnes, a 65-year-old participant who lived in a traditional, working-class Cairo neighborhood, was visibly upset and appeared to look for consolation while she was describing her encounters:

We [Copts] constantly have to show gratitude to them by giving them gifts. We have to buy their silence to our presence among them, by initiating good deeds towards them, by providing them with things. We constantly have to prove that we are good, benevolent, kind, forgiving people, contrary to the evil stereotypes they have about us. We cannot react to any provocations and we rather have to absorb them wisely and accept them. People’s negative attitudes have
tremendously increased after the revolution. Christians in particular have found it extremely difficult to survive in such an environment. After the cathedral attacks and lack of law enforcement, these people were emboldened. After the revolution, there was no safety anywhere. You walk in the street and you can see people cursing at you. We have been attacked repeatedly and mercilessly.

Deviating from the consistent experience described above, Marlene, a 62-year-old former finance manager in a bank and an asylum seeker, argued that her experience in Egypt was not all uniform. She made several important distinctions, the most salient of which was that the hostilities against Christians amplified to a significant degree in the last five years, particularly after the revolution and lawlessness that it embodied. Marlene described her experience in the 1960s and 1970s as very different from the 1980s and 1990s, and reported that the hostilities started in the decades of 2000, 2010 and totally spiraled out of control after the revolution, particularly when the Muslim Brotherhood came to power. She gave a timeline of such progression reflective of Egypt’s deteriorating sense of tolerance and coexistence, as she recounted her personal experience with discrimination:

I left Egypt because of the increasing and intolerable prejudice and discrimination [a short period of silence] and more recently the persecutory hostilities against Christians [increasingly sad tone]. I received a bad treatment from people in the street. I was told that I was an infidel, why wasn’t I covered? It hasn’t been always very bad like that. The bad treatment started way before the revolution but became much worse after the revolution. It became a nightmare when the Muslim Brotherhood came into power. It multiplied exponentially. Before the revolution you could call it prejudice or blatant discrimination based on religion. After the revolution, it could be defined as straightforward persecution and terrorism against Christians. There were so many bloody clashes, use of lethal and targeted force, scapegoating, premeditated attacks on churches, assaultive acts, stabbings against individuals walking down the streets, bombings, arsons, and they were executed mostly against Christians because of religion. It has been absolute hell against Copts. That’s why I left. I was born and raised in Egypt. I have great memories there. Egypt used to be a wonderful country. In the 60s and 70s, we lived in a liberal atmosphere, not thwarted by such intolerance. Things started changing somewhat in the 80s and 90s but they were tolerable. For the past about 15 years, Egypt and its people have transformed so much, and living in Egypt became almost impossible after the revolution. The only thing that sustained me
there was that I had great Muslim friends from college who grew older with me. They were extraordinarily loving, supportive, and kind.

A slightly different picture was painted by Angela, whose life became a constant battle of dealing with discriminatory practices and fighting unjust social conditions. Angela’s account sheds light on how discrimination against Copts cannot be mitigated, as it is profoundly entrenched in different institutions and establishments, despite protests and staunch support of many Muslim individuals and groups who are quite empathic and supportive of Copts:

Even some of my neighbors who were once moderate and pleasant somewhat changed towards me recently. We have Salafis next door, women are totally covered up. I don’t understand and I really can’t fathom that change. At work, I worked as hard as everybody else or even harder but I got less bonuses . . . I received a different treatment also. I was given assignments far away and my case load was bigger and full of more complex cases than my Muslim colleagues. When I asked about justification, I was told not to ask why, just let it be and accept the status quo because it wouldn’t go anywhere. Some of my supervisors who were on such good terms with me and even liked me told me that this was unfortunately the status quo and I had to accept the discriminatory treatment . . . otherwise it would be detrimental to my mental health. Even in public transportation, when I was standing up and somebody leaves his/her seat, people on the bus would favor the person who had a head scarf, because I was not covered and appeared Christian. I don’t understand how a country can change that much and that fast; it’s become backward for me. I am almost embarrassed and apologetic. I ask myself: How do we come across to the civilized people of the world? How do they look at us and make sense of our violence, sexual harassment epidemic, intolerance, and ignorance? I am sometimes ashamed of myself even though I am the victim of such horrific social conditions . . . Conditions became worse in Egypt after the revolution and it has been very unsafe and chaotic, and we desperately wanted to come and settle here. I was fed up with such [drama], and I came here to stay with my daughter and her family. I left Egypt and I left my history there, the good and the bad.

Other participants shed a different light on the experience of being a Coptic minority and its role in pushing them to emigrate. It is noteworthy that some participants did not directly encounter frequent and intense hostilities, such as those experienced by the asylum seekers. For example, those who came to the United States before the Egyptian revolution and ensued chaos reported that they did not experience such intense and frequent hostilities. Similarly, those who
experienced the revolution in Egypt but lived in certain geographical locations reported that they were rather protected from the exposure to such intense and frequent chaos and hostilities. Nonetheless, these participants described the push factors primarily in terms of experiencing fear, vicarious intimidation, subtle harassment, and covert acts of discrimination.

This scenario is best described through Arthur, who remained in Egypt for a few years post-retirement and came to the United States before the Egyptian revolution:

I personally did not experience problems on a large scale partly because I was retired and was protected from the public. I also came here in 2008, before the revolution and recent hostilities against Copts increased. But when I was there, I was [not at ease] regardless because the bad things that happened . . . for example, the contractors that came to my home were not respectful and raised the price on me. Once, two guys came to my apartment and one of them looked at the other and made negative references about the statue of Virgin Mary that I had in my living room and warned the other worker that I was Christian using a street expression that of course I caught. When I confronted him, they started cursing at me and used all kinds of profanities towards Christianity. Along with other things I heard through family and friends, it made me seriously think of leaving.

Other participants, who experienced the revolution in Egypt, explained that even though they may not have been personally targeted, witnessing attacks on churches and hearing of others experiencing different acts of violence increased their fear exponentially and created a hostile environment for them. George and Antoinette, who lived in one of Alexandria’s middle-class neighborhoods, described that they faced minimal problems compared to others. Despite being mostly surrounded by caring and supportive Muslim friends, neighbors and acquaintances, Antoinette still did not feel very safe as a Christian in Egypt and seized the opportunity to come to the United States:

I occasionally received those [reprimanding] looks from people . . . I was told to cover up at times and was told to be pious for just wearing a short-sleeve blouse. Things were becoming increasingly worse for Christians, amid all the chaos. Things were not great for us, as Christians, to begin with but we managed. But recently harassment against us became more pronounced. Part of it was the lack of security and law, part of it was scapegoating and being blamed for different
social and political conditions and part of it was due to pure fanaticism on the part of some people. But after the church bombing, which happened not far away from me, in my town, and the series of violent acts, it was time for me to seriously think about leaving. I appreciated all the genuine support I received from many of my Muslim friends, neighbors, and even street vendors, but I still felt that I lost my belonging there to some extent.

Daniel and Karen, who had a comfortable life and resided in an exclusive upper-scale community in Cairo, also reported that they did not personally experience any hostilities or discrimination after the revolution. However, they decided to come to the United States after their business was impacted by the chaos of the revolution and after they felt that they were going to inevitably suffer negatively if they continued living in Egypt, particularly with their Christian identity. They recalled the underlying decision to immigrate to the United States after their son sponsored them:

We didn’t feel at ease amid all that chaos. Our business was negatively impacted. We heard of attacks and hostilities on churches and monasteries and Christian businessmen who were mercilessly targeted and scapegoated because of their religious identity. We didn’t experience any of those things ourselves but we felt everything around us through our contact with friends, family, acquaintances, business associates, and religious figures. My relationships with my Muslim friends have always been very solid; we are one family. Also, I had very courteous and pleasant relationships with my neighbors, former colleagues in the medical profession, and business associates alike. Even though I appreciated all that, I felt the warnings to leave nonetheless. The atmosphere was just negative and non-conducive to business or living the kind of life we had been used to.

**General Dissatisfaction Pushed Elderly Muslims to Emigrate**

As for Muslim participants, their narratives of the push factors differed significantly from their Coptic counterparts. Most Muslim participants did not refer to specific threats experienced by discriminatory measures, targeting, or hostilities based on their identity. Even when they made negative and critical references to the chaos, political, social or economic instability, they did not personalize these changes or perceive themselves as specific targets as did their Coptic counterparts. In this regard, the push factors for Muslim participants took a different form, less
urgent and less potent as compared to the push factors for the Coptic group. More specifically, all (15) participants made indirect references to the push factors in their narrative, except for (3) participants who made a case of certain conditions that they were unhappy with and which motivated them to leave Egypt.

Two of those participants are a couple, Khaled, a 68-year-old former business administrator and Khadijah, a 66-year-old former creative artist, who reported on their discontent about where life in Egypt was going, particularly in the aftermath of the revolution:

Khaled: the idea of immigrating to the United States was born out of dissatisfaction with the status quo in Egypt. I wasn’t happy with many things, lack of respect, economic stagnation, disorganization, no enforcement of rules, police brutality, sexual harassment, and the chaos brought upon us by the aftermath of the revolution.

Khadijah: The lack of safety and the economic downturn, the huge inflation of prices, which created fear inevitably among people, was definitely a force behind our decision. What encouraged me was that I would be reunited with my family here. But generally speaking, I grew discontent with everything in Egypt at one point and craved a better place to live.

Amani, a 65-year-old former head of the marketing department of her company, also reported an urge to “move out of Egypt”:

Things were increasingly crumbling in a chaotic fashion, particularly after the revolution, and red flags were raised in my mind about my general sense of safety and prosperity in Egypt. There was a period of time where newspapers were questioning how much the bank reserve would last, and were watching the prices rise and necessary items become scarce. Even before the revolution, conditions were not conducive to living a good life because so much negativity was happening, from religious extremism, oppressive conditions that impacted women, and police brutality to silencing dissent, widespread corruption, and the ever-increasing gap between social classes were scary.

A few of the remaining participants from the Muslim group only made vague and indirect references to some of the aforementioned push factors articulated by those participants. For example, a couple, Masood, of 76 years, and his wife Mali, of 75 years, who had been circular
immigrants and going back and forth from the United States to Egypt on several occasions, voiced their dissatisfaction with the Muslim Brotherhood, the religious organization from which the former president of Egypt was hailed:

Mali: We had our green card and we visited and temporarily lived here before returning to Egypt. We decided to come back to settle here after the revolution. Things became chaotic after the revolution. I didn’t like [the former president from the Muslim Brotherhood].

Massod: I didn’t like how the country was run by religious zealots who only looked after their own interests. It was less convenient and very upsetting for me to stay in Egypt due to the political and social unrest.

Similarly, Farida, a 70-year-old former homemaker who was involved in managing her late husband’s grocery store before she gave up that role to her oldest son and had an intuitive knowledge of the dwindling economy, made references to how such economic stagnation impacted by political turmoil and social chaos expedited her departure to the United States to be with her daughter:

I acquired my green card when the revolution happened . . . I came here several times before then, since 2008, on a tourist visa . . . I wasn’t planning to depart to America that fast but things were becoming chaotic and out of control. There were long lines for commodities. Theft and looting increased, and there was lawlessness everywhere. I didn’t feel safe. My son lives far away from me and I was cut off from him due to the chaos. I was isolated and felt the urgency to leave, especially after my late husband’s [grocery store] suffered and couldn’t replenish the store’s merchandise.

Karim, a 71-year-old former high school principal who had initially been a circular immigrant between Egypt and the United States, identified turmoil, chaos, and stagnation as push factors that were conducive to his settlement in the United States:

I was alarmed by all the rapid changes in the social and economic conditions that took place after the revolution. I came back and forth to America a few times after acquiring my green card. I actually had just left from America to Egypt before the revolution and was planning to stay in Egypt for a while. But my plan changed with the deterioration of conditions and institutions. I decided to come back here and I haven’t been back since then.
Summary

The most salient pull factor for elderly Egyptian immigrants, regardless of religious affiliation, was seeking to reunite with their children. All respondents in both the Muslim group and the Coptic group expressed that what gravitated them towards the United States was the need to reunite with their children. This pull factor has two components and fulfills two needs on the part of elderly Egyptian immigrants: the need to receive emotional and moral support, through affection, companionship, and togetherness; and the need to feel that they are needed and capable of giving support, affection, and guidance to their children and grandchildren. This pull factor has a dual function in that it fulfills those needs for both the elderly and their children. There are other pull factors that act as incentives to the elderly including living in a more comfortable, healthier, more organized, environment where health care, social and medical services, and medications are readily available and accessible, and rules and laws are observed.

The meaning that all participants gave to the strong bond they have with their children enhances our understanding of family relations within the Egyptian cultural context, and frames the most important immigration pull factor for elderly Egyptians. However, what makes this pull factor unique and different from other immigration situations, where for example the children are often obligated to follow their adult parents despite their protests is that it often doesn’t involve such obligations. Late-in-life immigration involves different needs and incentives of belonging, safety, growth, giving and receiving affection and support. In this developmental stage, due to constraints imposed by advanced age among others factors, where they may not be able to contribute to society through professional or physical work, elderly Egyptians find it fulfilling to help their children and grandchildren, to guide them, advise them, and support them.
As for the push factors, the context within which the Coptic group emigrated generally differed from that of the Muslim group. The common experience of chaos, economic stagnation, and insecurity after the Egyptian revolution impacted all Egyptians, including both Copts and Muslims. However, Copts were differentially subjected to an additional layer of hostilities and scapegoating measures due to their minority status and Christian identity. In extreme cases, a gory picture of terror, hostilities, and persecution, and to a lesser extent, unfavorable incidents of discrimination and prejudice, consistently permeated the Coptic narrative and endured among most participants, with a few varying exceptions. For the Copts, the feeling of being “unwanted” due to their Christian identity and the differential treatment they endured, created the sense of urgency to emigrate. Despite strong identification with their Egyptian ethnicity, they felt that they more so belonged in the “Christian” West, where they didn’t have to worry about their religious identity, or be scared upon entering their church due to the possibility of an attack.

In comparison with the Coptic group, the push factors for the Muslim group generally did not play as much of a crucial role in their decision-making process to emigrate to the United States. However, in some cases it motivated and expedited their departure. A few Muslim participants made references to certain push factors, such as oppressive social conditions, corruption, lawlessness, lack of safety and security, chaos, and the depressed economy in the aftermath of the Egyptian revolution which expedited their exit from Egypt. Such push factors, nonetheless, did not carry the same urgency to leave Egypt as was the case for most of their Christian counterparts. Such differences set the stage for, and play a significant role in, how both groups perceive themselves in relationship to people from other ethnicities they come across, their attempt to assimilate into the American society, their experience with migratory loss and grief, acculturative stress, opportunities, and coping strategies.
CHAPTER VI MIGRATORY LOSS AND GRIEF

Introduction

Stress precipitated by adaptation difficulties to a new sociocultural environment and any resulting distress were derived from two parallel processes: first, losses incurred by separation from the familiar environment and, second, coping with the demands of a new environment. At times, it seemed that the 2 processes are intertwined and not separable. For example, loss of authority and voice within the family structure among certain participants was often intertwined with acculturative stress incurred by a new living arrangement, cultural norms, and family dynamics. However, after a closer look at the data, it was more feasible to delineate the two processes into separate themes, as each theme has its many subthemes and categories. This chapter will identify the unique and different kinds of losses that participants incurred by late-in-life immigration to the United States.

Tangible and Material Losses Versus Intangible and Symbolic Losses

Losses identified by participants were mainly tangible and intangible, material and symbolic. Material or tangible losses included the loss of loved ones and possessions. Intangible or symbolic losses mainly included the loss of a familiar environment, including climate and landscape, in addition to the loss of status, relationships, and roles. The degree of discontinuity and disruption that elderly Egyptian immigrants experienced in their identity due to such losses was related to the degree of severity of the immigrant’s grief experience. Thus, the experience of loss and grief among participants, although uniform in certain aspects, varied in scope and intensity in other aspects according to the participant’s religious background, gender, marital status, socioeconomic (professional) status, and family support.

The successful resolution of migratory loss and grief and, in the same vein, coping with acculturative stress, was an important factor in moving forward, adapting to the current situation,
and finding pathways to psychological well-being. Oftentimes, however, losses had tangible and intangible aspects to them, and it was rather difficult and impractical to delineate or separate both. As a result, the two subcategories of losses that I identified in analyzing the data evolved from “tangible and material losses or intangible and symbolic losses” to categorizing and describing each unique sense of loss and its components to unravel the complexity and nuances of the lived experience of the participants.

**Loss of a Familiar Environment**

A salient finding that was identified among all participants, for example, regardless of their religious background, gender, socioeconomic status, marital status, or family support was migratory loss and grief as a result of separation from their familiar environment. The participants’ familiar environment included anything from the living and spatial arrangement to climate, surroundings, landscape, customs, and language. They all identified and verbalized different accounts but similar experiences of their losses and the stressful response that followed when they left Egypt.

Marlene described the process of both her material and symbolic sense of loss and intense grieving upon her departure from Egypt. She showed intense emotions and became teary-eyed as she described the apartment that she had sold before departing from Egypt:

> I loved my apartment; it was hard giving it up. I had the carpenter do a design for me some time ago . . . I had great Burmese wood . . . I made paintings . . . It was hard giving it up. I lived in that apartment for 35 years and each room in that apartment is witness to a historical chapter in my life. I sold all that for little money, below the market price. Aside from the money, I feel that part of me and my history was gone.
Another nuanced description of the material and symbolic sense of loss was verbalized by a couple, George and Antoinette, who left Egypt in a hassle in the aftermath of the Egyptian revolution and ensuing chaos. George recounted their story:

We had to sell everything we had, the two apartments, the car, the furniture. So we sold everything and it was difficult for us, because the things you give up in seconds are the things that took years to build. These things have both great monetary and sentimental values. We gave up the apartment by the beach. We got little for it because we were in a rush. We sold everything to be able to come up with the tickets’ money. It was sad. You dismantle your base, your roots, and your own history with your own hands, you demolish something you have spent a long time creating and tending to. It was difficult for me to leave. All my relatives were crying . . . It was difficult to leave relatives and acquaintances behind. I left behind memories and close friends.

Geographical relocations were a life-altering change that created a sense of loss for most participants, and the reactions to the loss were very similar to expressions of grief. Both physical and symbolic losses evoked emotional distress and initiated grieving reactions. Different participants experienced grief differently, depending on their respective experience with the lost object. However, a certain response always followed the experience of loss, no matter what kind of loss, and the process of grief was initiated. However, how grief was expressed differed from certain participants to others.

The vast majority of participants reported that they have missed the warm climate of Egypt and the unique characteristics of the landscape, weather, and the smell of air, the warmth and dryness of the weather. All participants, regardless of their backgrounds, reported that these were the most intense losses they have had to endure, and they grieve because in the absence of a warm climate, certain health conditions are precipitated. Many participants reported that their lives were impacted in a number of subtle ways they had not thought about. Arthur, a 70-year-old man from the Coptic group, captured these sentiments:
I miss my country, my land, the familiar places, walking by the Corniche. I miss the impeccable weather and the food. Even my skin color and my health have changed because I am not exposed to the sun frequently enough. This is the first time that I am told by my doctor that I am lacking vitamin D. Arthritis pain had increased also I noticed. It’s just hard to have the motivation to go out in the absence of warmth. Not only do I miss the air and the sun, I miss having the freedom to go out when I want to and not restricted due weather conditions. In Egypt, it just doesn’t rain in the summer.

Ekbal, a 68-year-old woman from the Muslim group, gave a philosophical account of her sense of loss and grieving:

My sense of being has changed drastically. I can’t describe my sense of loss in words because it’s very overwhelming. It’s like waking up one day and you feel that you are in a bad dream because everything that you are used to your whole life is not there. The language was not, the food, the culture, the television, the atmosphere, the environment, your bed, your apartment, the people. It’s like saying goodbye to the tender and familiar part of you. You lose your sense of intimacy because you don’t see and experience what you have seen and experienced all your life, and it’s scary, painful, and alienating. I listened to Egyptian music every night and cried, prayed for healing, and then cried some more. It took me a couple of years to get used to my life here.

Marlene, a 62-year-old woman from the Coptic group, described her sense of grief after she moved to the United States and was cut off from the familiarity of her surroundings:

I felt a huge void in my life after coming here. I felt like hollow from the inside. My mood was unstable. I was very sensitive to everything around me and the slightest things made me cry. There were so many losses in a very little time, and I didn’t know how to feel about the things I missed. My mind told me that it was a period of adjustment and it was ok. My heart told me that those things were irreplaceable. I used to look through the window at the sky and imagine that I am in Egypt and close my eyes and listen to old Egyptian music. I just wanted to close my eyes all the time so I can see and be with the people and places I miss most.

Loss of Relationships

It was noted that the loss and grief of important relationships and social networks was also uniform among all participants. All participants reported that they miss their families and extended family, friends, acquaintances, and to a lesser extent their neighbors. The lack of an
immediate support network that is readily available and reachable has created a void in the participants’ lives. Olivia, a 67-year-old woman who was a former teacher, described this scenario:

In Egypt, everything flowed well. During any given day, my friends either called me or picked me up to go shopping. Then, I would come across my neighbors, who were like a big family to me, several times during the day, exchange greetings or mini visits, and sometimes receive visitors, talk to different family members to give them my opinion or advice. I miss my relationships with my family the most.

Participants’ lives were imbedded in the family affairs and social networks, and lacking such support network has created a void. Participants reported that they tried to replicate this lifestyle, but they failed due to the numerous responsibilities and burdensome schedules of their children and the extracurricular activities of their grandchildren. This busy schedule made it difficult for children to fulfill their parents’ needs. Many participants reported that it was hard for their children to carve out time from their hectic schedules to sit down for substantial quality time, just in like in Egypt, to listen to them properly.

Hannah, a 70-year-old former homemaker who had close relationships with her siblings, cousins, and friends, expressed that she regretted having come to the United States in the initial phase of transition and having endure the complexity of loss and grief:

If I knew that this was going to be my life, I would have never come. I really feel quite nostalgic to my country. Over there, my sisters, neighbors, friends, acquaintances used to visit me, call me, pick me up. My son-in-law, my daughter, and her children waited for me at the airport, but I was feeling homesick already. I miss my country so much. It was a very sentimental thing for me. I had difficulty because people who love me and I love them are not part of my daily life. I cannot see them and feel them. I can talk to them every once in a while by phone but it’s totally different.

The grief response, however, varied to some degree according to marital status and gender. Married couples, for example, did not experience the same scope and intensity of grief as
compared to their single counterparts. Khaled and Khadijah, for example, touched upon this point as they processed their feelings:

Khaled: There is no doubt that certain things are irreplaceable. Our time in Egypt was long. We lived there for over 65 years. So the relationships that we built over the years, which have defined us, evaporated to a great extent, never mind the occasional phone calls that we make to close friends and relatives. But my wife has played an important role in helping me manage those changes. She was a buffer; she has been an important part of my life for a long time and has witnessed everything I have gone through.

Khadijah: I couldn’t imagine taking this step [of immigration] without Khaled. I see some of the suffering that widowed people go through when they come here. They are cut off from important people who remain in Egypt. They come to their children but in return, they have to give up all their other significant relationships with relatives and friends.

**Gender Differences in the Experience of Loss and Grief**

Male participants reported a unique experience of loss. Their perspective revolved around the loss of their instrumental relationships with friends, acquaintances, and neighbors within a unique cultural context that ascribed a daily routine to male retirees. In Egypt, the retirement age is 60 years. After retirement, the majority of men follow a daily routine that consists of waking up early in the morning to either catch prayers and/or buy fresh breakfast from local food stores of close proximity and follow up on the news from different sources. During this time, men usually walk through the closely knit neighborhood — apartments, shops, and cafes in fairly crowded alleyways — and interact with shop owners, neighbors, and other familiar faces that are sipping teas and coffees at cafes and playing different kinds of card games, dominos, and chess, and exchange cordial greetings with them. It is the unique character of the Egyptian cultural elements, involving cordial norms of reciprocities, which are passed on and filtered through such daily exchanges, that men grieve the most. The following is an account of one participant, Amir, a 69-year-old retired engineer, which captures the gist of this experience:
I miss speaking Arabic to the people on the street and to the public. I used to wake up early in the morning, go pray in the mosque, go to buy breakfast from the [foul and falafel] guy at the corner of my house, then go to pick up the newspaper, sit in my veranda, have breakfast, read the newspaper, drink my tea, and listen to classical Egyptian music [like Om Kalthoum or Abel Halim]. The hardest thing for me is that I lost my life-long friends, folks that I was raised with, went to school and worked with. I miss sitting with them at the [coffee shop], play cards and smoke [hookah] with them. I had no idea that those little things that I did out of mundane routine and took for granted can make such a difference in my life when they are not there.

George, a 72-year-old former accountant, described a similar experience of loss but had a less intense grief response due the recent events in Egypt that brought chaos, uncertainty, and fear, particularly among the Copts:

I miss the spirit of being in Egypt and just interacting with my peers, friends, and certain neighbors. I had a number of close friends. We used to visit each other. We confided in each other. We traveled together. We raised our children together. We grew older together. These experiences cannot be replicated and that’s why they created a void in my life. Other things can be remedied like the food, going to the Coptic Church, and watching Egyptian movies. But those special bonds cannot. When I reflect back on my life in Egypt, I feel this void. But I don’t react to it like other people I know. I don’t let it bother me. I also remember the things that did not go so well my last two years there, like my growing isolation after the chaos of the revolution.

Female participants, on the other hand, described their sense of loss and grief differently from male participants. Comparted to men—whose perspective of loss revolved around their instrumental relationships with friends, acquaintances, and neighbors—women’s perspective of loss revolved around the loss of their emotional and affectionate relationships centered on family ties and their roles in the family. The majority of women reported that the loss of their siblings, close relatives and friends, and people in their closely knit social network was very difficult. Compared to male participants, female participants were quick to open up about their feelings of loss and grief. Their narrative was quite expressive, detailed, and emotional. Furthermore, female
participants showed more attachment to family relationships they had in Egypt and reported that these relationships defined who they were.

Amal, a 67-year-old former homemaker who has one daughter, one son, and four siblings in Egypt, described how her daily routine and identity revolved around her family members and how she experienced the loss of her family members upon immigration to the United States:

I left behind a number of important people in my life. I came to be with my daughter who needs me the most, but I still have one daughter and one son in Egypt whom I really miss much. I don’t regret it. But I didn’t think that the tradeoff was going to be that harsh. I have really missed being with my sisters and brother very much. Nothing in the world can compensate for that. It was really difficult for me to decide between being with my oldest daughter in one place whom I am also close to or being with my siblings, son, and younger daughter in another. I’ve endured the most anguish because of that loss. And by the way, my life has never been the same. I love my daughter and grandchildren very much and I am glad that I am with them regardless of anything else, but it’s just difficult having to be away from the other people that you equally love and care for. Being with my siblings occupied an important part of my daily schedule and defined a great deal of my daily activities. Life would be perfect if I just have my children, my siblings, and my close friends together in one place.

Farida, a 70-year-old woman, described similar sentiments about leaving her two sons, siblings, and cousins in Egypt, as she tried to manage her tears:

I really miss my two sons in Egypt. I also miss my brothers and sisters. We struggled together and developed a strong bond as we grew up in one household. I miss my two closest friends, who also happened to be my cousins. I miss the interactions, the laughter, and the exchanges of courtesies that I had with them. I miss being there for them. I miss the little things that made me smile and gave me a reason to be happy. I miss confiding in them. I miss cooking for them. I miss cleaning and decorating their apartment when their children were getting married. I miss gathering at their house. It’s not easy being away. I sometimes feel depressed because I miss them so much. I call them especially when I want to vent and that mitigates the distance but I still can’t see them and be with them.

**Loss of Social Status and Roles**

An important finding, which varied among participants, was that they have lost their social status and roles. More specifically, this finding was more salient among men than women.
and among participants from a higher socioeconomic, educational, and professional status. In other words, those who experienced the greatest sense of loss were highly educated and professional men who were from a higher socioeconomic background and, to a lesser degree, professional women, followed by women who held traditional roles of homemakers. The common denominator among all participants irrespective of their gender or background, however, was that social role and status meant honor, recognition, and respect. The influential roles and tasks that they had taken on a daily basis solidified a particular status they held in Egyptian society and reinforced their self-image and self-esteem. For example, traditional women, who were homemakers in Egypt, given the loss of their emotional and affectionate relationships centered on family ties and their roles in the family, as discussed earlier, also experienced the concomitant loss of status and roles of being mothers, siblings, and friends. These traditional roles give these women honor, recognition, and self-esteem just as professional roles give these benefits to men and professional women.

According to the male participants who were from a professional background, they experienced these two intertwined losses the most when they came to the United States. Losing their social status and their roles, which were the hallmarks of their lives in Egypt and which gave them a sense of self-esteem and self-worth, meant losing their roles, voice, and ability to make influential decisions within the hierarchy of the family system. Martin, a former college professor and human rights activist, described this process:

I was a college professor in Egypt. I was retired. But I was still recognized by my students in the streets and public places. I was recognized by people who knew me and knew my work. I was acknowledged by many means. The people that knew me hailed me in a formal way, as Doctor. I lost that edge. I lost the acknowledgement and the attention. When I came here, I lost that part of my identity. Here I am less than ordinary. Over there, I was accomplished and recognized. When I spoke, everybody listened. Here, even when I try to tell
something to my grandchildren, they argue with me. I can’t even tell my own children my opinion about something. I don’t have any saying in matters.

On the other hand, Maya described her loss of traditional roles and social status as a mother to five children, a sister to three siblings, and a comrade to two close friends when she came to the United States:

When I came here, what I really felt was that I was redefined. My ways of relating to others as I used to became extinct. The way I once was in how I took care of my children in Egypt, how I used to cook and iron [clothes] for them and do things for them stopped, and that extinguished who I was and the way I had been living as long as I can remember. The same thing was true with my sisters, with my nephews, my nieces, and my two close friends. Because of the distance, I stopped having those intimate conversations in close proximity to them as they listened attentively for my advice.

Loss of Independence

By the same token, participants have to choose their battles, filter and prioritize their needs to solicit the attention and help of their children. Not only does this process evoke a sense of isolation and loneliness but also a sense of dependence and helplessness. As Antoinette puts it:

I am always hesitant and ambivalent to approach my son and ask him for favors because he’s very busy with his family. Sadly, I can no longer rely on myself to achieve my goals and fulfill my needs. I just don’t have the capacity to do that with advancing age and not knowing my surroundings well. This makes me feel helpless and sorry for myself.

Other participants, like Khaled, reported that the loss of independence was detrimental for him because it meant loss of dignity:

I am dependent on my son for rides to doctors’ appointments and to translate for me. I am dependent on my son for food and for shelter; I am dependent on my son to get my medications, to pay my bills, and call the cable company to fix my TV. I am even dependent on him to think for me. I can’t go anywhere without him. He has to take time off of work to take me to different appointments. I feel very bad but I have no choice. I sometimes feel helpless and undignified.
Loss of independence for some participants meant loss of an important trait that defined their character and sense of being. Amani described that her raison d’etre has been compromised due to loss of independence:

In Egypt, I had my own car and I drove since I was 26. I drove everywhere, to my sisters, my children, to my friends. I drove my husband when his vision deteriorated and couldn’t drive. I did a lot of good deeds by driving those who didn’t have transportation especially the elderly. I was always independent and never asked anyone for a ride. I was a free bird. I felt free and helped others. Now it’s difficult to travel alone for so many reasons.

Lack of language proficiency augments the fear of taking public transportation alone and reduces the participants’ ability to use public transportation. Agnes echoes the sentiment of others:

I used to be very independent. I can’t believe this is happening to me. I can’t use public transportation alone. One time I got lost and since then, I am very careful. In my country, I went everywhere alone. I didn’t depend on anyone. But here I have to depend on my son or my daughter-in-law to take me places. I also have to ask my grandchildren for directions and to accompany me to relatively faraway places to buy items that I need.

How Aging Exacerbates the Sense of Loss among Elderly Egyptian Immigrants

The aging process adds a layer of severity to this sense of loss. In Egypt, aging is regarded as a source of wisdom and strength. Younger folks generally go to the elderly for support and advice. In some traditional circles, the elderly act as jury and mediators of conflicts who resolve disputes among people in their neighborhoods before the involvement of the criminal justice system. These cultural norms become almost extinct in a modern society that puts more value in individual choices and in youth. Such norms and values trickle down to the family system and permeate the lives of immigrants as they assimilate. In such households, where assimilation is high, within their limited social circles and family systems, Egyptian elderly lose their social status and roles and concomitant sense of control.
Loss of status can be felt more in certain circumstances than in others and can take different forms. Notwithstanding the variations of experience gathered from participants, there are common elements of loss identified among them. Generally, due to cultural expectations and economic reasons, most elderly parents live with their children. This living arrangement takes on a different form for elderly Egyptian immigrants as compared to Egypt. The traditional authority and control that elderly have in Egypt naturally fades in a new environment, family composition, living arrangements, expectations, and culture. This diminished loss of authority, power, control, and voice within the family structure are conducive to a sense of helplessness, loneliness, self-isolation, and often depression.

The transition had an impact on the participants’ sense of personal continuity. The vast majority of participants reported that they had not anticipated the scope and intensity of dislocation they have experienced since their immigration. The loss of customs of a traditional society and their replacement by those of a modern society invoked bewilderment and grief. The formal and informal day-to-day interactions which characterized the structure of their daily routine and provided them with liveliness, a sense of worth and purpose, and a sense of certainty became extinct. Ekbal, a 68-year-old woman, described her sense of disequilibrium as a result of the interaction between age-related and immigration-related losses:

There were just so many changes to list, and they come in a time when I am personally changing because I am becoming older and, truthfully, frailer. I felt emotionally and physically dizzy for the first time in my life. I feel lost with no anchor since I moved here. I lost my sense of direction. My day here is totally different from my day in Egypt. There is no comparison even. I am not even sure about the things that can happen due to the many changes and uncertainties.

Summary

Late-in-life immigration to a new land prompts a grief response due to numerous symbolic and material losses incurred during this transition. The different losses reported by
participants include: loss of a familiar environment, loss of relationships, loss of roles and status, loss of independence, and losses due to aging. For elderly Egyptian immigrants, such losses are more pronounced for two reasons. First, they have to give up their familiar lifestyle, relationships, and roles that had permeated their daily routines and defined their lives. Second, in the last developmental stage, when age-related losses are triggered, they are concomitantly exposed to a starkly different culture with unfamiliar lifestyle and customs. For these reasons, the losses that they experience trigger an emotional response of grief and in some cases unresolved grief that lead to depression and anxiety.

The next chapter, acculturative stress, will focus on the additional layer of challenges and difficulties that augment the feelings of loss and grief among elderly Egyptian immigrants. Along with the experience of loss and grief, acculturative stress is “the other side of the same coin” with which elderly immigrants have to grapple in their adjustment to a new environment. Both themes contribute to risk factors for health and mental health distress.
CHAPTER VII: ACCULTURATIVE STRESS

Introduction

In addition to, and compounding the impact of, migratory loss and grief, immigrants come across a different environment, an unfamiliar way of life that further intensifies feelings of loss and can contribute to psychological stress and distress. The acculturation process is multidimensional, including physical, psychological, financial, and social elements. It involves lifestyle changes, including new values, roles, daily routines, family dynamics, living arrangements, socioeconomic status, norms of reciprocity, references, allegiances, and identities. The adaptive process can be very stressful for immigrants whose cultural values, normative customs, religious practices, and linguistic abilities and references are quite different from the mainstream American culture.

The transitional process and the concomitant adaptive adjustments can be more challenging for the elderly who are also adjusting to the challenges of the aging process. If not addressed, resolved, managed, or integrated, this potentially stark dissonance, at this juncture of the life cycle, can impede the psychological integrity and well-being of the individual and can contribute to health and mental health problems. A significant theme among participants is that they experienced acculturative stress. However, as shown in the previous two chapters, where push and pull factors as well as migratory loss and grief were experienced differently due to different factors, acculturative stress was also experienced differently as it varied mainly in five ways by religious affiliation, gender, the degree of family support, socioeconomic (educational) status, and marital status. The scope of acculturative stressors thus varied as they were noted more or less frequently by participants.
Sources of Stress

Cold Weather

All participants without exception reported that their struggle to adapt to the American way of life was shaped by cold weather. In the previous chapter, about migratory loss and grief, a significant loss among participants revolved around the warm, rainy, relatively short winters and hot, dry, and relatively long summers of Egypt. The other side of this equation is experiencing cold, snowy, rather gloomy and relatively longer winters and warm, humid, relatively shorter summers. Transitioning to this stark change in climate has triggered significant stress among participants.

George, of 72 years, and Antoinette, of 69 years, who lived in the city of Alexandria in an apartment by the Mediterranean Cornish, verbalized their experience with opposite sides of the climate spectrum:

George: I was in shorts in Egypt like 9 months in a year, and I had to wear a coat here 9 months in a year. It’s like coming into an ice box and expecting to live in it for the rest of your life. The cold, gloomy, weather during the winter just shatters your hopes of enjoying the day and interferes with your productivity.

Antoinette: The cold weather is one of the most stressful things I had to deal with. I can’t stand the cold weather or the snow. It increases my arthritis pain and makes me depressed. During the winter, my mood is down and I can’t function like I am used to. During my first winter here, the sun was so bright in the sky and the apartment was hot. In my naive mind, I thought that the sun was causing the apartment to be warm, not the heating system. So I felt good, and I got dressed up in light clothes, and went out for a walk around the block. After I walked a few feet, I then discovered that the temperature was so freezing cold. I told myself that this cannot be true, since in Egypt a bright sun meant warmth, so I kept walking and the further I walked, the colder I felt. I came back quickly to the apartment to take shelter. I discovered later that the bright sun was not a source of heat and it had no warmth to it whatsoever, and the warmth that I was feeling from the heating system combined with the bright sun behind closed windows gave me the mirage that it was warm outside. This was one of funniest but the most difficult and embarrassing surprises I experienced here. So I came up with a name to that phenomenon, I call it the fake sun.
Daniel and Karen, a couple, of 70 and 66 years old respectively, who lived in Cairo and have been in New York for about 3 years revealed how they felt about weather-induced stress:

Karen: My husband and I have suffered enough through the snow. This is our fourth winter and it’s really tough on us. I have a cousin who settled in California and is doing well, at least better than us, because of the warm climate. It’s difficult for us to go out on our own in the warm weather to begin with. When the weather is cold and there is snow, it becomes even more difficult and almost impossible to go out and we become stranded.

A number of participants reported that they have developed weather-related mood fluctuations. Anais, a 66-year-old female participant, described her experience with the change of seasons and how it impacted her mental health:

I think the weather affects my mood. In the summer, when the day time is longer and the sun is out, I feel fine. In the winter, I become sad. I feel down. My head feels heavy, my body feels heavy, I have no energy, I am prone to be emotional and reactive to things I am not usually upset about. I don’t feel good when it’s cloudy and gloomy outside. I feel the worst when it snows for a long time or rains heavily because I feel like I am in prison and I am grounded.

Amani, of 65 years, described her struggle to manage her mood as well as her daily activities during the winter due to the cold, gloomy, weather:

I have always had difficulty with cold weather for many reasons. I rarely go out during the winter because of the cold and snow. When I have to go out, I put on layers upon layers of clothes out of fear. Inside the house, I stay in the basement because it’s the warmest part of the house. I do winter hibernation. I almost isolate myself. Even when I am nearby windows, I feel isolated when it’s gloomy. So I avoid that scene and I stay in the basement most of the time.

Language and Communication Barriers

One of the major difficulties that all participants identified is the language and communication barriers. This skill that most native speakers of any language take for granted becomes a salient barrier for immigrants that reinforce their sense of difference, exclusion, low self-esteem, and inadequacy. Not speaking the language is only part of the problem that immigrants face. It is also not understanding the culturally and context-laden idioms and
expressions that further complicates effective communication. All participants felt that understanding the language and the contextual meaning of expressions was a critical factor that contributed to their stress of acculturation. They felt that while educational and professional achievement is an important factor in accessing the job market, lacking language competence makes it difficult for any professional to do so. Language competence may not only be a mediating variable but the principal initial barrier confronting all immigrants.

Daniel and Karen, a couple who were medical doctors in Egypt and received their professional instruction in English, discussed their unique experience with the language barrier:

Karen: We understand some English and we are fluent enough in medical terms. Our language proficiency varies at different times and according to the kind of conversation we’re having. If the conversation is related to medical issues and our specialty, we engage easily and communicate freely. But if the conversation is about common issues, we feel frustrated because our level of fluency changes according to the subject matter. The closer the conversation is to medical issues, the more comfortable and fluent we are.

Daniel: There are other communication issues . . . more subtle matters that create misunderstandings . . . In Egypt, when you meet someone, the polite thing to say is hi, how do you do? When someone extends greeting to another person, he wants to talk to you. But here they say hi how you doing in one sentence and do not wait for an answer and go past you, so that’s weird and embarrassing, especially when you start telling them about how you really feel in elaborative ways and they just leave you talking to yourself.

George, a 72-year-old former accountant in Egypt, reported similar frustrations about how the language barrier negatively impacted him in different ways:

I did not speak English . . . we did not have the language [proficiency] to resume practicing our professions here. I did not understand people around me. I did not understand the American accent or slangs and expressions, especially when people spoke quickly. I said excuse me several times to grasp what they were saying. Once somebody asked me something I did not understand, I responded by saying that I am Egyptian. I meant to say that I had just come from Egypt and have not been able to learn the language yet but couldn’t verbally express this set of complex ideas. So everybody laughed at me. I felt humiliated, embarrassed, ashamed, defeated, and just kept to myself.
How language and communication barriers interact with aging and augment acculturative stress. A number of participants described how the intricacies of language barriers interact with older age and how they both played a role in not being able to land a job. Language barriers for those participants compacted by their “aged look” in many instances “immensely reduced” their “competitive chances of landing a job.” It also curtailed their “interactions with English speakers around them,” and reduced “their chances of networking,” which reinforced their role loss and the concomitant feelings of exclusion, loneliness, inadequacy, and lack of usefulness. This experience ties into aging theories that describe older age in terms of disengagement vis-a-vis activity or continuity. In this case, those participants voiced their desire to remain active and were motivated to continue some semblance of their daily routine, whether by finding a job and being productive or by being engaged in a civic group. However, the lack of language ability, along with their aged status, forced disengagement upon them. This situation is illustrated quite fluently by Arthur, a 70-year-old male participant:

My lack of English proficiency was another factor that interacted with my old age to my disadvantage. I think when employers saw that I have white hair and I am in my older age and did not speak much English; they just refrained from reviewing my credentials or qualifications. I went to employment agencies and I filled out applications. But nobody returned my calls. So I don’t have access to the job market because I don’t have a competitive edge. The language skill is a basic precursor to participation in any kind of relationship . . . and then when you look older; it’s even more problematic for that involvement to happen.

A number of other participants described their experiences of how the language barrier played a key role in their interpersonal relationships and self-esteem. Antoinette, a 69-year-old former teacher, narrated her experience:

I can’t deal with people who speak English. Even though I am capable of basic conversations, if I encounter them and they try to contact me or have a conversation with me, I apologize and tell them that I don’t speak English. I am often embarrassed by this. I feel ashamed. I used to engage in highly sophisticated conversations in Egypt. I was an educator for 40 years. I met with educators from
all over the world. Here, I lost my prestige, my stature, and my ability to conduct myself and express my thoughts and feelings by any means of sophistication. Perhaps, I am able to engage in very basic conversations, but that’s not what I want. I want to be able to share my intellect with others. It really feels humiliating and I’ve suffered from this disadvantage despite my efforts to learn English. But it really takes a very long time.

**Normative Differences**

Normative differences were identified as another source of stress among most participants. However, the scope and severity of stress and its impact on the behavior and functioning of participants varied according to such factors as religious affiliation, gender, and socioeconomic (professional and educational) status. More specifically, the Coptic group generally did not express the same pervasive and intense reactions to the differences of American values and Egyptian values as the Muslim group, who generally reported more difficulties in reconciling with, and adapting to, the norms and values of American society. Those who reported higher education and socioeconomic status from either group were prone to show more tolerance, acceptance, and adaptation to American norms and values. Similarly, male participants showed more capacity in terms of tolerating the differences in norms and values as compared to the women participants.

Notwithstanding the differences of such variables, which will be highlighted later, underlying the stress reaction was a feeling of embarrassment, awkwardness, discomfort, and concern shared among most participants. A couple, Masood of 76 years, and Mali, of 75 years, spoke about their perception of such stress.

Mali: When we sit together to watch TV, we have to prepare ourselves for embarrassment. The first time we watched a TV show with the family on the Disney Channel, we were gathered around the dining table and some show came on and it had some sexually relevant material, not explicit, but enough to make us very uncomfortable when I and Masood were among my children and grandchildren. There isn’t enough censorship even for children programs, so we for the most part limit ourselves to educational and religious channels.
Even though Masood’s body language was affirming to Mali’s account, he perceived this situation a little differently:

I am not comfortable with some of the shows that air during the day time. Some are of explicit nature and have nothing positive to contribute to who is watching them. The sexual references, nudity, and bad language could be destructive for children. I am not generalizing; I see [conservative] and modest Americans all around us. But the dress code, especially during the summer, is different from ours. But it’s a different culture from ours and we cannot expect things to go our way. This is also, I think, the cost of freedom and we have a choice to accept the things that go with our values and reject things that do not make us comfortable.

The variation in cultural shock due to normative difference and the appraisal of stress is best articulated by Khaled and Khadijah. Khaled described the progression of his experience and how he increasingly and gradually reconciled his old and new worldview, whereas Khadijah still struggled with the differences in norms:

Khaled: Everything was different. The women were different, you know more liberal, dressed in tight clothes, more sexuality; they didn’t think much of me and didn’t quite find me so impressive [laughing]. That bothered me. But after some thinking, I realized that I come from a different world and expectations. I realized that women and men relate to each other differently in the streets, in the subway, in stores . . . This did not mean better or worse but different. I see the value in it, I may not necessarily agree but it doesn’t bother me with the same degree anymore.

Khadijah, on the other hand, expressed how certain cultural norms shocked her and still impact her in unfavorable terms even though she appreciated the freedoms ingrained in the American cultural values:

Despite my appreciation for individual freedoms granted, there are things that bother me . . . people having children without getting married and not even knowing who the child belongs to . . . I had a cultural shock. Also, the way they talked, different expressions, some of them [weird], used the four-letter words a lot. I am not comfortable with that at all . . . The lack of modesty in the dress code sometimes startles me. Showing sexual things and touching in public also makes me feel uncomfortable. I still took the other way.
Other women participants described their reactions when they first came across other people from the mainstream culture and how they were dressed in the streets during the summer. Although they expected to see a different, more liberal, dress code, by virtue of their exposure to European or American media in Egypt and being from an educated, middle-class socioeconomic background, they nonetheless were surprised enough by what they saw. Even though she didn’t frame the issue as strongly as the previous example, due to her highly educated background and exposure to Western culture before coming to the United States, Amani, who is 65 years of age, still had some reaction:

I generally expected and [looked forward to experience] more liberalism in everything, including how women dress, but I was still [surprised], at the beginning, more like I was not at ease with seeing some women dressed in very low-cut, provocative clothes. I gradually adapted to that . . . I don’t wear a headscarf like many of my peers in my age group, it’s not for me, but I tend to wear conservative blouses with long sleeves even in the hot summer. So compared to these women, I felt that I was on the other side of the extreme. I didn’t expect these women to dress up like me, but I experienced embarrassing moments when I was with my son and grandchildren . . . But what bothers me is that young men, such as my grandsons, are exposed to that early on in life and that contributes to the promotion of sex and sexuality prematurely.

Another source of stress for these women is conflict with their children and grandchildren stemming from an intergenerational gap and the erosion of traditional Egyptian values. Some women across both the Muslim and Coptic groups expressed sadness due to their perceived inability to teach their values and transmit them to the younger generation.

Maya, of 72 years of age, a homemaker in Egypt who raised five children of her own, was quite vocal about her feelings:

I suffer from lenient child-rearing and parental techniques. Over here, the child does whatever she wants, and you cannot even redirect the child. This really bothers me. Honestly, I don’t like morals here. The other day, my granddaughter was arguing with me and was questioning verses from the Qur’an. She said that it was not making any sense. I almost had a heart attack and felt that my blood
pressure went up high. I said how could you question the interpretation but it
didn’t matter to her. She has no shame.

Some participants also reported that they were upset at their children’s lax attitude toward
their own children in terms of giving their grandchildren permission to watch uncensored TV
programs that include sexual content. Soraya, of 71 years of age, described how she felt:

It came to me as a shock to see my grandchildren watching TV programs that
involve sexuality. When I spoke to my son about it, he said that as long as the
children did not cross a certain line, it was fine and they were old enough to know
right from wrong. But I was upset about his reaction, lack of respect, lack of
consideration, and his [enabling] attitude. My grandchildren are in high school but
that doesn’t mean they are free to watch these senseless shows.

The majority of Coptic participants identified differences in norms as a potential source
of stress; however, they showed less of a reaction to the differences between Egyptian and
American norms and values as compared to the majority of Muslim counterparts, whose struggle
with reconciling American values and norms were more pronounced. Similarly, the majority of
Coptic participants showed more “leniencies” towards their grandchildren in terms of tolerating
their “liberal behavior” and dress code as compared to their Muslim counterparts. A Coptic
woman, Angela, described how she framed this issue.

Everything in moderation is acceptable. Too much cover up or too little is
problematic. In our culture, modesty is important but modesty translates into
different things to different people. I call out the things I don’t like when they are
extreme. Wearing a nice dress in an occasion that happens to be above the knee or
with a tank top or with high heels is acceptable. That’s fashion. But if I see my
granddaughter wearing [rather revealing] clothes and going out with her
“boyfriend” at night, that’s when I am really upset and vocal.

Even though other women were expressive of their disapproval, not all women reacted to
normative differences or intergenerational conflict with the same intensity. Many reported that
despite their disapproval with the norms and values that their grandchildren have been raised
with, they gradually accepted those differences and worked to resolve them. Anais, 66 years of age, described how she reframed the issue:

There is a difference between the way we are brought up and how [my grandchildren] are raised here. I see things that I may not like and that I may be upset about, but I am adapting to this way of life in a way. I can’t expect my grandchildren to behave like me with my values. I get upset, I don’t deny it, but I calm down when I think about the situation logically, and I accept it. When I see things wrong, I redirect them lovingly and sternly but not angrily or loudly. I am firm but not aggressive.

Some women also expressed that despite their inability to influence their grandchildren directly, they tried to demonstrate and model traditional values and mannerisms, such as attending prayer services regularly, speaking in a lower tone of voice, and dressing modestly. Both Coptic and Muslim participants reported that they often accompanied their children and grandchildren to church or Mosque to attend prayer services. Through this experience, they felt that part of their obligation was fulfilled and that they had a bond with the younger generation. This was especially true for women participants whose new role after immigration was to take care of their younger grandchildren. Through their religious involvement with their grandchildren, teaching and instilling in them religious values, they felt that they were partially successful in fulfilling their duties and responsibilities. However, this fulfillment was less pronounced in the narrative of Muslim women as they perceived their role as less influential and feared the “Americanization” of their grandchildren. This concern was echoed repeatedly throughout the interviews.

Notwithstanding their reservation about normative and cultural differences, a few participants from both the Muslim and Coptic group reported that they rather preferred the American “value system.” These participants favored critical thinking, openness, and independence to which their grandchildren are exposed through the American educational
system and society at large. The same participants also reported that their children were overly punitive with their grandchildren and unnecessarily imposed strict rules and punishments. This also triggered, to a lesser degree, conflict between those participants and their children.

Amani, a Muslim woman, for example, felt that her daughter and son-in-law were stricter than they should be with their children. This situation prompted her to intervene on behalf of her grandchildren to ask for leniencies:

I feel that children here in general are more open-minded and aware of things because of the educational system and cultural values that promote education, learning, acceptance of the other, and tolerance. I feel that my grandchildren have a sense obligation and inner motivation. They are knowledgeable, sophisticated about things, and driven to do well. They know what to do, know right from wrong. Sometimes, I ask permission from my daughter and son-in-law to play with my grandchildren and cheer them up when they are subjected to a harsh punishment, like a prolonged curfew. My daughter and son-in-law are very nice and loving . . . they work so hard for their two daughters to provide them with whatever they need. But they are mortified of the possibility that their daughters may [drift] and not maintain their [Egyptian] traditions. So they are tough and authoritarian with my grandchildren. But that’s an [overkill], so I ask them to take it easy on my grandchildren. I want to [spoil] them a little; that’s what they need.

Marlene, a Coptic woman, also seemed neutral about normative differences and implicitly gave preference to the American values and customs. She gave an example of how she perceived those differences and how they affected the relationship dynamics with her daughter and grandchildren:

Our customs are different but not necessarily better or worse. There are pros and cons to everything. Did I feel the cultural shock? Yes, moderately, did it bother me personally? Not quite. What really bother me are extremes, violence, and things in excess . . . When I think about my grandchildren, I feel that they would be better off under the [American system]. My daughter feels a little differently. Though she appreciates life here, she is not at ease with all these freedoms when it comes to her children and their [discipline] . . . she looks at things from one angle sometimes, and tends to be tough on the children . . . she’s afraid they will be out of control. At times, I disagree with her and the way she disciplines them. I tell her not to be overly restrictive with the children and look on the positive side.
Financial Constraints and Inability to Utilize Skills in the American Labor Market

Another source of acculturative stress that participants frequently reported stems from financial hardship. In the absence of an independent, solid, or steady source of income, elderly Egyptian immigrants feel constrained in their lives and at the same time feel that they have become a burden on their children. As a result, they focus on prioritizing and fulfilling their urgent needs. Participants reported different financial arrangements but the common denominator among most of them are the constraints with which they grapple.

One couple, Masood and Mali, described the intricacies of their financial status and constraints:

Masood: I rely on my daughter primarily for shelter and food and my son to buy the things I need . . . I worked as a professional engineer in Egypt, so I have a pension. But you know our pension in Egypt is so meager and I can’t have access to it here. If you convert my pension in Egyptian money to American money, it basically adds up to $170-175 a month. So I let it accumulate and at the end of the year I fly to Egypt, pay the utilities and maintenance of my apartment for the whole year and come back with the remainder and it’s no more than $500 after I pay for my flight and the apartment utilities. The $500 becomes our [pocket money] for emergencies throughout the whole year. Our daughter provides money to buy our necessities like medication co-pays, clothing, and toiletries.

Mali added that she was a little more forceful than her husband in asking for things from their daughter, but it didn’t mean that it was easy for her:

[My husband] is quiet and easily embarrassed when it comes to money. Actually, both of us are very sensitive about asking for money other than for those things. Anything beyond those items are deemed luxury items for us. But I feel suffocated because of the limitations of our finances. Our Egyptian money that we had come with 3 years ago was very modest after the currency conversion. They were all spent on settling here. We bought a little bit of furniture and necessary items and that exhausted all the money. We don’t qualify for financial help here, so we are doomed to live in the tightest way.
Another couple, Khaled and Khadijah, reported a slightly different arrangement but experienced the same exclusions and financial constraints. Khaled emphatically reported on his experience while straightening his posture:

One needs money to buy things. We don’t work. We applied for several jobs in our first two years after coming here and we were turned down constantly. Nobody was able to help us get a job. We came with a little bit of money. I sold my apartment in Egypt and collected the proceeds to pay for our flights and personal belongings . . . we are exhausted financially. So my son made an arrangement with us. He has been paying for utilities like cable TV service and electric bills and we pay rent until our little bit of the remaining savings run out and then he will take over and pay for everything. But we are still afraid of running out of the little money that’s left and that will be pretty soon. So we are limiting our spending to a great extent and to just necessities.

Khadijah added her perspective and discussed the different limitations that they both have to work with on a daily basis:

We have to do math and budget every time we need to buy something. Our spending outweighs our income 3:1. My pension is $105 and my husband’s pension is around $190. That’s almost $300 every month. We access the pension money every month from the bank’s ATM but they charge us a great deal of fees to first convert the money in Egypt and then to withdraw the money from here, besides the increasingly dwindling value of the Egyptian pound due to turmoil there. So we end up losing close to $50 every month from an already meager income. So we have $250 to cover our food and necessities of about $300 in addition to the rent of $400. So we are working with a shortage of at least $450 monthly that comes out of our savings which, if we keep digging into with the same rate, will be entirely exhausted in less than a year. So every time we need to buy an item, regardless of how cheap it is, we have to think ahead.

Maria, a 68-year-old, who applied for and acquired asylum status and received public assistance. Notwithstanding the income she received from public assistance, she reported financial difficulties while crying. Subsequent to the interview, I helped her navigate some of the available assistance that she can utilize:

My only source of income is public assistance and food stamps. The money I get from public assistance entirely pays for my rent and I am left with a few dollars to manage my affairs for the entire month. But I fall short in the middle of the month. So when I ask my daughter to help me, she refuses. I had to skip paying
the subway several times because I don’t have a Metrocard . . . I have a very small pension in Egypt that I inherited from my deceased husband that my disabled son receives. When I told my other son to send me whatever money I collected from the pension, he said that I would get around $70 a month [the equivalent of 650 Egyptian pounds in addition to the fees incurred to transfer the money] and that was nothing. He doesn’t understand that I am barely surviving financially and that $70 would make a difference for me.

It was noted that female participants, particularly widowed women, were the most vulnerable to psychological distress induced by financial insecurity. The reaction of the participants’ children, although not uniform throughout the sample but nonetheless present, often involved reluctance to provide financial help they had promised when they first sponsored their parents. For some women, this situation retriggered the lack of financial security and lack of control over their lives they had experienced with their husbands. For example, Soraya, 71 years of age, best described this scenario:

I was not able to breathe with my husband. He controlled everything and was pretty frugal in his spending habits and with the way he dealt with me financially. I lacked control over finances and over spending as he maintained control over all aspects of financial means . . . When he passed away, things changed, I became more in control, more independent, and more educated about financial matters. I felt empowered by that. When I came here, all what I just told you dissipated again as if nothing positive ever happened. So what happened? The same thing happened: no finances, no spending, no voice, and no control. Things that I acquired after years of suffering were simply lost when I came here.

For some other women, immigration to the United States translated into losing the security and protection they once had enjoyed when their husbands were alive. They felt the impact of their widowhood and concomitant changes when they immigrated to a new land with significantly fewer social networks and familiarity, whereas in Egypt their social networks, friends, and relatives mitigated this impact. This scenario also was disempowering to women who experienced it and further exacerbated their stress. Amal, 67 years of age, who was financially dependent on her husband all her life, felt the brunt of her situation after his death:
I don’t have any source of income. I was a homemaker in Egypt and never worked. My husband died and did not leave any money. He had a small business that my children inherited from him a long time ago and they work hard to manage the business and use the money to survive. My husband was my world [teary eyed]. He really took care of me in every aspect. He didn’t let me need anything. I feel like I am a fish out of water without him. I am so embarrassed to ask my daughter for money. I don’t pay for rent, food, or clothes. She buys me stuff, but they are bare necessities. When I told my husband I needed something, he would get it for me in abundance, and would triple it. I never experienced any stinginess in my life until my husband died and I moved here.

Amani, a 65-year-old well-spoken woman, used to be the head of a marketing department of a large advertising company in Egypt. She processed her experience with painful emotions while emphasizing how difficult it has been for her to live with such financial constraints and limited means:

I ran a whole department in Egypt. I was also the vice president of the company. I got paid very well. I came with some money but I have been spending from it for the past few years. I have not been able to find a job so it has depleted. Believe me, I lowered my standards, I am not looking to be a queen or run a company over here, but just to have a decent job. But I have not been fortunate enough to find such decency in any job I encountered or tried. All were low-paying, menial, jobs. If I need money, I take from my daughter or son-in-law. But I am so restricted in what I can buy so I am frugal. I am having difficulties surviving financially.

David, a 66-year-old former engineer, and his wife, Aida, a 63-year-old former health care professional, expressed their extreme frustrations about their financial situation and their inability to utilize their professional skills in the United States:

I was a civil engineer in Egypt and my wife was a nurse and lab technician so we do not know how to transfer our credentials and skills from Egypt to here. I have tried endlessly to find a job but to no avail. So we are struggling financially. I have a small pension, you know Egyptian pensions and how meager they can be [smiling sarcastically and painfully], which I save most of to pay for our tickets every year when we come here. The rest we use for our expenses for the amount of time we are here, usually 3 months.

Aida: I am not entitled to any pension since I chose to receive my pension in advance in a one-shot deal. We utilized some of this money to help out in my daughter’s wedding and we used the remainder to pay for our expenses of
relocating here 3 years ago. When we come here, we pay for our tickets. But then we have little, limited money left for our expenses and basic things. My son-in-law and daughter pay for most of our expenses for the most part.

Raef, a 72-year-old man, maintained that he was in a difficult financial position but was thankful for his son who took care of all his financial needs:

I have no income at all. I used to have a faint pension that I had received from working for a private finance company in Egypt so many years ago, but they went out of business and the pension stopped. So my son pays for everything. He used to live with me in Egypt with his wife and children. He sold my house and I let him have the money, and he used it to build his future here. I am glad that I was able to help him and now I feel he’s returning the favor. I settled with him here for the first few months then he helped me seek my own place. He’s paying for rent, cable, bills, food, and expenses.

The only exception to the varying degree of financial struggle among Egyptian elderly is a couple, Daniel and Karen, who live with their son and daughter-in-law and grandchildren. Daniel was a medical doctor in Egypt and lived in one of the Arab gulf countries for a number of years before settling with their son in Long Island:

Daniel: We have been living here permanently with our son and daughter-in-law for the past three years. We used to come here twice a year to visit briefly and then go back to [the Arab country] where we practiced. When I retired from there, I returned to Egypt and established my own business of medical supplies. But I sold the business before settling here. I have no income right now because I am retired. We worked for ourselves all these years so we don’t have a pension. If I have a good steady income, then my chances here would have been much better. It’s a matter of income. Our expenses are much. So if we have income then it can get better. But generally, we are not doing badly either. We have what can cover us for the rest of our lives and what can get us a decent house here on the Island all paid for. But my son doesn’t want to let us go and my daughter-in-law is nice.

Changes in Living Arrangements and Concomitant Changes in Roles and Relationships

The majority of elderly Egyptian immigrants are sponsored by their children through the “family reunification” immigration policy. Most of the sponsoring and travel expenses are paid for by the children. When the elderly parents arrive in the United States, most of them live with their children. This living arrangement has been reported by the majority of participants as
problematic in many ways. One of the main stressors reported by participants is the explicit and implicit restrictions and constraints imposed on them by either the norms of the household or by their own sense of guilt and demoralization for being a burden, which is the subsequent topic of focus and discussion.

Most participants revealed their struggle with having to adapt to a living arrangement that can be at times so drastically different from what they were used to in Egypt. A change in the living arrangement doesn’t only mean the change in the type of housing or the people with whom they share that space but also the resulting changes in roles, relationships, and behaviors that follow directly and indirectly. In the previous chapter, it was well noted that the loss of the often “achieved” roles, relationships, and concomitant loss of status that many participants had once enjoyed and drew upon for recognition, self-esteem, and self-image, dissipated as a result of living in a new culture that didn’t recognize the idiosyncrasies of their professional, social, and cultural credentials. This chapter highlights the other side of the coin, as it brings out the full picture of the impact of this transition in terms of the changes in the living arrangements among elderly Egyptian immigrants and the consequential changes in roles, behaviors, and relationships. It notes how such new roles and relationships are often “ascribed” and rather imposed on them as they are implanted in this new, unfamiliar, environment that augments their acculturative stress.

Many participants narrated their similar yet unique experience with having to live with significant others and the many adjustments they had to make in their roles and behaviors. David and Aida, for example, reveal the complexity of their living environment as they described how they negotiated an implicit contract with their daughter and son-in-law:

David: So the problem is that my daughter’s mother-in-law also lives with them all year long. So we usually come around her vacation time, which she uses to go to Egypt for a month or so. For example, now she happens to be in Egypt for the summer. So we have a chance to occupy her space in my daughter’s apartment . . .
Last year, we practically spent time over three different houses one month with each daughter. So we do that every year. What I am telling you was not discussed directly with my daughter and son-in-law but was learned through trial and error over the past four years. We realized our [parameters] and we have operated by such [boundaries]. We are praying to God for a little apartment, I heard about senior housing, where you pay a subsidized portion of your income. A big part of our problem besides a steady income is lack of affordable housing.

Another couple, Masood and Mali, whose main dilemma was conflict with their daughter-in-law, expressed their basic need for housing as primary at this juncture of their life. The couple was struggling with despair as they constantly moved from their daughter’s house and their son’s house every month or so. Subsequent to the interview, I educated them about the few available options and helped them to apply for senior housing by filling out applications for section 202, subsidized senior housing. Mali became emotional and teary eyed as she struggled to put her grievances into words:

Our real problem is housing. If the housing problem is resolved then food and personal needs can be met. We may eventually have to go back to Egypt because we don’t have housing [struggling with words and becoming emotional]. We are praying to God to have our own little apartment. I can’t take it anymore, it’s a nightmare. It’s depressing. The conflict with my daughter-in-law is unbearable. We are restricted in everything. I have never ever [emphatically] imagined my life to turn out to be this way during my last days.

Maria, who remarked that she was not really happy with her present dwelling which she shares with other women, reported that it was nonetheless much better than living with her daughter:

I used to live with my daughter but she started to become abusive. I became like a servant to her. All I did was to take care of my two grandchildren, cook, and clean the apartment. I decided to leave and I now share an apartment with two other ladies. I have a room and a shared bathroom. My son got me connected to this apartment, but he left me there. One of my problems is resolved. I don’t feel great about my place but I feel independent and free even though I share the apartment and the bathroom with two other ladies. What matters is that I feel good that I am able to maintain my own little space without my daughter’s interference.
George and Antoinette described their journey with the changes in their living environment and the process of finding an apartment:

We applied for senior housing. There was a very long waiting list. My son tried very hard at the beginning to get senior housing. He applied to so many places in the five boroughs and Long Island but every place he turned, there was a very long wait list. When we realized that there was no chance that we would get senior housing any time soon, we looked for an apartment with modest rent. But we could not find any below $700 a month which we could not afford. Our situation was tough. We had to leave my son’s house. We had a conflict with our daughter-in-law. We did everything you can imagine to please her but to no use. We cleaned, cooked, and protected their privacy. We took care of their two boys, we studied with them, took them to camp and to the park, and to school. Nothing we ever did pleased her. We were taking three roles, the role of the grandparent, the parent, and the maid because she relied on us too much.

Angela, a 70-year-old woman who lived with her daughter for many years before she finally decided to get her own apartment and is currently on the waiting list for section 202 subsidized senior housing, described her situation:

All I dream about and wish for is to have a little place. I live with my daughter and her husband and children, so there is no privacy. The spatial arrangement of the apartment is not conducive to privacy. All the bedrooms are situated along each other and you have to pass by each bedroom to get to the other room. We have a small bedroom that has two beds and a small mirror. It’s a building. I sleep in the living room on a thin mattress. I cannot extend my sleeping hours beyond those of my grandchildren, son-in-law or even my daughter. My son-in-law wakes up at 5:00 in the morning to go to work. So I have to be awake and ready by then no matter how late I cared for my grandchildren at night, and believe me I haven’t had enough sleep or rest for a very long time [sadly shaking her head]. My three grandchildren can be tough to deal with. My daughter originally sponsored me to be with her and care for the kids. But I didn’t know that she will leave them to me completely and work long hours like that. I give them showers, take them to school, cook for them and when they come back I take care of the two youngest ones so the oldest can have privacy to study with my daughter. I make sure that everything is organized, clean, and quiet, clothes are ironed, and food is cooked. So my daily life revolves around those tasks.

Farida avoided referring to herself or describing her situation as she discussed the issue of housing and the difficulties that seniors encounter with their relatives when they come to the United States:
Housing is the biggest problem because there are people who sometimes sleep in the mosque. Housing is the biggest problem here. Seniors should get more help. I understand younger people may not be eligible for help, but why not seniors get more assistance. I have heard sad stories, many of them in fact, and they all have the same thing in common. Seniors are not usually treated well by the hosts and they suffer in silence. There is not enough space or freedom because seniors have to abide by all the household rules and work hard to help out around the house without even getting rest or speaking up their minds about anything. The hardest part here is housing; it’s expensive. I’d love to get my own place but cannot because it’s a lot of money. I wish that I had my own subsidized apartment though. It would have been much better.

Raef reported that he told his son to find him his own place after he didn’t feel comfortable living with him and his daughter-in-law:

I am not used to this. I felt the pressure all the time. I couldn’t walk, talk, watch TV, or go to the bathroom when I wanted to. I was independent all my life. In Egypt, I did whatever I wanted in my own space. Here, in order to go to the bathroom, I have to pass by other rooms. So it’s very awkward for me. The children are also noisy so it’s difficult to be in constant anguish. I told my son that I was getting out of there whether he found me something or not. So he rushed getting an apartment for me and he’s paying for it. I took care of him all my life and I was a great father and provider and he knows it. Now it’s time to have my privacy so I can spend my last few days in peace before I pass.

Family Conflict

The main source of family conflict involves women participants having difficulties with their daughters-in-law. As previously touched upon, many women participants reported difficulties with their daughters-in-law as they had to share their living space and resources. A secondary source of conflict, which was also highlighted earlier but is less intense and less frequent among participants, is between women participants and their daughters and granddaughters. This section highlights the triggers and details of such conflict, as it is a major source of stress and distress among elderly Egyptian immigrants. For example, most participants, almost equally from both the Coptic and Muslim groups, expressed difficulties with their
daughters-in-law. Fewer participants, also almost equally from both the Muslim and Coptic groups, described a strained relationship with their daughters.

The perspective of women participants was painted largely by their own experiences as loyal and dutiful wives in Egypt who gave their husbands unconditional love and respect without necessarily being passive or submissive. Most women participants from both the Muslim and Coptic groups perceived their daughters-in-law to be the source of family conflict, as they felt that the latter instigated the conflict. These participants agreed the role of the daughter-in-law should change to accommodate their needs within reason and acknowledge them with more tolerance and respect.

Participants emotionally described the nuisances of such conflicts and their angry and resentful reaction to them. Mali, who is one among such participants, became visibly angry and emotional while describing her daughter-in-law:

My daughter-in-law is completely domineering and has no regards for me, my son, or my husband; she blatantly ignores me, avoids me, and avoids talking to me. She and I never got along. She makes up things and misconstrues my action every chance she gets. My poor son is scared of her [daughter-in-law]. He is scared of striking conflict with her and not because he’s weak but because he has no time and can’t lose attention away from his demanding job. He doesn’t want to strike conflict with her so she doesn’t hate me and my husband and tries to retaliate in [passive aggressive] ways against us when he’s not here. My son paid a heavy price for rightfully siding with us but it wasn’t wise because she put him through hell.

Hannah, who has lived with her son since she came to the United States, described her distress stemming from how the conflict with her daughter-in-law affected her son, their children, and the whole family dynamic:

One time, my son was upset with her for not respecting me as she should, she told him that she would take it on the kids if he ever reprimands her again. He was in such shock and I was in disbelief. She’s twisting his arm into submitting and keeping his eye shut to her mistreatment of us. Ever since this incident, she completely fell from my eyes. I never had respect for her again.
Male participants shared a different perspective about their relationship with their daughters-in-law. Some showed a neutral reaction and some justified the daughter-in-law’s rather intimidating or argumentative behavior. Khaled reluctantly shared his experience with family conflict. According to his wife, Khadijah, he tended to downplay things and was more forgiving than she was:

Khaled: I feel that [my daughter-in-law] wants her family to come and spend time in her house and not us, but that’s her right. She rejects us, but I understand. She’s the woman of the house. That’s her kingdom and she should have the upper hand. I may not be in agreement but that’s reality. It may not be to my liking but that was her entitlement.

Khadijah, on the other hand, was in disagreement as her facial remarks and body language cues affirmed her position. She was direct in expressing how she felt:

Khadijah: [Daughter-in-law] tells the grandchildren (8 and 6 years old) not to talk to us. They don’t greet us as we expect. She tells them not to listen to us. She is difficult and that’s why she doesn’t have friends or close people. It’s too much to deal with her. She is stingy. When we run out of a necessary item, she doesn’t replenish it for us or ask us if we need it. She comes home, she doesn’t greet us, and she runs to sleep. She tries to avoid us.

George and Antoinette also expressed their sadness about how they were treated by their daughter-in-law. While George was upset, he showed neutrality. However, Antoinette became irritable and subsequently emotional and teary eyed:

Our daughter-in-law couldn’t tolerate us for the three summer months which we used to spend over her house. She would be defensive and short-tempered just because of our presence. We did everything possible to make the environment comfortable for her. We restricted our living and movement into the basement area. We hardly shared space with her in the upper two floors of the house . . . we took care of the children, cooked, cleaned. After so many problems, we decided that this arrangement was impossible to keep.

Some women participants described a number of fighting incidents with their son and daughter-in-law when the slightest thing didn’t go their daughter-in-law’s way or when the
participants were perceived as meddling in the affairs of the household. Elizabeth, for example, reported that her son threatened to move out of the house after his wife yelled at him for not explaining “to his mother the proper protocol of drying dishes after washing them.” Elizabeth reported that this situation was triggered when she had placed the dishes on the kitchen counter towards the sink to drain as she was used to. Elizabeth stated that this was “the beginning of the end for her at her son’s house,” and one month later she was in a separate apartment of her own.

Daughters-in-law were described by the female participants as being threatened by their mothers-in-law as they suddenly found competition for the attention of their husbands. The study participants “expected” their sons to “support and protect” them but also “reasonably not side with them against their wives” because they realized that this meant “polarization of the household and grounds for potential separation.” Nonetheless, the majority of women were disappointed with the treatment of their daughters-in-law. Some were disappointed with their sons because they “expected protection and support,” and some were disappointed but excused their sons for not taking their sides due to their efforts at “keeping peace in the home,” “keeping their families intact,” or “keeping their boats floating” through diplomacy and appeasement.

To a lesser extent, some participants reported a relatively strained relationship with their daughters and attributed it to different sources. Farida was visibly in tears when she opened up about the relationship dynamics with her daughter:

I didn’t imagine in a million years that this would happen. My daughter was very hospitable at the beginning. Her husband was too. But after a while, she started changing. What’s more painful is that the mistreatment is not coming from my son-in-law, it’s coming from her. I have been devoted to care for my grandchildren but she still thinks that I am a burden. I don’t meddle in her affairs but she still thinks that I do when I make the slightest remarks.

Maria narrated her story as she was in visible distress. She was teary eyed throughout the interview. I had to stop the interview twice to address the painful emotions of rejection and
humiliation underlying her distress and to ensure that she can continue narrating her story safely.

I also had to stop the interview to let her check on her grandson whom she was babysitting.

Maria described the increasingly distant relationship with her daughter:

I applied for asylum when I came here. My daughter helped me with the paperwork and paid for some of the fees. I have been here for about two-and-half years. The first year, things were OK between me and my daughter. But things deteriorated when her husband left her. My daughter has taken her frustrations out on me. Our relationship was rocky at the beginning but was manageable, but then it got worse after her husband left. She became verbally aggressive and dismissive of everything I told her. She was depressed and left me her son to take care of while she went to work and when she came from work, she hardly interacted with him. I really had to move out when things became worse between us. I found a room in an apartment that I have shared with a couple of other elderly ladies.

Being a Burden

It is worthy to note that despite the participants’ complaints about their restrictive living arrangements and family conflicts, many participants nonetheless suffered from some sort of internalized guilt and felt they were a nuisance or a burden on their families. The same participants who reported and complained about family conflict and problematic living arrangements, as described above, also reported that they felt like such a burden on the family.

George and Antoinette, who described their frustrations with having shared space with their son and daughter-in-law in their house, they also described how their presence may have elicited conflicts:

George: We felt that we were such pressure on [my son and daughter-in-law]. Their house is pretty small. We were embarrassed because we shared their space. We had our own room. But we could feel them whisper when they communicated. We felt that they were unable to utilize their space the way they wanted. They had less privacy, a sense of being constrained.

Antoinette: My daughter-in-law did not have her space and had to share part of the house with us. But not only that, she could not feel free in her own house. She could not yell if she wanted to, she couldn’t for example dress the way she wanted to dress inside the house or just be on her own in the house and not share space with us. Our son also struggled so much with us. He tried to please us and please
her. We felt so bad for them, that it has to come to this. We eventually came to this senior apartment and we have been living here for about a year now.

David and Aida echoed similar sentiments while narrating the intricate details of their family dynamics and how they have tried to navigate the constraints imposed by their living arrangement:

We live with our daughter and her husband and two children in a 2-bedroom apartment. If we want to go to the bathroom, we have to pass by their room, so we bother them. Everything is so tight here. It’s very hard for them to live a normal life. We try to give them space as much as we can. They need space and privacy for intimacy, so we take the children and spend time at the park to help out. We feel terrible that we are interfering with their life and imposing all kinds of constraints. We are elderly; we have already lived our life. We feel that we are imposing on them, something that they don’t deserve. [Our daughter and son-in-law] are young and deserve their privacy and happiness in their own space. We are very sensitive about this and we feel embarrassed by our presence and ashamed of being an encumbrance.

Karim reported similar feelings of shame and guilt about his presence in his son’s house. He expressed regret for making the move to the United States because of this reason but it was too late for him to consider going back:

I am embarrassed sometimes. I feel that I am pressuring my son and his family to take care of my needs. I feel like dead weight. I don’t do much except maybe watch the children at times. But since I have many health issues, I cannot move well and I am usually stranded in one place in the house. My daughter-in-law is nice and takes care of me and so is my son. My grandchildren are good with me and I have no complaints. But I feel them, I am an added pressure on their house in terms of money, time, and efforts.

Marlene described her ambivalence as she compared the pros and cons of living with her daughter. She approached the conversation with a formula-like attitude as she described a cost-benefit analysis of her presence at her daughter’s house:

I help out with the kids, I watch them, teach them, feed and shower them. I enjoy their company so much. I clean the house and cook. In return, my daughter takes care of me financially and gives me shelter. It’s reciprocal and mutually beneficial to both of us. But at the end of the day, I still feel that I am a burden on her. I am not used living with anybody. In Egypt, I had my own apartment. I ordered things
by phone, food deliveries, and I had a maid that came once a week to clean. Here, I am the maid. But I am still burdening my daughter. I feel I don’t repay her enough. I feel like a stranger. When my son-in-law comes, I feel embarrassed and I run to my room. He’s very nice but nonetheless, I can’t get rid of the feeling that I owe them.

Angela, on the other hand, projected being an encumbrance on her daughter in the future as she discussed the possibilities of increasingly becoming infirm:

The whole idea about dying here and getting buried is a concern for me. In Egypt, we have our burying plot. So we planned to be buried with our ancestors. I am even afraid of dying here because I am going to be a burden on my daughter. But let’s say that this is a one-time thing, a one-time problem for my daughter. What if I become comatose? The thought of being more of a burden when I become frailer and dependent sometimes haunts me, and it makes me feel terrible.

Prejudice and Discrimination

An unchangeable characteristic of immigrants is ethnicity, religion, and color of their skin. Such characteristics may serve as assets if they are similar to that of the majority group in the host country, but where there is dissimilarity, the process of adjustment can be arduous. Most participants, whether they were from the Coptic or the Muslim group, denied experiencing prejudice or discrimination. As a matter of fact, they reported that they feel more secure here than Egypt because they were given freedom of worship and it was safer for them to go from one place to another without fear. For example, a Muslim couple, Masood and Mali, who live in Long Island, reported their positive experience:

Mali: I have never been harassed by anyone or had difficulty with anyone. When people find out that I am Egyptian, they don’t change their demeanors. I have been treated fairly and nicely. People have been really good to me . . . very courteous and helpful . . . No issues with discrimination.

Masood: Some of my neighbors are my friends. I talk to them as much as I can with my [broken] English. They are Americans. I like them so much. I never felt any discriminatory treatment. I like them so much. They are good people. They know life well [wife nodding in affirmation]. They know how to treat people. They are pleasant human beings, courteous, and good-spirited.
Raef, who lives in Brooklyn, reported that he was heartened by his positive experience in the United States with people he encountered:

I have never had problems with anyone. When people realize that I am Egyptian and Muslim, they don’t treat me differently. I have been treated well for the most part. People have been really good to me. I encountered no issues with anybody.

Maya, who lives in Brooklyn, described how she felt about being a Muslim with a conservative religious identity in the United States:

I have not been confronted with any discrimination. I wear my hijab. I had asked my daughter if I could come with the hijab or change my dress code to fit in. My daughter said to come as I was and not change a thing. So when I came and saw the freedom of religion, I was amazed. It’s almost as if I am living in Egypt. Nobody stares at me . . . American people greet and welcome me . . . The only difference is that the majority of people around me does not wear the hijab or go to the mosque every Friday. Whoever goes to temple goes on Saturday and whoever goes to church, does so on Sunday without conflict. Everybody follows their own way without being coerced, and everybody fits in and gets along fine.

Similarly, respondents from the Coptic group reported their positive experiences when they encountered people from other ethnicities or the mainstream culture. Marlene, who lives in Queens, described her experience:

The best thing here is that people who are not the same are left alone. Nobody tells me what to wear or who to worship or how to walk. People around me are pleasant and good-hearted. I have never had any problems with anyone because where I am from or what my belief is.

Mark, from the Coptic group, also reported he was received well by people with whom he interacted, where he lives in Queens, when they learned that he was from Egypt:

When people know that I am Egyptian, they become more interested [in a positive way]. I like that I am not treated differently because of where I am from or what I represent. If you are a good citizen, you are treated well. If you are a trouble-maker, then you are punished for your behaviors. This system works well.

This trend, however, has exceptions as (3) of (30) respondents reported encountering different levels of prejudice and stereotypes and were excluded on several occasions for looking
different. The (2) of (2) respondents who live in Staten Island and (1) of (5) respondents who lives in Long Island, among the “White” majority, reported experiencing prejudice and hostile reactions for wearing the hijab, the traditional Muslim dress. It is in such geographic areas, where the protective factor of the ethnic community lacks, that people are more likely to encounter resistance due to their ethnic or racial makeup. Ekbal, who wears the hijab and who lives in Staten Island, spoke about her experience:

I faced different issues of harassment over the few years I have been here. It’s happened a few times. People either give me a dirty look or talk angrily at me, especially in public places. But there was one incident where the people were very hostile and nasty. Last year, I was in a supermarket with my son and my grandchildren and I was standing on line and one of my grandchildren went wandering. So I told the cashier to excuse me for a few seconds to go look for the little one. It took me a few seconds, not more, to find him and when I went back online, there were this couple, a man and a woman, who kept yelling and cursing at me for no reason. They kept saying that I should go back to my country and I have no business being here. When I asked the cashier if I was holding the line or did something wrong, she said no, and that there was no problem. She agreed that the couple was hostile for no reason, probably because of my Middle Eastern appearance. My son was so concerned about me. And indeed, my blood pressure that night was high and I felt it in my breathing. I had a nightmare that night; I woke up in sweats . . . I felt dishonored and rejected.

Amir, who also lives in Staten Island, narrated his experience with prejudice that he encountered near his son’s apartment where he lives:

I had a couple of incidents where I was really threatened. When I first came here, I was being trained at a gas station, and a car full of teenagers or young youths in their late teens pulled up and started shouting, yelling, and cursing. They attacked the gas station. The whole thing was quick and lasted for less than a minute. But they had sticks and knives. They shouted [slurs] and threats for being an Arab . . . The other event was about a year later. I was walking in the street late at night after work and there were some guys who made fun of me. I knew that they were up to no good, so I went into a store, they followed me. They screamed that I needed to go back to my country and I was spoiling their country. The [dirty looks] I have gotten used to over the years and don’t bother me anymore.

Karim, who lives with his son in Long Island, reported that his experience with people from the mainstream American culture in general varied in many ways. He recalled positive and
negative experiences as people reportedly showed different attitudes and gestures toward him that ranged from hospitable and welcoming to disgusted and hostile. However, he particularly recalled a negative incident that had occurred with his late wife, shortly after their immigration to the United States, while they were standing next to an Islamic center based in Long Island. Karim’s wife passed away in 2011, two years after immigrating to the United States. He narrates his experience:

We went through some difficulties at the beginning. A lot of people here are quite nice and they don’t care who I am or where I am from. But others, and thank God there are fewer than those who are nice, react to my appearance. But I remember this particular situation where I was standing by the Islamic center with my wife, who wore the hijab, along with a few other people. All of a sudden, some people showed up in a car and kept cursing at her and others who were present very aggressively . . . That was scary. Also, once I was with my grandchildren and I heard somebody in the street yelling that [the children] were becoming zealots and terrorists, and made references to the Middle East being hell. Sometimes I feel that some people are not comfortable with my presence with their gestures, looks, or just their vibes and demeanors toward me. We feel it more when there are news related to the Middle East, for example an act of terrorism here or overseas, or news about war. When these events happened to me, I felt like I didn’t want to be here.

Even for some participants who denied experiencing prejudice and discrimination, their perception was inconsistent and incongruent with their reporting. The discrepancy between their perception of experiencing prejudices or discrimination was most noted in the following account given by Raef, a 72-year-old Muslim man:

I am a peaceful man so I don’t usually react to anything around me. Besides, I saw a lot in my lifetime. I witnessed wars, people starving, getting sick and dying, and many unfortunate events. After all that, nothing really threatens me unless it’s of great magnitude. So I didn’t really face the kind of incidents that would make me upset. People treat me Okay for the most part . . . I have not faced the kind of prejudice or harassment that would make me react.

Anais also reiterated similar sentiments as she denied experiencing any ill-treatment based on how she looked and her dress code, but she reported an account to the contrary:
I have not confronted prejudices here, or rather I may have but I have not noticed it. Everybody here at the building where we live is nice. Everybody keeps asking us, where are you from, and we respond from Egypt. I did not notice any negativity when we say that, people rather say that it was interesting. We live in senior housing and in a minority neighborhood so we kind of fit in. Sometimes, people look at us and whisper to each other. They avoid us. But we are not personalizing their gestures. Sometimes I hear people looking at us weird. Once, some person was upset with me for no reason. I felt that he was upset because I looked distinctly ethnic. Another time, I was with my daughter and couldn’t express myself in English. The person at the counter asked me to step aside rudely to take the next customer and I had to wait until everybody on line finished their orders. My daughter was extremely upset and kept crying afterwards. I had to relieve her. But that’s my daughter. I was not upset at all. I did not take that as something negative because I wasn’t sure that it was related to being a Muslim or Egyptian. And I was not upset because things happen and I couldn’t personalize.

In the same vein, Angela, a Coptic woman, asserted that she did not experience discrimination, prejudice, or negative gestures related to her “dark skin” and “immigrant look,” but gave an account that contradicted her assertion and then normalized it:

People here are clustered, they belong to each other. Americans have their own set of people, they don’t include me much. Because I am of a different set, color, speech, and mannerism. I don’t belong with their set, they don’t invite me in, and they don’t want me in their circle. That’s normal and understandable. I am sometimes excluded from events for whatever reason but that’s customary among any people and understandable.

Agnes, another Coptic woman, vacillated in confusion as she was trying to determine whether or not she experienced any prejudice or exclusion related to her ethnicity or appearance. She compared her experience in the United States to her experience in Egypt and framed it as follows:

People here are nice, but they are individual, it’s an individual culture, it’s not an extended family-oriented culture. So that aspect is missing. Again, people are nice, but they are not very warm and because of the individual culture, they are not prone to greet you with such warmth or invite you, especially when they may think that you are from another part of the world. I should keep my mouth shut [smiling] and be thankful. Even if I were treated differently here because of how I look, it’s nothing compared to my hard experience in Egypt. There may be certain things that I saw and didn’t like when I deal with [the mainstream] but they are a part and parcel of being a foreigner. What do I expect?! We are guests here in
their country and we should be thankful that we are accepted here in the United States among other groups.

**Aging in a New Environment Is an Additional Stressor**

Another stressor that a number of participants reported revolves around the challenges of aging in a new land. In addition to the aforementioned stressors, aging adds a layer of complexity to their situation since it increases their sense of struggle, dependence, and vulnerability. A couple, George, of 72 years of age, and his wife Antoinette, of 69 years of age, described their sentiments about aging in the United States and the unique challenges they have encountered:

George: Getting older is not easy to begin with and it’s even tougher for us because we are in a different place and working with a different health care system. In Egypt, we handled our health issues differently. Here, we can’t communicate directly with the doctors and it has to be through somebody else that can translate. We can’t make our medical appointments. We can’t transport ourselves there. We can’t follow up with our concerns, and we even have a tough time getting our medications. So we have to rely on other people, like my son, and wait until he’s available.

Antoinette: I am worried if I become disabled or totally frail, what’s going to happen? My strength is decreasing but I am able to go out with George; what’s going to happen when I become frail? Our needs and reliability on others for care will definitely increase. In Egypt, there are ways around this because of the neighbors, relatives, acquaintances, and other people from church who come to visit you and make sure you have what you need. But we don’t have such viable networks here.

Another couple, Masood, a 76-year-old man, and his wife Mali, of 75 years of age, from the Muslim group, reported similar frustrations as they discussed their medical ailments and physical disabilities:

Masood: I had an open heart surgery and I have a blood pressure condition that I have to constantly monitor. It’s worrying me because I can’t move much without a car and I have to depend on either my son or daughter to take me places. I stopped driving when I settled here because I had to take an exam and it was hard for me to pass it. I drove in Egypt for over 50 years and I had to give this up when I came here because I had to initiate the procedures for the license and prove that I am capable to drive. But in Egypt, I just renewed it automatically without having to go through any tests.
Mali: Getting older here is totally different from getting older in Egypt. It’s a different environment. I cared for my mother during her last days. She died on my bed. But I am sure this won’t happen here with my children. We will probably end up in a nursing home. The extremely fast pace of life, the big responsibilities, the way of life here make it very hard to care for your elders [looking down with sorrow].

Mark, A 76-year-old man who uses a walker and suffers from cardiovascular illness and severe arthritis, expressed his frustration at his health condition and how difficult it has been for him to manage his own affairs:

I am having a tough time getting my stuff in order. It’s not easy at all, I tell you. It takes all my day just to make one doctor’s appointment, deal with all the insurance, get my medicine, and read about my treatment options. Doing all these tasks in English and in my condition require a great deal of efforts. I can’t drive anymore because of my vision, dizziness, and heart condition, so I take Access-a-Ride or my insurance sends me an ambulette service. But sometimes I get dizzy and lethargic that I can’t do much.

Farida, a 70-year-old woman, reported on her distress induced by the demands of aging in a new environment. She described how it all started when she first came to the United States:

It’s frustrating to be in this predicament. The bottom line is that I am older and frailer. I have my health problems and I am dealing with them. I will need a walker soon. I have a problem with ambulation and walking a long distance [beyond the house parameters]. The first few months here, it was difficult for me because I didn’t have insurance. So I skipped doctors’ appointments. I had to pay cash for the first few months, until I was able to get on Medicaid. It was also difficult to deal with doctors, so it took me some time to find an Arabic-speaking doctor. All that took time, effort, and energy out of me. It’s made me depressed and anxious about my health conditions. And indeed, the lack of follow-up hindered my progress that lingered with me until now.

Maria, a 68-year-old woman who uses a rolling walker, suffers from a number of health problems, described the difficulties she faces every day:

I have many health issues. I can’t walk because of some condition in my foot [showed it to me]. You see the swelling? [looks upset]. My daughter doesn’t help me so I have to rely on myself for everything and I have to ask others to help me understand my treatment options [teary eyed]. The whole thing is so stressful and I just wish I didn’t exist anymore [stopped the interview to make an assessment of
suicidal tendencies and after ruling out suicidal ideation, the interview was resumed. I see an Egyptian doctor so she helps me tremendously. But the other doctors she refers me to do not speak Arabic so I don’t get to express myself or understand that much. I wish I was younger and more agile and have a better understanding of how the medical system here works; things would have definitely been easier for me.

After the interview was over, I spoke to Maria about mental health treatment and I provided her with different referral sources of mental health professionals who spoke Arabic. Maria reassured me that she was on some sort of psychotropic medication that her psychiatrist prescribed but she understood the need for psychotherapy and support groups. She also explained how coming to an adult day care center (which will be described in detail in the coming chapters) has been a buffer against her depression and has provided her with a great outlet for socialization and a platform to voice her issues.

It was noted that younger participants, mostly in their early and middle sixties and those who are older but more active, expressed fewer concerns about the impact of aging. Although not free from concerns, their narrative took a different tone. Marlene, a 62-year-old woman who has been in the United States for 2 years described a less intense form of stress about aging:

Thankfully, I am able to come and go. I am more or less active. I am still able to walk without assistance or devices. I can’t help but to think how things will change when I reach a certain age where I am not capable or able anymore. What will my daughter do with me? This is a lingering concern that I have. How will others see me when I am no longer able to help raise my grandchildren? How am I going to react to my uselessness? I started to increasingly reminisce about my youth years. I can’t believe I reached this age. Yesterday, I was in my thirties, how did I become in my sixties so fast? I can’t help but to be afraid to get older here because of the lack of familiarity with everything. People start their lives somewhere in their twenties or thirties, not their sixties. It’s surreal for me. If you can do something for older people here, especially people who are in my predicament, please do. We are getting older and we will need help and care.
Anais, a 66-year-old woman, reported similar sentiments about aging. Initially, her tone was filled with enthusiasm about aging in the United States. However, as the interview progressed, she showed signs of anticipatory anxiety and pessimism:

I don’t know what to tell you about my situation except how I see myself. I see myself as an older woman whose needs are increasing and increasingly becoming problematic for me and others around me. This makes me feel [pause for a few seconds], I don’t know [hesitance], afraid maybe! I constantly compare my life here to my life in Egypt, as far as getting older, there are advantages and disadvantages, and I don’t know what is better or what is worse. The medical industry here is more advanced but doctors in Egypt take their time and are more empathic. They are very smart and very intuitive; most of them are great diagnosticians but they have no technology and don’t make much money. Here, I have to do a million follow-up with so many doctors. And doctors here are so afraid to make a mistake, they are afraid to take any risks at diagnosis. They are afraid to talk to you or give you advice. They have to first rule out everything else by going through a lot of testing. It’s exhausting and depletes your energy. We’ll see what life has in store for me as I am getting older here in America. I know what happened with my parents and their situation is my reference point. So we’ll see how my older adulthood is different.

The slight exception to this trend is Karim, a 71-year-old man, who regarded his aging process in generally positive terms but asserted that aging in itself is stressful, and what makes it even more stressful is that it is happening in another country. He eloquently expressed his wise thoughts about aging through philosophical allegories:

I really like being in the United States because the way it cares for its senior citizens. I like the medical system. I can’t tell you that I have problems both because I am doing well and I get my needs met. I can’t tell you that I am depressed either like other people say because I am a senior [smiling]. As a matter of fact, I am a happy person and I am always optimistic. But there is no sense of denying that it is hard work . . . The machine needs maintenance. The human body is like a machine, like a car. When a car has a lot of mileage, it can’t operate with the same caliber as the new one, particularly if the car can’t perform well if it is made to run on a paved road of asphalt and you operate it in the desert or in hilly, bumpy road. How would the car perform? Not well I bet! The same thing applies to us, the aged from a foreign country. We have been raised with a specific system, a medical care system, whether good or bad, with certain values and norms of caregiving, with a unique heart and a family system that is bonded together and watches over the frail among them. What keeps this package together running in synchrony is the cultural elements, like [small period of
silence] the flexibility of time and not worrying to miss work for example. When I cared for my father, back home in Egypt, I had to take a lot of time off, my boss and colleagues were very understanding. Here, my son can’t even blink to do something for me without formally taking a day off or being reprimanded by his boss for having been 30 minutes late. So what do you think? Isn’t being older a tough thing on the self and on others around you?

Isolation, Loneliness, and Distress

The grief induced by the different losses in addition to acculturative stress culminated into feelings of isolation, loneliness, and distress among many participants. Being in a new environment and grappling with significant changes, many participants reported that they are often hesitant to express and share their feelings with their children, fearing they would burden them additionally with their problems. As a result, they tended to keep their feelings within themselves, internalized their sufferings in silence, and further alienated themselves from others. These dynamics often exacerbated or contributed to psychological distress and physical illness. When participants reached a high level of psychological distress and physical illness, they reevaluated their situations and looked for different measures and mechanisms of coping, which will be discussed in the chapter on coping strategies and mechanisms.

Angela, for example, described how she grew isolated from people around her due to the difficulties she endured and how that exacerbated her own sense of self-isolation, which contributed increasingly to her psychological distress:

I didn’t meet people often and I didn’t speak English to put myself out there to meet people. Day after day, I felt excluded and withdrawn. I live with my daughter and she works six days a week, and when she comes from work, she hardly goes out. I found myself stranded between four walls and no way out. I have been forced to be lonely, not by choice. I felt depressed. I was hardly able to move and when I forced myself, I cried. So I was constantly working around the house while I was crying and irritable.

Maria described her physical symptoms of psychological distress as she narrated her sense of isolation and withdrawal and what they meant to her:
I feel sad all the time. I have no energy and my feet don’t [carry me]. I can’t do much around to help out. I feel as if my body has a huge rock on top of it and I can’t move. I have no one to visit me here. I want to go out and feel free, enjoy myself, and help myself, but I don’t have what I need to do that. I feel so squeezed and lonely. I don’t know how to travel, how to speak to people around me, I don’t know how to negotiate the prices. I don’t know how to manage my affairs. Everything around me is closed.

Marital status has been a mediating variable in isolation and loneliness. The dynamics of isolation and loneliness took a different form and meaning for this couple, David and Aida, whose togetherness and interactive communication mitigated their sense of alienation.

David: We feel alone. We are withdrawn but not by choice, but because of the situation we are in. There are factors that decide where we can venture to.

Aida: but we have been relying on each other and have been one another’s source of solace. We have been each other’s shadows. It would have been much harder for me if David wasn’t here. He makes me look at things differently and always cheer me up when I am down.

David: [smiling] And she’s more courageous and outgoing than me. She walks a longer distance around our neighborhood to explore, goes into different stores, and talks to people and ask them what she needs, in her basic language. She taught me to overcome my shyness. She tries to initiate and develop communication with other people and my presence helps her. We provide each other with support and encouragement.

Summary

Compounding the impact of loss and consequential grief triggered by leaving the tangible and intangible, long-standing, and deep-rooted familiarities among elderly Egyptian immigrants, additional layers of adjustment induced by the transition to a new environment exacerbate different reactions of stress and distress among them. Acculturative stress was a common denominator among all participants but was experienced differentially due to their different religious backgrounds, socioeconomic and educational status, gender, marital support, and family support. For example, a substantial amount of participants reported the following acculturative stressors: cold weather, language barriers and communication difficulties,
normative differences, financial constraints, new living arrangements, new roles and relationships, family conflict, feeling like a burden on others, prejudice and discrimination, feeling isolated and lonely, and aging in a new environment. However, the scope of these stressors varied in pervasiveness among participants as they were reported more or less frequently. By the same token, the intensity of these stressors has varied among participants from concerns and challenges to sources of psychological distress and physical ailments.

Elderly Egyptian immigrants, as shown by the findings, have many disadvantages as they are exposed to a “triple edge of exclusion and self-isolation” by virtue of being aged immigrants from the Middle-East who, at times, live within unreceptive home environments and inhospitable living arrangements. Due to the lack of language and communication skills and foreign credentials that cannot be translated and utilized readily in the American labor market, they don’t have the tools by which to integrate into the American mainstream as compared to their elderly American counterparts. Due to their advanced age and health-related issues, their aspirations and priorities take on more of a subsistence mode and thus are modestly different as compared to their younger immigrant counterparts. In addition, they are distinctly different from the mainstream and other immigrant groups, such as European or English-speaking immigrants, in terms of their appearances, skin color, dress code, mannerisms, customs and traditions, cultural norms and references, language, and religious beliefs (more in the case of Muslims), which at times precipitate negative, prejudicial, or discriminatory reactions from “others.”

Additionally, one of the most problematic, and often subtle, aspects of acculturative stress was the fact that there is a cultural and religious imperative for both Muslims and Copts alike: that parents are to be respected and honored. However, elderly Egyptians have to grapple with the sad reality that their experience and wisdom often are not valued, as they are not
allowed to share their opinion or be consulted for advice. In Egypt, elders enjoy being at the top of the hierarchy of the family system as they have power, prestige, and respect, and they are usually in control of the money and decision-making. In the United States, however, many disadvantages—such as lacking the ability to understand and communicate in English, lacking the ability to apply their professional skills or be productive in the labor market, lacking the ability to generate money and a source of income, and lacking the knowledge of the cultural dynamics and norms, in addition to their dependence on others to meet their basic needs and address health issues—tremendously diminish their power, voice, and ability to influence any decision-making within the family system and their home environment where they live with their children and families.

To their dismay, the life of elderly Egyptian is impacted tremendously by the needs and issues of the family that host them. As a result, they become surrogate parents to their grandchildren whose primary role is to address the latter’s needs. These drastic changes in norms, roles, and relationships, the feeling of not being valued, of being rejected and excluded where they live—due to problematic family dynamics and inhospitable living arrangements—are reinforced by their sense of exclusion from the America mainstream and are solidified by their sense of marginalization due to aging. All such compounding stress factors increase their internal mechanisms of withdrawal, self-isolation, shame, and guilt, and exacerbate their risk of physical ailments and psychological distress.
CHAPTER VIII: OPPORTUNITIES

Introduction

An integral part of the immigration experience among elderly Egyptian immigrants is the opportunities they have in the United States. Without this part of the experience, their story is incomplete. The process of identifying and exploring opportunities and positive encounters among participants varied with the participants. Some participants found it rather difficult to identify and discuss the positive elements of their immigration experience either because they were experiencing difficulties at the time of the interviews (i.e., financial struggles or family conflict) or because they were fixated on the negative aspects of their experience. This was particularly apparent among participants with the most intense sense of loss, grief, and acculturative stress.

Other participants found it relatively easy to identify and discuss opportunities and positive experiences. The discussion flowed naturally as the interview progressed. This was particularly apparent among many participants from the Coptic group whose pre-immigration living conditions were characterized by harassment and discrimination, and which equipped them with an urgent drive to emigrate out of Egypt and settle in United States. Notwithstanding migratory loss and grief and acculturative stress, such a chaotic and oppressive pre-immigration context that most Coptic participants had experienced has set the stage for the opportunities that the United States offers to stand out in contrast.

Other variables also played a role in how participants from both groups were able to recognize and incorporate opportunities in their daily routines to enhance their lifestyle. Thus, the perception of opportunities generally was shaped by the previously discussed contextual factors: religious background, socioeconomic status, gender, family support, and marital status.
Basic Freedoms

“Freedom” afforded to people living in the United States was a key and deeply appreciated opportunity. Most participants, from both Coptic and Muslim groups, referenced freedom as an opportunity. However, the meaning of freedom varied according to their respective life experience and perception. For example, some participants framed freedom in terms of women’s rights, comparing the freedom that US women enjoyed to the relative oppressive conditions imposed on Egyptian women. A 70-year-old Muslim woman, Farida, compared the status of women in the United States to their counterparts in the Arab world:

One of the most difficult and most problematic aspects for women in the Arab world is freedom. Women in the Arab world have been oppressed to an extent. There are exceptions, and many of them, in certain circles. But the rule is still the same because of the cultural, gender, and power dynamics that favor men and are reinforced through selective religious [decrees], outdated laws, and [blind] traditions. I appreciate the freedom granted to me by virtue of living here. Women have rights [enthusiastic tone of voice and gestures]. They have power, they have voice, they have financial independence, they have a saying, they have a [feisty] attitude backed up by societal and moral rules and reinforced by laws.

Amani, a 65-year-old Muslim woman who used to be the head of her marketing department in Egypt, framed freedom for women in the United States as having choices and not being obliged to conform to prescribed cultural mores that are imposed on women in Egypt:

Nothing really overcomes the relative sense of freedom that we [as women] enjoy here. I was among one of the few women in Egypt who never covered their head with a hijab or a headscarf. Besides the fact that I didn’t like to cover my hair, the idea was imposed on me so forcefully and it wasn’t for me. That’s not how you show modesty. Modesty is not by dress code or dress code alone . . . it’s by how you relate to others and treat them, and how you refrain from certain behaviors. Women in Egypt have to conform and if they don’t, they tend to lose their reputation. I value the freedom of choice that we have here. You’d be surprised, this is also the trend here in certain circles . . . If a woman doesn’t wear a hijab, she may be looked down on or excluded. She may not find work easily or be able to make friends easily within the religious community. The difference is that in America, we are not restricted to associate with people from our ethnic group only; it’s an open society. So Arab women have the choice not to conform to their subculture at the expense of perhaps not fitting into their own subculture, but at
least they have society at large and many other niches to fit into. That’s what I mean by freedom, you have more of a choice and you don’t have to conform. As much as it’s a cliché, it’s true and I value it, freedom is great.

Similarly, Marlene, a 62-year-old Coptic woman, touched upon the issue of women’s rights but framed them in terms of freedom of thinking and self-expression that, she concluded, precedes freedom of choice and actions and their impact on women’s self-image, self-esteem, and mental health:

I am joyous to [be exposed] to something that was missing from my life even if it is late in my life. I would have wanted to be here a long time ago [looking at interviewer with a stern face]. I would have fared better in every aspect of my life and the choices that I made. The freedom of choice, the freedom to marry, to choose a partner or not, not to marry, to be, but more importantly, as a precursor to these actions, having the freedom to think, to talk, and to express such thoughts and such needs, to express thoughts, feelings, needs about things like sexual feelings, choosing reproductive rights, and so on. In Egypt, good luck to you [smiling sarcastically], a lot of women struggle and their struggles are futile if they exist in traditional households with no way out. Do you know what such freedoms do to your [self-image]? It’s a world of a difference in how you see yourself, how you experience your relationship with others and the world.

To some women, freedom meant the opportunity to protect the private sphere of their life, which included freedom from having to always explain oneself to others, freedom from regular scrutiny and harsh criticisms of neighbors, and freedom from having to conform to one rigid set of norms. Khadijah, a 66-year-old Muslim woman, shared her intellectual standpoint:

Everybody here is minding their own business and they focus on their own aspirations. I like that. Nobody criticizes you. You can live however you want. In Egypt, it’s hard to live without worrying about how you would be perceived by your next-door neighbor or people in your neighborhood or even society. It’s sometimes suffocating. Everybody is there to see what you are doing and know your business and they can talk about you in a way that can harm you. So you have to conform to what society wants . . . traditions, norms, values, sometimes without critical thinking and sometimes you do it to avoid trouble. Although this is an individualistic culture, it’s also a freedom culture. Sometimes I can’t help to think that individualism is good too. It has its down sides for sure. I mean it can be selfish and indifferent to be individualistic but it can be liberating and fulfilling. In Egypt, we are more collective and family oriented. So we are selfless, warm, caring but we lack fulfillment, freedom of choice, and at times
critical thinking. What I tended to reject throughout my life turned out to be [advantageously] liberating for the most part.

**Freedom of Religion**

Most Coptic and Muslim participants reported enjoying freedom of religion in the United States. Most Coptic participants perceived freedom as the ability to assert their Christian identity marked by the opportunity to worship in peace and without coercion, to wear Christian symbols freely—such as a Cross with impunity—and to express their religious views without fear or repercussions. A Coptic couple, David, a 66-year-old man, and Aida, a 63-year-old woman, gave an extensive account about how they feel about the advantages they perceive in the United States, and they started their praise with how they feel about the concept of religious freedom:

Aida: I love the fact that I can walk to church without having internal fear. This by itself is a great gift and blessing. You have no idea about the suffering, the terror, the fear, the angst that we went through in Egypt [speaking emphatically]. I can go to church any time I want here [smiling]. I can walk to church dressed in whatever I want. I can wear a cross [smiling with pride]. I don’t have to be in long sleeves, like in Egypt. I don’t have to worry about rude comments that I am an infidel because my hair is not covered. I love the fact that I don’t get harassed because I am Christian and because I am a woman, which is a tough thing to be in Egypt [pause]. It’s tough to be a Christian and tough to be a woman, it’s tough to be both, believe me [teary eyed].

David: I agree with that completely [nodding in affirmation]. This is the number one advantage of being here. You are left alone to worship the way you want. This is good for your well-being and peace of mind [mental health]. I was worried about that during my last few months in Egypt. Things became scary and totally chaotic for Christians. I am thankful for the safety that we have here [smiling]. We are not taking freedom of religion for granted [serious face]. We went through such tough times in our life so when we have something of value, we can identify it, we name it, we know it [intuitively], and we cherish it and thank God for it.

The concept of freedom for Marlene, a 62-year-old asylum seeker who has been in the United States for a little over 2 years, meant tolerance in general but religious tolerance in particular. As she shared the meaning of freedom embedded in her experience, she became
emotional and teary eyed a number of times during the interview, and I had to pause several times to address her feelings:

There are many advantages of living in America, the most outstanding of which is freedom, and in particular freedom of religion. I am grateful to the peace we have here as Christians and the tolerance to worship and go to church [teary eyed and wiping tears with a handkerchief]. This atmosphere actually reminded me of Egypt in the 1960s and 1970s to a great extent when there was tolerance and co-existence. It makes me nostalgic to these days . . . There are of course some downsides and disadvantages to freedom when it becomes extreme and misused. But when you are given freedom, you have a choice to elect your own freedom to suit your needs. But when you are not given freedom, you have no choice because you have to abide by that one way, and that one way is often abusive and oppressive because you can’t opt out of it. In Egypt, we don’t have that choice at the time being [helpless tone] . . . because things are imposed on us [emotional]. In here, we actually have the freedom of choice. So you can choose to be conservative, liberal, or any mix of both as you wish. Thank God for this country and the protection it affords us [at this point, she looked down and started crying, and as a result the interview was paused].

Agnes, a 65-year-old woman who had been granted asylum 2 years ago, and who had been active in church activities and involved in charity work for the poor and orphaned in Egypt, shared her experience surrounding the opportunities of religious service that exist for her in the United States:

I am most grateful to God for granting me such peace and blessings. I am finally settled in the United States, and I am grateful to be able to practice my Christianity without fear or persecution. This is indeed a different world with all the chances that religious organizations and charity work offer people. It’s amazing. People are free to do whatever they want. They can preach in public. They can help others in public. They can do fund raising to help the poor and disadvantaged. They can speak up for them and be their voice. I am now able to do that kind of work through such freedoms, thankfully.

Martin, a 68-year-old Coptic man, a former philosophy professor in Egypt, touched upon his views of opportunities embedded in such freedoms, but framed them in terms of human rights. At some point in the past, which Martin did not feel comfortable disclosing, he was involved in organizations for human, political, and religious rights in Egypt:
Freedom of speech, expression, religion and dress code are most remarkable. I personally enjoy that the most. I am different from people around me who tend not to appreciate that as much. I will share something interesting with you. I always dreamt of coming to the United States when I was in my youth to enjoy such freedoms but never had the chance. It’s ironic that I came here in almost my seventies, but it’s better late than never [smiling]. As a Copt who personally experienced outright discrimination for my religious identity. And as a person who witnessed other identity groups experiencing discrimination, exclusion, even assaults, whether women, gays, Bahais who are voiceless and whose identities are not even acknowledged on their identity cards, and Jews who had once been a thriving community and happened to be my neighbors and close friends in the 1960s and many of whom left Egypt under duress. And through my involvement in human rights, women’s rights, and minorities’ rights, I can tell you with confidence, all else and all reservations aside, that I truly appreciate this country.

Antoinette, a 69-year-old woman who experienced the bombing of the Two Saints Church on New Year’s Eve of 2011, framed the opportunities that she experienced in terms of being able to go to church during the Christian holidays, during Christmas Eve, Easter Eve, and New Year’s Eve, without fear of terror:

I am from Alexandria and my residence was a few blocks away from the Two Saints Church that was bombed in New Year’s Eve. I heard a loud voice that night and heard a lot of screaming, yelling, and ambulance sirens, and later learned of the bombing and the loss of lives. Later that year, my daughter was heading home after her work bus dropped her off by her residence and two guys on a motorcycle sped towards her. One guy grabbed her long hair and cut it with a knife while the other grabbed her bag and snatched it from her. She held on to the bag and was dragged throughout the whole block until she let go of it. She was easily identified as a Christian because her hair was not covered and was wearing a small crucifix. Thankfully she survived with just abrasions and broken leg. She’s now living in Canada. These are two incidents of trauma in the classic sense, pure and simple. Every time I go to church at midnight to celebrate, I remember these horrific incidents. Different parts of me get triggered. But there is that peaceful feeling that overwhelms me at some point because I am far away from that. I appreciate the safety and the peace . . . The peace to live with my identity without hiding . . . and without worrying is priceless.

Most Muslim participants also mentioned freedom of religion as an unforeseen advantage they had not expected. Freedom of religion to Muslim women meant the opportunity to wear
their traditional dress, such as the hijab, and to go to mosque to worship without difficulty. For example, Soraya, a 71-year-old veiled woman, shared her experience with enthusiasm:

One of the fears that I had before I came here was how I was going to be perceived with my tradition and dress [head scarf]. My daughter said to just come the way I was and not change a thing, so I did, and I was amazed. I am able to walk in the street carrying my identity seamlessly and without problematic repercussions! I am grateful to that. People take this for granted, but as I think about it, this is primarily a [Christian] country, and we [Muslims] are allowed to be ourselves, go the mosque whenever we please, worship, have gatherings, build mosques, speak out. This is a very good thing.

A 76-year-old Muslim man, Masood, framed freedom of religion in terms of human and constitutional rights. He explained that he appreciated religious freedom granted in the Constitution and backed by social values that further promoted it among citizens:

How could people from all over the world co-exist in one country and each knows their boundaries, because there are constitutional rights and laws that protect such freedoms. But there is something beyond that called ethical standards and moral values that promote and further protect freedoms. In the Middle East, people from different backgrounds have trouble co-existing. The freedom that minorities have here is remarkable. I hear negative things around me about how we [as Muslims] suffer from discrimination. While this may be true to some, this has not been my experience or the experience of most people around me. In fact, I believe we are treated very well. I see the cup half full, as they say [smiling]. There is no utopia on earth and regardless of the negatives and faults, whether it exists in foreign policy or local policy or history, one fact remains, at the present time, this country gives its citizens freedom and promotes their rights, and it does so in better ways than our part of the world [referring to Arab countries].

Availability of Services

Access to Health Care

Participants also identified the availability of services as important opportunities. A large number of participants were grateful for receiving medical services. Notwithstanding some of the difficulties accessing medical services, most appreciated the opportunity to see a doctor of their choice, especially one who speaks Arabic, and the low Medicaid copay. Karim, a 71-year-old
man who was diagnosed with cancer at some point, described his positive experience with the health care system and with receiving the urgent treatment he needed:

> There was no way I could have paid for all these medical appointments and follow-ups if I didn’t have health insurance. I suffered at the beginning because my son didn’t know if I qualified. But I was approved and with little co-pay. Even when it’s hard to pay that co-pay, it’s great to have insurance. It has saved my life. I have been under treatment for some time for cancer. I am doing well now. With health insurance, you can catch diseases early and treat them. In Egypt, I used to go to medical appointments or check into the hospital only when I felt really sick. So I probably would never have detected my tumor if I was there. So I am grateful for that kind of care that I have received.

In the same vein, a couple, George, of 72 years of age, and Antoinette, of 69 years of age, also appreciated access to Medicaid. They both described how they received necessary treatment they would not have otherwise received in Egypt due to the lack of health insurance:

> George: I consider myself lucky for many reasons. I am lucky because I found out about my prostate cancer condition on time because of all the testing and follow-ups I went through when my doctor suspected that something wasn’t right and sent me to specialists. I am lucky because I have the tools to receive treatment for my condition. I have health insurance that pays for radiation and hormone shots. I have great doctors who are dedicated and caring.

> Antoinette: Because I have had Medicaid, I was able to go for mammograms and conduct the necessary follow-ups on my condition. I also received follow-ups on my brain tumor that had been detected through MRI. I received physical therapy after I had Bell’s palsy. The insurance has also paid for our medications, which is very important for us to have because of our blood pressure and diabetes. We appreciate these medical services without which we would not maintain our present health status.

**Access to Material Goods**

The abundance of material goods is ranked high among opportunities, especially compared to the life difficulties experienced by some participants in Egypt following the Egyptian revolution and near collapse of the economy. A couple, Khaled and Khadijah, who settled in the United States a few months after the Egyptian revolution explained:
Khaled: It’s amazing the kind of goods you have here. You can find anything you want. There is no scarcity of products. I can get Egyptian food from nearby store. Anything you can think of. We never have power outages here, except if it was a big emergency. In Egypt, it’s almost a weekly occurrence. And it interrupts your life. I love Home Depot, Costco, and that other big store [Walmart]. I may not be able to buy whatever I want due to financial constraints, but the experience of it all gives you a feeling of abundance. We end up budgeting and getting those items we need.

Khadijah, on the other hand, was more impressed with the idea of sale items. She has learned to keep a keen eye and collect coupons. She is quite amazed at the bargains she can obtain on the main street of her neighborhood in Queens:

I like to go to supermarkets when they have sale. I get me weekly groceries from the supermarkets. With our meager income, we have to budget and look for bargains. In Egypt, we don’t have sale, we don’t have much bargains, and we don’t have a return policy. Once you buy something, you are stuck with it. I also like to go to Rite Aid and get my other stuff from there. They have good deals that fit our budget and needs.

In the same vein, Anais described how thrilled she has been about shopping for accessible items that were so scarce or expensive in Egypt and difficult to obtain:

In Egypt, I spent all my money on needs. Due to inflated prices and scarcity of certain items in Egypt, it’s difficult to buy certain items that here people take for granted. As a simple example, any name brand cereal that is accessible here for, let’s say, three dollars. In Egypt, the same cereal cost about between thirty-five to fifty Egyptian pounds, which is out of the budget of many families. Many other items of different sorts are similarly inexpensive in the US and are within the budget range of families with modest incomes.

A couple, Masood and Mali, discussed their experience with living through tough economic times in Egypt after the revolution and experiencing the total opposite when they came to the United States:

Masood and Mali interchangeably: The consumer culture in the US is amazing. Compared to Egypt and other countries where poverty is rampant and where a family of four lives on four dollars a day, America offers enormous advantages even when we can’t buy what we want. The mere experience of this phenomenon, of seeing the enormity of spending, of how huge and fully stacked different markets are, and the variety of items are in themselves quite a spectacle. With our
limited means, and with the help of our children, we are able to experience things and sometimes buy things of better quality than what we had in Egypt.

Those participants who are from a higher socioeconomic background or who have a steady income reported a slightly different experience from those who have financial constraints. For example, Daniel and Karen, who were medical professionals and who worked in the Arab Gulf region for a number of years where Daniel practiced as a doctor, reported access to a wider variety of products, goods and services than those with more limited financial means. Daniel, who is the only participant in the study who owned and drove a car in the United States, discussed his experience:

There is no comparison between what we live by here and what we lived by in Egypt. Everything here is within reach and most of these items are very affordable, relatively cheaper and at times much cheaper than Egypt. I can give you different examples but let me just tell you that I bought my car for less than half of what I would have paid for in Egypt. By the way, when I settled here, I bought the same model, make, condition that I had in Egypt because I am comfortable with it, so I am not speaking hypothetically, I am telling you actual figures. I paid less than half of what I had paid for it in Egypt. Apply this concept onto a lot of items, especially electronic items, computers, printers, washing machines, clothing, etc.

The only two participants in the study who received Social Security Income (SSI) and food stamps also discussed the opportunities offered to them through such benefits and entitlements. The first is Mark, a 76-year-old man who has been in the United States for almost 10 years and acquired his citizenship two years ago. He has been in receipt of Social Security Income and food stamps for almost 1 year. Mark described his experience:

I was really struggling before receiving my benefits in many different ways. I relied on my children for everything . . . food, housing, personal expenses. The bottom line is that those benefits saved my life and saved my face among my children because I don’t have to rely on them. I wish I came younger and didn’t have to rely on benefits. I worked a little bit here and there when I came and just collected a few credits. After that, so many things happened to me, health issues, the business I worked for closed and the owner went overseas . . . The money I get pays for my rent, which is one third of my income; food stamps help me buy
food. I have Meals on Wheels which is good, regardless of what other people think. I also have Medicaid. I am very thankful for all these benefits. I wouldn’t have survived without them.

Elizabeth, a 69-year-old woman who has been in the United States for about 8 years and who acquired her citizenship almost 2 years ago and received social welfare benefits, narrated her experience:

I worked for the school system as a bus matron and to organize traffic for school children for a few years, but I didn’t qualify for retirement benefits, Social Security, or a pension. It’s such a difficult job in the cold weather to be outside. I wasn’t able to transfer to another job in the school system, so I retired. When I applied for Social Security retirement, I didn’t qualify so I received Social Security Income. Now, I am surviving on SSI and food stamps for the most part. Without these benefits, I would have to rely on charity to survive from family members and others to survive. So they are a life line for me, and they enable me to buy the things I need.

Access to Social and Senior Services

Participants who were under severe financial constraints had fewer opportunities to report. Yet a number of participants in this group saw a silver lining in their situation. A couple, George and Antoinette, who are on limited income based on their meager pensions from Egypt, described how they are still able to utilize certain services:

George: When we feel we can walk, we at times go to the senior center nearby and have a meal for little money, and enjoy the togetherness of others.

Antoinette: In the building here, we have some activities. The social worker sometimes invites us to join their activities in the entertainment room, and sometimes we go. We really can’t mingle with other people that much because of our language issues, but we go where there is an occasion or event. We are invited for Thanksgiving gathering where they serve good food, so we are going there. We went last year and it was fun.

Other participants identified social and senior services as particularly beneficial. This opportunity provided by the adult day care center was identified among most of the participants who lived in the borough of Brooklyn and had accessibility to the program. The interviewers
were invited by some participants and made a one-time visit to the adult care center to briefly observe the setting and arrangement of services that were offered to seniors in the community.

Ekbal, a 68-year-old woman who attended the adult day care center 3 days per week, spoke about her positive experience:

I like coming to the adult care center. It makes me feel better. I do activities; I get to mingle with other people. I do not speak English and seeing all these Arabic-speaking members is quite nice. I love the socialization with others.

Elizabeth, who had been going to the adult care center for about a year, described the benefits she derived from going there on a regular basis:

I have formed many relationships here. We have almost become one family. We look after each other. Many of the people here are in my age range, so we partake in activities together, and we share our similar experiences with our family, especially the challenges, and we act as support to one another.

Arthur, a 70-year-old man who had attended the adult day care center for a few months, described how attending the center has boosted his morale:

The atmosphere here is quite nice. We get to have fun and socialize with others who share their stories with us. It makes me occupied in a positive way. I love it here because it makes the day goes by and we have fun. What’s important is that I get to talk to people who are seniors like me and who speak Arabic. It’s refreshing and makes me feel good about myself.

Maya, who just joined the adult day care center a few weeks earlier, also spoke about how joining the center made her deal with stress differently. She emphasized the role of the activities in keeping her mind thinking actively:

I get to express myself in Arabic when I come here, and I do activities in my native tongue. I exchange information, courtesies, and news with other men and women here. It’s a nice way to socialize but it also keeps my brain working, sharply thinking . . . positively occupied.

Other members, such as Agnes, reported that the opportunities afforded to the center’s attendees goes beyond socialization, meals, and entertainment:
This is a good place to be . . . they provide me with transportation and help me see my doctor. I don’t have to worry about going to doctors and I don’t have to worry about burdening my children with taking me to the doctors.

Mark also described his perspective about attending the day care center and the different advantages it offers, as he reminisced about his friends that he had left behind in Egypt:

I get to socialize with people that come here regularly. It reminds me of the social club that I used to attend in Egypt and the ambiance that I miss. It’s not quite the same, the ambiance can’t be replicated . . . but it’s the closest I have experienced to Egypt’s so far. This is good place to connect with people but also with services and products. There is a social worker on-site that help us with all kinds of benefits. It’s both entertaining and beneficial.

Angela, a 70-year-old woman, was introduced to the interviewers as the longest in attendance of the adult day care center among the Arabic-speaking group and the most experienced about the services that it had to offer. She discussed in detail what it meant to be a member. Angela discussed the variety of services offered and how they help the Arabic-speaking group cope with stressors through engaging in entertaining, educational, and constructive activities while receiving certain services on-site, and receiving rides to their health care providers:

Think about coming here as a one-stop shop. This place is great in that it provides many services in one package. It provides socialization, a variety of activities, entertainment, education, trips, meals, and health care monitoring. Members are monitored for health-care related services. There is also a social worker that helps with benefits and entitlements, and scheduling medical appointments. We also have meals and parties. We have different speakers about different issues of concern to seniors. We have transportation, a van comes and picks us up and transports us back to our homes. The van also takes us to different medical appointments if we want. This place is great for us in so many ways. It’s a stress reliever for sure. I look forward to coming here every day.

Access to Community Life

Another opportunity afforded to elderly Egyptian immigrants is living in a clean and structured social environment with known expectations, rules, and laws. Many participants
touched upon the importance of law, law enforcement mechanisms, orderliness, and generally living in a clean, regulated environment with shared consensuses and values. Daniel, who is the only participant in the study who owns a car and drives in the United States, along with his wife Karen, shared their experience:

Daniel: I find it a pleasure to drive here. I bought myself a car after a few months of my settlement here. People at church complain of traffic on Long Island. I don’t see such traffic. They have to come to Egypt to see the real traffic. Besides, the roads are well asphalted and most importantly, there are traffic rules. Red light means stop and green light means go. This is such a delight (laughing). You know the deal in Egypt, all colors are the same and drivers do not distinguish red from green (smiling).

Karen, on the other hand, reported that she was a big fan of organization and framed the opportunities that she experienced in terms of orderliness:

The organization in traffic is great; the organization in taking your turns by going on line is remarkable. People know their responsibility in terms of being organized. I love the clean environment and appreciate the laws that protect the environment. For example, I often see no littering signs around me and clean after your dog. It’s just a different lifestyle, a better lifestyle in many aspects. The most important thing I witnessed here is that you have jobs everywhere, low-paying jobs but they are jobs. So, if you have modest means, you can survive. You still can eat, have shelter, get married, have kids, and have access to some form of entertainment. In Egypt, you have to be college educated, and sometimes beyond, and have to have a good connection to hold a good job to survive.

Arthur, a 70-year-old man, touched upon other features of community life and the value of living in the United States:

Here, humans have value. Where we are from, humans don’t have such value. There is more respect for human beings, more respect for one another, and there is respect for animals, for laws, for different ways of thinking. There are more rooms for disagreement. This is a healthier atmosphere to live in. But what caught my attention more is how rules and laws are applied and enforced. Traffic laws are a great example of that. Do you know that it used to take me a lifetime to cross the street in Egypt because nobody obeys traffic rules? It’s a blood sport over there. Over here, I am afforded this simple opportunity that others take for granted, to walk down the street knowing that there are traffic laws. Anything can happen anywhere, but the chances of it happening here is much slimmer because this is an organized society.
Masood, who lives on Long Island, also touched upon the importance of living in a clean, healthy, environment that promotes such values:

I see those garbage trucks coming twice a week to pick up the garbage. Every Sunday night and Wednesday night, after 5pm, every household brings their garbage out in a designated garbage container with a lid. I see cleaning cars coming twice a week in my street to clean in a very organized and structured way. The cars do not park in those areas to allow for such cleaning to take place. Of course, this concept exists in Egypt but only in theory. Nobody abides by such rules as garbage is all over the streets and littering is the thing to do. I enjoy that the most to tell you the truth because I spent all my life time advocating for that in Egypt, whether in my own building or my own street of my own town, and it fell on deaf ears. So I find it refreshing and advantageous in many ways.

Martin, on the other hand, reported that he enjoyed the different, and inexpensive, avenues of entertainment and culture:

When I go out for entertainment, it’s much cheaper to have some fun here compared to Egypt, and it’s more accessible. For example, I am surrounded by parks, I benefit from them for free. I go to museums, cultural events, and festivals. I go to the library, walk by the water or sit on the bench to enjoy the surroundings and read a good book without being worried for my safety.

**Ethnic Enclaves as Mediums to Cultural and Transnational Activities**

All participants described daily behaviors that revolved around transnational mechanisms and activities. Transnationalism is an inherent byproduct of immigration that takes on different meanings and references. However, for the purpose of this study, an encompassing definition of transnationalism involves the processes by which immigrants forge and sustain social relations that link together their societies of origin and settlement. Transnationalism is a heterogeneous and multifaceted process by which social, familial, political, sociocultural and religious ties are maintained through various intra-border or cross-border activities.

With the exception of seven participants, all others live in ethnic enclaves or communities in the boroughs of Brooklyn and Queens. These neighborhoods, mainly in Bay Ridge in the
borough of Brooklyn, and Astoria and to a lesser extent Ridgewood, in the borough of Queens, serve as the conduit of ethnic activities within which participants live and interact on a daily basis. These ethnic enclaves or communities show a mosaic of cultural customs and traditions that permeate ethnic businesses that include restaurants, coffee shops, clothing boutiques, and commercial merchandise. Those ethnic communities are mostly inhabited by Arabic-speaking populations including Egyptian immigrants.

All participants who live in such Arabic-speaking ethnic enclaves or communities reported enjoying the comfort of belonging in a place where they can hear, understand, and speak their native Arabic tongue and the accessibility to ethnic goods, products, and services. Living in those communities reportedly have been found to be a buffer to the stressful alienation of the homeland.

Marlene reported her positive experience about living in the area of Queens, near the Coptic Church:

We live within a short distance from church and the Arabic stores. I couldn’t imagine the extent and availability of Egyptian food and products when I was first introduced to those shops around. But every day, I discover new stores and new products that are the same as or similar to what I used to in Egypt. This has made it easier for me to live here.

Agnes discussed her experience about living in Bay Ridge, Brooklyn, and how this factor alone has helped her overcome her sense of estrangement:

What I really [appreciate most] is that I get to meet people who speak Arabic in the street and in the Arabic shops. I talk to them, I ask them questions, and exchange information with them at times. When I am upset or angry, I take a walk around the neighborhood. I get distracted in a good way, and I find myself feeling better.

George and Antoinette, a couple who live near Astoria, Queens, described their joy when they walk amid all the familiar cultural attractions:
Antoinette: When I got to know what this neighborhood had to offer, I was [pleasantly] surprised. I loved going into the Egyptian shops and buying food and products that I am used to and like. I have experienced sitting in Egyptian restaurants and cafes, and listening to Egyptian music, and I have enjoyed just hearing people greet you in Arabic or even talk to each other in Arabic. I don’t feel homesick that much anymore. I just miss the rest of my family and friends that remain in Egypt, but here I practically have access to many things that I had access to in Egypt.

George: I missed the [hookah cafes] in Egypt the most. It’s not quite the same here, but I was amazed to find [hookah lounges] here in New York. That was a startling sight. I couldn’t believe my eyes. I walk to different ones in the neighborhood. But the experience of being in “little Egypt”…is by itself a factor in mitigating the impact of immigration and the negative issues we have to deal with.

David and Aida reported that being in the section of Ridgewood in Queens has enabled them to live among their church congregants in the surrounding community. They described how helpful and comforting this arrangement was for them since they didn’t have knowledge of English and did not know and disliked public transportation:

David: The church is of a walking distance, the Egyptian grocery store is around the corner, and the hookah cafes are all around. Certain things you can’t exactly replicate, like the streets that I was raised in. I miss those very much. Granted, I feel that this is an environment that I can live in because I can have my needs met. There is no product that I can think of and it is not available.

Aida: Living here also has relieved us from taking public transportation and the headaches associated with it. I walk to church almost every day to attend morning prayers and other meetings. We can take a walk anytime around the corner and let [my daughter and son-in-law] have some privacy. We feel less suffocated and able to come and go without worrying that our English ability is not good because there are people who speak Arabic in shops around us and who could help if we get stuck.

In the same vein, Raef expressed that he was able to continue living in the United States because he lived in Bay Ridge in Brooklyn where everything he needed was accessible through ethnic shops and businesses and without having to worry about the language barrier:

From what I experienced here, there are congregations and communities that can replicate some of the qualities of our lifestyle in Egypt. Most neighborhoods
around me here in Brooklyn sell Egyptian food, you hear Arabic on the street, and you see Egyptians in the street speaking to one another and to their children in Arabic. It’s like a mini Egypt. That helps a lot, I do not have to struggle to express myself in those places.

Hannah, on the other hand, emphasized that she loved being in the Bay Ridge area of Brooklyn because it helped her worry less about having to deal with the prejudices of others:

One thing I know for sure about being here is that I am protected from the public’s negative perception of Muslims. I have relatives in other states and their experiences are not the same. This is close to my cousins’ experience in Michigan where there is more tolerance for Arabs and Muslims, I believe . . . But I don’t think that this is the case everywhere in the United States or even all parts of New York. But I am enjoying this advantage and hoping that the political and cultural atmosphere of tolerance remains the same so we can live in peace.

Anais echoed similar sentiments as she described the advantages of living in the ethnic enclave of Bay Ridge in Brooklyn in preserving her traditions:

For me, another reason I like the Brooklyn is because you can see Arabic-speaking people, and many women who wear the hijab, everywhere. Even though you don’t know English, it’s not too scary when there are so many Egyptians around. This made me feel safe. Besides, from what I have learned and witnessed around me, you don’t have to [assimilate] to be able to live comfortably and respectably. You are allowed to retain your cultural elements without issues and in the same time hold a good position in society.

Raef also described the most advantageous part of living in Brooklyn as he pointed to a collection of Egyptian books and newspapers on his kitchen table:

I am thrilled most about being able to obtain the newspapers that I used to read in Egypt around the corner from my apartment. What is also interesting is that we have access to the dish and all Egyptian programs we used to watch in Egypt. This is amazing; it helps you deal with the alienation of living in the US.

Amal, who resides in Astoria, Queens, narrated her struggles about living in suburbia of another state where her son once lived, and how living in Astoria is so much different for its protective qualities and sense of tolerance:

It was unbearable there . . . I couldn’t eat Egyptian food and I couldn’t speak Arabic in the street, and sometimes I was really hesitant about reading an Arabic
magazine in public. I stood out all the time with my hijab and ethnic look. There was nowhere for me to hide, so to speak. Not all people that surrounded me were hostile per se, there were many nice people . . . but some were different and they were different in a peculiar way that showed in their treatment of me, as they distanced themselves out of fear and at times out of antipathy. When I came here to live with my daughter, I blended in right away. I had no problems fitting in or wearing my traditional clothes or speaking Arabic in the streets.

Farida, who also lived in Astoria, Queens, emphasized the cultural richness of amenities of this geographic area:

I love the richness of this area with its ethnic flavor. This has helped me at the beginning to acclimate because I have been able to buy the familiar things we need. It actually helped me deal with the initial cultural shock to some extent. For example, in Steinway Street, you have more than three Arabic stores that specialize in dessert, and each makes their dessert a little different, one makes it with an Egyptian twist, the other makes the Lebanese way, and there is the Moroccan recipe. The same thing is true with food, there are way too many stores that cater to different tastes. That’s why it’s called Little Egypt.

Khadijah discussed how essential for her to watch Arabic channels through the Dish Network because they provide her with different things to look forward to:

What I love most is the Arabic dish. It’s made it so much easier for me to go through my day. It keeps me connected to Egypt and keeps me informed of what’s happening there as it happens there. I watch the news, the popular TV series, and other lively programs. In Ramadan, I follow the TV series; it connects me with Egypt. When I call my family, we speak about the events in the series, as if they are living next door to me. I also follow the cooking channel and other channels that help me connect with my roots.

**Parenting and Grandparenting**

A large number of participants touched upon the opportunity of being with their children and grandchildren, among other close family members in the United States. Notwithstanding family conflicts and other issues, many participants highlighted the opportunity of being with their offspring and kin, particularly their grandchildren. This opportunity was a motivating factor for their immigration after all. The most salient of this example came to life through Daniel and Karen, who have lived with their son’s family which includes two girls and one boy:
Daniel: My real incentive of coming to the United States was to be with my son and his family. My son asked me to come and be with them to help out raise the children and be a support to them. This was a good deal for me because during my last years what gives me joy is to be among my family. We have been very involved in raising our grandchildren and we appreciate our closeness to them. My wife and I feel safe being among our children, we feel supported, and the feeling is reciprocal.

Karen: This is an incentive for me to be here. Being with my son and his children and partaking in their growth is a blessing for me. I am at a point in my life that, yes I need support, but I need to give back and mentor my grandchildren. It makes me feel needed and wanted...It makes me go on...It's an incentive to be around [alive].

Another couple, George and Antoinette, reported a similar experience about being in close proximity to their son and grandchildren:

Antoinette: I am thanking God for every day my grandchildren show up at my doorstep. I am thrilled at the chance I get every time I interact with them. We have such fun time together and I get to transmit the Egyptian traditions to them. I taught them how to bake, to serve food, and how to pray part of the rosary. I also study with them when their mother is out of patience. I was an elementary school teacher in Egypt for over 40 years, and now I have the chance to teach my own grandchildren and relive my glory of my youthful years [laughing]. There is no [fortune] better and more precious than this.

George: I love my boys [grandchildren] . . . I remember my son as a child when I look at them. They look like him. So they indirectly help me to [reminisce] about the good, youthful, days of my life. I teach them how to play cards and how to relate to other people politely and respectfully. I feel good when I speak and [interact] with them . . . There is no doubt that this is the greatest opportunity for me about living here.

Raef, on the other hand, discussed the opportunity of developing a friendship with his granddaughter, who is also his caregiver and staunch supporter, with a flamboyant attitude:

If I remained in Egypt, nobody would have given me a glass of water. My granddaughter is a jewel. She comes to my apartment almost every single day to make sure that I am ok. She oversees my care with my home attendant and my doctor. In certain days, when my arthritis is bad and I have difficulty, she feeds me. She gets me my medication. She coordinates care with my doctors. She does a better job than my son and daughter-in-law combined. She is studying to be a doctor. She’s doing her residency now. I am blessed to have her. She’s making up for my son’s failures [laughing]. He never got to finish his medical specialty and
never developed social skills either to be a charmer. I guess intelligence and charm tend to skip a generation. My granddaughter turned out to be intelligent and charming just like me [smiling] and the best part is that I am here to witness it all and benefit from it [laughing] . . . That’s why I am grateful about being here [serious tone].

Summary

Opportunities for elderly Egyptian immigrants take different meanings and forms as compared to opportunities afforded to their younger counterparts. All participants achieved retirement status at the age of 60, the official retirement age in Egypt. Some of the participants did not desire to return to work, particularly those in their late sixties or older who had left the labor market for a number of years, and housewives who were never employed in Egypt. Many of those with work aspirations could not transfer their professional credentials and skills into the American labor market due to the lack of language proficiency and educational requirements that often require an equivalency to meet American educational standards, as well as other impediments often connected to advanced age. At this juncture of their lives, the views of opportunities described by seniors are reflected in the values and developmental tasks of late adulthood.

Thus, all opportunities identified among elderly Egyptian immigrants revolve around meeting their instrumental needs of older age and activities of daily living: food, shelter, safety, belonging, and health care. The feelings of fulfillment are derived from the opportunities to be in close proximity to their children and to teach, mentor, and communicate their values to their grandchildren. They also appreciate the opportunity to live in a healthy, clean, orderly, and safe environment where freedoms of all sorts are protected and enforced through laws, social contracts, values, and norms. In addition, living in ethnic enclaves provides elderly Egyptians with mediums of support and continuity, as such communities enable them to communicate with
fellow co-ethnics in Arabic, access ethnic food, utilize ethnic services, and simultaneously escape the mainstream prejudices. The availability of senior services, such as the adult day care program, make it possible for some participants to enjoy socialization, nutritious meals, assistance with benefits and entitlements, health care services and monitoring, and various recreational activities. Those who are in receipt of benefits and entitlements, whether through Medicaid, SSI, and/or food stamps, recognize it as an opportunity of an utmost importance not only for survival, but also for achieving independence and avoiding being a burden on their children and their spouses.
CHAPTER IX: COPING STRATEGIES AND MECHANISMS

Introduction

Understanding, explaining, and predicting stress and coping behaviors involves a complex host of interactive and transactional dynamics of biologically predisposed, psychologically prescribed, socially constructed, culturally learned, and situationally triggered factors. Acknowledging but notwithstanding such explanatory and predictive factors, ultimately stress formation and coping responses represent two interlocked and transactional processes that are based on appraisal dynamics. That is, coping behaviors are influenced largely by the transactional dynamics of appraised stress in relationship to the appraised personal, situational, material, social, and cultural resources. The availability, perception, and utilization of such resources may either impede or enhance the process of successful coping and contribute to risk and protective factors for health and mental health distress.

Such theoretical underpinnings, developed by Lazarus and colleagues (1984), represent the frame of reference that gives voice to the participants’ perception of their lived immigration experience, including the process of stress and coping. It is important to note that differential resources, and the appraisal of such resources, largely impacted the participants’ choices and trajectories of coping behaviors. This chapter will highlight such coping patterns, and variations within them, among participants.

All participants developed certain strategies of coping responses to manage the perceived challenge, loss, and stress of transitioning to a new environment. Participants identified a large number of coping strategies that can be grouped as emotion-focused or problem-focused coping. Some participants utilized a mix of both strategies to reduce the impact of stress. This dual strategy demonstrated a clear pattern of resilience in response to a specific stressor. However, an
equally significant number of participants relied on more uniform patterns of coping. They either focused primarily on managing their emotions in relationship to the problem or resolving the problem directly. Regardless of the strategy used, differential coping patterns among elderly Egyptian immigrants reflect the importance of the availability and impact of coping resources. Coping patterns are thus classified according to the two main subthemes: emotion-focused and problem-focused coping strategies. Each subtheme includes subcategories that suggest how the availability of certain resources can impact the coping response.

**Problem-Focused Coping Strategies Embedded in Cultural Values**

A large number of participants, particularly those with more coping resources tended to utilize problem-focused coping strategies either more than, or equally in conjunction with, emotion-focused coping strategies. These participants looked for ways to address and resolve their stress experience rather than manage their thoughts or emotions. The common denominator among this group of problem-solving participants is an ability to take initiative to utilize their available resources.

**Learning English**

Learning English was the problem-focused coping strategy used most often by participants with higher socioeconomic, professional, or educational status. For example, George, a 72-year-old former accountant, and Antoinette, a 69-year-old former French elementary school teacher, in Egypt, both gave high priority to learning English. Reflecting their thinking, Antoinette explained:

"We had such a hard time fitting in. We figured that learning English is the foundation of everything else. So we walk to the library twice a week, we read what we can read there and we borrow what we can read at home. We started with very basic books, like 2nd grade, and now we are reading at the level of 3rd or 4th grade. I was an elementary school teacher in Egypt, I taught kids French, so I know what would be the equivalent in English. In fact, there are some English"
words that are similar to French, so I can distinguish and absorb them. I try to read the newspaper in English and then identify the words that I don’t know and look them up in the dictionary. We resist watching Arabic television and watch American TV channels and try to catch as many phrases as possible. If we don’t know something, I ask my son and he translates for me. We are able to communicate a bit more with my neighbors and merchants, at least enough not to be embarrassed or taken advantage of.

Marlene, a 62-year-old woman who had a postgraduate degree in finance and banking and who once held an important position in an Egyptian bank, stated that learning English was the most important skill an immigrant should have:

It’s very difficult to communicate with anyone and feel alive without English. It really bothers me that I can’t talk to my neighbor because I can’t speak English. She’s such a lovely lady. So I made a concerted effort in learning the basic phrases very well and use my knowledge of French and Latin to try to understand certain words whose roots come from these languages. I am still at the intermediate level, but I am so determined to learn English for everyday use and to go for my citizenship test in two years.

Raef, a 72-year-old former financial analyst and businessman, described how he addressed the stress of not knowing enough English to negotiate the prices of certain merchandise:

It was difficult to negotiate certain terms with merchants and argue my case regarding prices and maneuver the ploys that the salespeople try to impose upon you. But I made it my business to learn how to deal with those situations effectively and adapted even without my perfect English. I learned to communicate with merchants in basic terms . . . but more importantly I learned what and what not to say with my skills set.

Daniel and Karen, who both hold medical degrees from Egypt, described how they coped with the fact that they could not practice medicine in the United States partly because of the language difficulties:

Daniel: I was a practicing doctor in Egypt and the Arabic gulf region for many years, so I know some English, the medical terms, but I do not know enough everyday English to practice here. I tried my very best at the beginning to relearn English by reading books, watching American TV, listening to American radio and shows, reading American magazines and newspapers . . . I also started
communicating with my son and grandchildren in English . . . and they corrected me every minute [smiling] but it was effective and I tolerated their sarcasm because there were not so humble when they corrected me [laughing].

Karen, who practiced medicine briefly for a few years after graduation from medical school, made a distinction between her knowledge of medical terms in English and the American vernacular, which she has had difficulty with, and described how she puts some efforts into learning American English:

It was clear to me that I had to put some work into learning American English and get used to hearing and responding to people when they talk to me. So I started studying with my granddaughter who was in second grade when I first came. I helped her learn but also helped myself read with her and get used to the formation of sentences and grammar. I also looked from time to time at my other granddaughter’s books who was in fifth grade. That was somewhat advanced for me but I used them to accelerate my efforts. Two years later, she’s now in seventh grade, and I am almost up to her level of knowledge and I do help her study. That’s how I have managed my language deficiency.

Utilizing Social Capital Within Family Supports, Social Services, and Religious Institutions

While some participants derived emotional support from families, religious, community and social service networks (see emotion-focused coping section), others took advantage of the social capital and tangible support available within these networks to tackle stressors directly; that is, to problem solve. The social network approach to problem solving was particularly salient for elderly Egyptian immigrants as it reflected Egyptian cultural values of collectivism, interdependence, and social reciprocity. Family and social support took different shapes and forms, including the provision of shelter, food, and monthly allowances, helping with doctors’ appointments, transportation, and regular visitation.

George and Antoinette, who live in a senior housing complex, spoke about the value of family support. George explained:

My son helps to pay most of our bills and shops for certain items that are either expensive to pay for or heavy to carry. We pay a small portion and he pays the
rest. We all discussed a plan when we first moved in. We have no income except little money from our small pension that we get from overseas that’s enough to just buy food for the month. We are not qualified for any benefits or have food stamps. He even takes us to all our medical appointments, translates for us, and manages our affairs. We try to help him help us by doing what we can do best, collect bills, gather information, and keep a financial and needs ledger so when he comes in to visit us once a week, he doesn’t waste his time on impractical things, he just provides us with what we exactly need for the week. When I confront a problem here at the apartment, I call him and he takes care of it immediately. He has his connections. So when you have a plan, things are less stressful.

Antoinette added: My brother also helps out whenever he can. He comes once a month with big shopping that usually lasts us for the remainder of the month. We buy the rest of the shopping. So between my son and my brother and his family, things are manageable.

Farida, a 70-year-old woman, reported the ways in which her daughter helped her meet her needs while allowing her to feel like a breadwinner:

I am living with my daughter and her family. They provide me with food, shelter, and allowance money. They don’t let me pay for anything. I have no income and when I need something, I ask my daughter and she gives me money. I have to prioritize my needs but so far, I get what I ask for. It’s a given that I take care of my grandchildren and clean the house in reciprocity for having food and a place to stay. It’s like a subtle contract. But if I need something extra, like money or clothes, I work harder at home. I sew clothes for my daughter or my son-in-law or I bake pastries, or do things that require intense labor and patience that I don’t do on a regular basis and my daughter can’t perform. I get to earn money and feel useful, cover my needs, and feel that my loved ones are benefitting.

Arthur, a 70-year-old man, who lived in a small apartment in Brooklyn felt that without his son’s support, he would not be able to survive in the United States:

Without my son, I wouldn’t be here period. He pays the rent for my room, buys me food, clothes, medicine, toiletries, vitamins, whatever you can think of. He takes me to my doctors’ appointments. Sometimes I have to ask him for allowance money. But when I do, he gives it to me and he doesn’t complain. I am lucky to have a son like him. Others in my situation suffer because they don’t have the means available to me.
Other participants referenced social networks, especially church–based networks. Maria, a 68-year-old woman, described how her church networks saved the day after she became depressed and after her relationship with her daughter became strained. She explained:

The only thing that kept me standing on my feet was the assistance that I received from my church community. I sought the help of the priest who introduced me to different people in the congregation. When I spoke to them, they directed me as to what to do and at times they connected me or tried to resolve my problem. One person helped me find an apartment that I have been sharing with two more people. That’s when I had to leave my daughter’s apartment because she was driving me crazy.

David, a 66-year-old male, emphatically described how he relied on his church to help him meet his needs:

We are being absorbed by the church, it looks after us, the priests are great, the families are great, they guide me, they help me, they care about me, they tell me what can be done about certain things, and when somebody doesn’t know something, they would direct me to the person who knows about the subject matter that I am seeking assistance with. I just have to ask and not be shy. For example, I sought guidance about how I can apply for benefits and services, and they answered my questions. They tell me, if your daughter is busy, we can come with you to help you, and they did that many times. My life revolves around the church, not only for my spiritual life, but my social life which provides me with actual support.

Mark, a 76-year-old man, used his church-based social network to help him find a job and secure social welfare assistance:

I used to spend at least a couple of hours every week after the Sunday mass to check the bulletin board and talk to different people who are known in the congregation to help new immigrants find jobs. I also looked for those people who would help guide me regarding social services and assistance. I developed a network of acquaintances pretty fast and I was finally able to get jobs. Each job lasted for a few months. But the jobs introduced me to other people that helped me later. Later, I sought the help of those who had knowledge of welfare benefits, and they helped me obtain it . . . The role of the church is great.

Hannah, a 70-year-old old Muslim woman, explained how conflicts with her daughter-in-law not only limited time she had with her son and grandchildren but also limited the amount of
help she can get from them. This situation prompted Hannah to look for other ways to fulfill her needs, so she resorted to asking other people in her network, such as family members and acquaintances, for assistance:

I made something like a schedule of the things I need and who can help me . . . First, I made my doctors’ appointments and asked everybody that I know to help me out and drive me there once a month . . . so if my son is not available, people that I know from the Islamic center drive me. My nephew helps out when he’s available. My daughter helps when she’s not working.

Overtime, Hannah realized that it was necessary to identify and strategically draw upon the specific strengths of individuals in her network to fulfill her needs:

I became more aware about what each person is good at and I made each of them help out in what they can and do best. I figured that my son was busy with his family, so I used his help in other things, like buying me medicine, because he can do it at his own time without time constraints. My nephew is a young guy . . . he likes to drive but he doesn’t speak Arabic that good so he wouldn’t be able to translate if I take him to the doctor, so I solicit his help in driving me around to do my shopping and have my daughter drive me to the doctor to translate. She does that naturally because she’s also concerned about me. My friends at the Islamic center help me with different things like baking when I have gatherings or putting plans together and sometimes they also call transportation for me and speak to service providers on my behalf. So that’s how I figured out how each is best for.

Anais, A 66-year-old woman, relied on a support group from the Islamic center to gather facts and information about obtaining services:

I make sure to attend support groups with the [female spiritual cleric] and listen to guest speakers every time because I get my questions answered. There are different topics of discussion and I benefit a lot from the interaction. Some discussions touch upon family, immigration, and health issues and problems and how and where to seek help.

Soraya, a 71-year-old woman, described how the Islamic center helped her resolve some family problems:

I consulted with [the female spiritual cleric] on a number of issues and she directed me to resolve those issues of conflict with my daughter-in-law. The support group and consultation that [the female spiritual cleric] provided was very helpful in addressing my problems, not only interpersonal problems, but things
about my rights and how to obtain services. I learned how to attack the source of the problem instead of letting it linger and fester. This has always been my mode of how I manage stressful events in my life.

Circular Immigration

Some participants resorted to circular immigration as a problem-solving strategy. It became the final resort for more than a few elderly immigrants who could not sustain themselves after strained family relationships deprived them of support in the initial phase of settlement in the United States. Those who chose this option resorted to it after trying other solutions that failed. These situations particularly speak to the importance of resources in helping elderly immigrants address the stressors they encounter in the United States. For example, a number of participants reported that if senior housing was more accessible or if they received public assistance or food stamps, as meager of an income as it may be, similar to those who have an asylum status, they would have avoided going back and forth to Egypt at all or at least would not have been forced to travel back and forth under duress.

George and Antoinette described how they circulated between the United States and Egypt as a way to diffuse the conflict and distress they suffered from while living in their son’s house:

Antoinette: My daughter-in-law just didn’t want us in her house, no matter how hard we took care of our grandchildren or cleaned the house or cooked. After the first three months, things became obviously horrible as she didn’t even say good morning to us. So that’s how we dealt with this problem. For the first two years, we spent about three months here and then went back to Egypt for the rest of the year. We did not want to do that. We wanted to stay here but there were no opportunities for us.

George added: We had no choice. We were losing our dignity. We chose to leave when the grandchildren started school in September and came back when they finished school in June. This may affect our citizenship because you have to be a resident here half of the time during your five years of residency to qualify for citizenship but it was not in our control. The stress was making us so sick and so worried. We had to leave and come back to keep us alive. Luckily, our son found
us senior housing two years ago and that saved us. We have lived here permanently without traveling back for the past two years.

Another couple, David and Aida, also resorted to circular immigration to cope with the stress of having no income and sharing the apartment with their daughter’s family, including their daughter’s mother-in-law who also settled here from Egypt some time ago. The couple described their sadness at having to prepare to leave to Egypt in a week, before their daughter’s mother-in-law comes back. David explained:

It’s quite possible that I can stay here forever [with a sad face] and I would love to live here. But I am obligated to go back every year for now because I don’t have resources. We don’t have work, we don’t have a subsidized apartment, and we don’t have [welfare] benefits, and we can’t stay in an overcrowded apartment of two bedrooms with three children, my daughter, her husband and his mother, so I have to go back to Egypt.

Aida added: Life circumstances are so tough in Egypt but ironically it’s more feasible financially for us than living here without any help. So we are traveling back and forth to renew our green card and see our daughter and her children every year until God grants us some other solution that help us permanently live here. I hope this happens soon because I am exhausted by all the traveling.

Khadijah, on the other hand, could not withstand the stresses of being “under one roof” with her daughter-in-law, and urged Khaled, her husband, to find a direct solution for this issue. In the absence of an alternative living arrangement, she explained, the only solution was to temporarily return to Egypt to regroup and think about how to better plan their return:

After a little over two months of our stay, we realized that there was no choice but to go back to Egypt. We thought this would be the best way to handle things. We did not want to go back, but we had no choice. We figured that we will buy time by going back home and in the meantime keep in touch with our son here so if he found us a job, an apartment or any other opportunity, he would tell us and that’s when we could come back and resettle here. That was our resolution, not the best but it seemed so at the time.

Khaled added: We were worried because we did not want to stay overseas more than six months at a time because it would affect our citizenship. The only way we could avoid that was to come here every six months or twice a year but we could not because of the expenses and the fear we would be a burden on our son’s
family, so we stuck to the once a year visit. But then, we came up with this plan to spend a month in each house of our relatives. So we did that for some time. We spent some time over my niece’s house and then my sister’s apartment, until there was an opening and we were accommodated in one of the senior housing complexes that our son had applied for.

Masood and Mali also had the same issues with living at their son’s house and decided to go back to Egypt in a circular fashion for the first couple of years. However, faced with failing health and an inability to travel, the couple eventually devised a plan to live permanently in the United States, which Mali described:

The plan entailed living one month with my son, one month with my daughter, and one month with my niece. We followed this schedule for the last three years. But we are tired of it. We are stuck in the middle between each of them and we can’t go back to Egypt because it would be self-defeating at this point. As they described their situation, they asked for help with finding senior housing, which prompted this researcher to provide them with information about available resources. They subsequently filled out a number of applications for section 202, subsidized senior housing, in surrounding towns. This is another powerful example of the importance of resources in managing acculturative stress triggered by financial constraints and lack of senior housing.

**Emotion-Focused Coping Strategies Embedded in Cultural and Religious Values**

Many participants managed their stress through emotional coping strategies, especially when they could not control the outcome of a specific situation. These include cognitive and behavioral strategies. Participants utilized a variety of such cognitive and behavioral coping strategies according to their coping styles and patterns to manage stressors and adapt to their circumstances. It is important to note and emphasize, however, that many of these coping strategies took a cultural and/or religious frame of reference as participants explicitly attributed them to either cultural or religious values or both. Moreover, cultural and/or religious
connotations related to coping with certain stressors implicitly came through the participants’ use of Egyptian proverbs and aphorisms.

Cognitive Strategies

Marlene, a 62-year-old woman who applied for asylum when she came to the United States and who lives with her daughter, the daughter’s husband, and her two grandchildren, developed and applied a cognitive coping strategy based on acceptance:

I am not happy with so many things but I absolutely have no choice. I have no leverage over anything anymore. I tell myself that I have to adapt to my circumstances. So I have come to accept my situation. Acceptance is very important in my book. There is an Egyptian concept and phrase that we use all the time when you can’t control things in your life. It’s the concept of thank God. It means acceptance and humility for what you have been destined to experience in your life. Accept things in humility, it gives you peace, peace of mind, and peace of spirit. Everybody has a cross to bear. Thank God for every condition.

Agnes, a 65-year-old woman is another asylee who has been in the United States for 2 years, described her coping strategy and need to accept the status quo as humbling:

I am accepting the status quo and my fate. I don’t allow such restrictions created by the lack of privacy, money and a place of my own to affect my relationship with my daughter and my son-in-law. I keep it inside but that’s understandable. They are both good to me. My-son-in-law is great. Nonetheless, I have to deal with the restrictions. When things arise, they pain me at times, but I accept them. The lack of money is not a good thing, but I have to accept it. It’s restrictive, absolutely, but I cannot do much about it and acceptance is the key. If I cannot control it, I have to accept it.

Amani, a 65-year-old woman who touched upon the same philosophy of acceptance, also used cognitive reframing to cope with her stress:

In Egypt, I wasn’t as accepting as I am now. Over there, I indeed had more control over my life. I worked and managed a whole department. At some point, when I was busy, I had maids and a cook to help me around the house. Over here, I have not been able to find a decent job. I help my children with their housework and take care of their children. So beggars cannot be choosy. I fought hard at the beginning, I fought to get a job, fought to assert myself, and struggled to maintain a similar lifestyle here, but I failed and I was miserable. When I humbled myself and accepted my current situation, I became more balanced [emotionally]. I just
can’t afford to look at things the same way as I did in Egypt; it’s not going to work . . . God does not burden a soul beyond that it can bear.

Maria, another 68-year-old asylee, also relied on cognitive reframing to resolve in her mind a difficult situation in the United States:

I am accepting of my fate . . . with all its difficulties and challenges, the transition here was smoother. There is no greater threat to one’s mental health but the feeling of constant unsafety, and thank God, there is no such a thing here. So when I feel despair or anxiety, I just remember where we came from, and in comparison to our situation back home, I feel better.

After she became depressed, Olivia, a 67-year-old woman, also reported using cognitive reframing to reduce her stress:

I used to look at the glass half empty but over time, I saw it half full. This happened over time and with certain efforts on my part. It wasn’t easy. But I have tried to work on my negative thoughts and feelings and think about other possibilities that may have happened. Things could be worse in certain situations.

Angela is another 70-year-old woman who discussed how she reframed her perception about a number of things that used to elicit her sense of self-blame and prompted her self-isolating tendencies:

There are so many things that can really make me upset but I have learned to change my perspective about them and just don’t give them fuel. The other day my daughter and her husband were having an argument. I normally would take that personally and think that I either caused the problem or they fight because they don’t respect me. You know in Egypt, this scenario would be less likely to happen because even if you are angry, you can’t fight in front of your guests or your parents out of respect. And this used to really upset me. Now, I don’t take it personally and I say to myself to let it be. I am not a part of their argument, I am not a guest, I live with them, and I can’t expect them to suffocate themselves by keeping their anger inside, they have to let it out.

Maya, a 72-year-old woman who has been dealing with depressive symptoms, coped by turning to cognitive reframing and reminiscence to help reframe stressful situations:

With every difficulty, there’s a relief . . . When I have nothing to do, I go back in time and remember specific events in my life when I was well, when my family was intact. I recall the family gatherings that my late husband used to put together
for relatives and friends . . . these memories take me away from my depression and remind me that once upon a time I had a good life I should be thankful for.

Marlene, a 62-year-old woman, also spoke of the important role of reminiscence in helping her cope with stress:

There are advantages and also stresses to living here. The way I look at things makes me deal with stresses in a peaceful way. My life here reminds me of my life in Egypt back then, in the 70s. America has tolerance and coexistence that reminded me of my experience in Egypt in the 70s, where there was freedom of attire, religion, safety to which I am nostalgic. I am not only nostalgic to what I left behind in Egypt; I am also nostalgic for old Egypt where there was true co-existence and freedom of all sorts. So what ends up happening is when I am reminded of this, I tend to reminisce about this period of time where I was a girl in high school and college and had diverse friends, and how we used to travel and go places together, exchange food dishes during feasts and holidays . . . These vivid reminders help me forget about my troubles here.

Mark, a 76-year-old man, also reminisced about certain periods of his life when his wife was alive, but mostly discussed what he did to manage his stress through a mix of cognitive diversion and avoidance:

I sometimes reminisce about my wife and how helpful she was to me. I miss her and I find her presence through memory to be rewarding. But for the most part, I try to redirect my attention away from the source of problems. If I can’t solve it, why shall I bother thinking about it? As my son describes my way of handling stress, if I look at something that may elicit a problem, I look at the exact opposite side so I can get away from the source of the problem. This has helped me to manage my negative feelings, because if something wants to happen, it will happen and thinking about it won’t change anything.

George, a 72-year-old man, also shared his experience of coping with stress, indicated that his wife, Antoinette, played a key role in buffering his stress:

I went through so much in my life that I learned not to get upset more than a few hours. After that, I tell myself to forget about the whole subject altogether. So I help myself in forgetting everything that is remotely close to the problem that bothers me, especially if I have no control over it. But I have to give my wife credit because she is there for me. She is supportive of me and encourages me when I am down. Sometimes we reminisce about how we met, our wedding, our life together. We reflect on our life and the [paths] we took, how we raised our kids . . . pretty nice memories.
Daniel also indicated that his use of avoidance and denial as coping strategies were affected by his wife, Karen. His coping style also highlights the impact of educational and socioeconomic status (capital resources) on his coping style:

I am an avid reader so when I get stressed, I go to the local bookstore and buy books to read. I go shopping at Home Depot or the local car dealers. I look for something to buy. I shift my attention away from the source of trouble. But I become mechanical. She [referring to his wife Karen] senses that there is something bothering me because I am not myself. So she talks to me and explores what bothers me, and gets me to talk. She taught me not to bottle up my feelings. I started experimenting with that idea recently and it has fairly changed the way I look at things. Instead of just forgetting or denying something, I acknowledge that it exists and talk about it with my wife, as much as I can tolerate.

A notable coping strategy ingrained in the Egyptian culture stems from the use of humor. Many participants reported that they used humor often to diffuse problematic or stressful situations. Participants described the important role of humor in the process of coping particularly with certain situations they cannot control or influence. They described it as an “Egyptian sense of humor” and being “light blooded.” George described how he often saw things in humorous ways and made a joke of even the toughest situations:

I can never live without joking. In Egypt, I used to go around asking my friends and co-workers for [the latest joke]. Egyptians never run out of good jokes and they have the most amazing sense of humor. When I first came here and I felt the brunt of the transition, my mind just looked for making fun of my situation . . . I dealt with uncertainty by joking. Once I got lost in the streets heading back to my apartment, I took the opposite way by mistake. When I realized it, I just couldn’t stop making fun of myself and the situation. I saw my inadequacy as pathetic but also funny. I laughed it off when I found my way home and told my wife.

Arthur reported that laughter is the best medicine as he recounted his different experiences with stressful situations in the United States:

I love watching funny [Egyptian] movies and laugh. It makes me forget the world. I appreciate a good joke . . . We make jokes of everything, politics, disasters, revolutions, you name it . . . The other day, I was talking to my son and he was just so serious, I couldn’t help myself and started laughing at him. I told him a

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couple of good old jokes, he just cracked up and felt better about things that were bothering him.

Raef, on the other hand, asked the interviewer to listen to the latest joke while describing the role of humor in his coping efforts:

I have the best time of my life telling and hearing jokes. Did you hear the latest joke? [Proceeded to tell a joke while laughing]. I had a great time with my friends [in Egypt]. We just couldn’t stop. We had good gatherings and good laughs. When I get with family here, we just don’t stop [joking] about practically nothing. Making fun of things allows me to see the lighter side of problems. It helps me change my perspective and relaxes me.

Antoinette also reported that joking is one of her primary methods of coping with stress as she automatically saw the humorous side of negative situations and made jokes about them:

Jokes have helped me survive humiliating and stressful situations throughout my life in Egypt and here [in the US]. When I lose control over something or I am not afforded the power to make a decision, I look at it from a humorous perspective. The other day something happened to me with my neighbor, a pretty embarrassing situation. I just couldn’t stop laughing at how naive I was. I told my son about it, and we just made fun of it. What can I do? If I don’t do that, I will end up so depressed. The other day, I was feeling down, so I called my brother and he’s known for his phenomenal ability to tell jokes that makes me laugh. So he told me some hilarious jokes and I kept laughing non-stop . . . I turned around and I recited his jokes to everybody I know here and they were just falling off their chairs laughing.

**Behavioral Strategies**

To a lesser extent, both the men and women in this study managed their stress through behavioral channels. Masood, a 76-year-old former engineer, explained the structured routine he developed to manage the stress resulting from conflict with his daughter-in-law and his wife’s reaction to this conflict:

If I don’t work, I get tired emotionally. I am not too much of a talker. So I keep things to myself. I just don’t think about things I used to, that changed too. I wake up every day early in the morning, and I look for anything to do. So I take care of my son’s garden, I cut the grass, I implant flowers and shrubs, and I make sure that I water them well. I do that in my son’s house and my daughter’s house when I am there. I also look for anything around me to build. I built a shed last year. I
put together a wooden chair for his garden. I always worked in Egypt and was productive; I was an engineer, and a good one. I built bridges and buildings. Here, since I can’t work as an engineer, I look for everything around me to build. That’s how I deal with what bothers me. When I can’t solve the source of the problem, I get to work, productivity and creativity work for me.

George, a 72-year-old former accountant, reported that he utilized a few different behavioral strategies to manage his stress:

I read the newspapers [in Arabic]. I go on the internet and just navigate the world. I check most of the news outlets and read them. I also keep track of my spending and budget by keeping a spreadsheet. I am an accountant by trade and I used to do that all the time. I keep myself busy with my grandchildren. The stress doesn’t go away and it never leaves my head but I am able to function . . . come and go . . . handle my daily business.

Antoinette, a 69-year-old former French school teacher in Egypt, reported her preferred behavioral outlets:

When I am stressed, I can’t sit still. I have to move. I was a French school teacher for over 40 years. I can’t find work here. So, I go to the library and borrow French books. I watch TV, especially the cooking channels. I spend most of my day in the kitchen cooking. I cook all kinds of food, Egyptian food, Italian food, American food. I also improvise and come up with my own recipes, they are pretty good. When my grandchildren are here, I have fun with them. I let them bake with me. I taught them a great deal about cooking already. I also help my older grandson [8 years old] with his studies, math, science, and social studies, as best as I can with my limited English. I used to teach these subjects to elementary school kids in Egypt but in French.

Anais, another 66-year-old woman, reported similar stress reduction strategies but focused her efforts on her grandchildren:

Staying psychologically fit requires some work. But mainly I do one thing to stay afloat. I get busy with my grandchildren. I really focus on their well-being. Despite the exhaustion that I sometimes feel, they are my life. They make me busy. They really make me happy when they appreciate what I do for them. It makes me forget my problems.
Utilizing Interpersonal Relationships Embedded in Family, Religious, and Community Support Systems

The choice of coping strategies among elderly Egyptians in this study was influenced largely by the presence or absence of resources, especially support systems. The previous section discussed how certain participants were able to access and utilize the social capital and tangible support available within networks and systems of support to address and problem-solve the source of stress directly. This section highlights how interpersonal relationship supports grounded in the family, religious, and community institutions and systems shaped the participants’ coping patterns.

Communication with others was important for many participants. Farida, a 70-year-old woman, for example, asserted that it was very important for her to speak to somebody in whom she can trust and confide:

I have to talk about my feelings. I would go crazy if I don’t. And by the way, I almost did when I first came here, because everything was so different and I was cut off from my supports . . . and I didn’t find people I can trust to confide in. So I have a number of family members who also happened to be close friends and I speak to them about my troubles. They are good listeners. They listen to me and they guide me when I need guidance. They give me advice and let me rethink things through.

Other participants also have found it helpful to deal with their problems or conflicts by sharing the issues with significant people in their lives, including their children. Soraya, a 71-year-old woman, discussed her experience with her son:

When I feel down, I talk to my son who is my confidante. I have to let it out somehow. I can cry to him and I can complain to him, he listens attentively and he tries his best to make me feel better. I am missing my family and friends who I left behind in Egypt and whom I consulted and confided in. It’s very hard to develop such indispensable relationships here and hard to trust people after reaching this age and being used to certain people to cry to. So my only choice is my son, and he’s made a world of a difference about how I feel about things with his caring and gentle attitude.
Olivia, another 67-year-old woman, discussed her enriching interactions with her son and brother as she processed how she copes with stress:

I am very emotional and sensitive. So talking about what bothers me is more important than resolving the problems. I just want an open mind, a good heart, and a listening ear. In my old age, I am not looking to be rich and I am not looking to start a business. I am looking for a heartfelt conversation. So I am blessed to have my son to speak to about my heartaches. I have my brother who also able to listen to me. My brother makes me laugh. He has witnessed me through so many years, so he knows me.

Those who do not have the support of a family member often seek interpersonal support from individuals they can trust. For the Coptic group, this automatically translates into seeking counsel and guidance from abouna, literally translated as “our father,” or the priest, and more specifically their priest of confession, who takes confessions and guides through their problems.

Elizabeth, a 69-year-old woman, described how talking to her priest of confession has helped her manage many of her daily stressors effectively:

My priest is really great. He is the reason why I am still alive today, without exaggeration, and he’s the reason I am still living here [in the United States]. He’s repeatedly listened to my heartaches, guided me patiently, and intervened directly and indirectly many times to resolve conflicts with my daughter-in-law. Without him, I would not have been able to survive or be in the shape that I am in.

Agnes, another 65-year-old woman, reported a similar narrative as she described how she coped with the stressors of immigration through the presence of her priest:

I am able to talk to my priest about everything. His ears and heart are wide open and I am lucky I can express my feelings to him. He’s the greatest counselor I can have and the greatest spiritual leader one can asks for.

Marlene, a 62-year-old woman, made it clear that the emotional support she has received from her priest helped her to survive her first year post-immigration:

I would have gone back home if it wasn’t for [our priest]. His presence made everything bearable because I confided in him and he would patiently listen and redirect me. He also counseled me when I had problems. I avoided a number of pitfalls in my life here due to his wisdom and counsel.
Maria, a 68-year-old woman who lacked close friends or relatives to talk to, emphatically described her priest as the person closest to her, as she especially appreciated that he would maintain confidentiality:

Here, I talk to my priest. He is beautiful, very absorbing, very patient, and very loving. I love talking to him; because I have no one else to entrust with my pains and difficulties and not be afraid they would use this information against me or perceive me from a negative or judgmental point of view.

Antoinette, a 69-year-old woman, acknowledged the role of her priest in helping her cope, but she gave more weight to the meaning she derives from the mutuality of the relationship she developed with other church congregants:

The priest who serves at my church is nice, and the congregants are amazing. They are nice and just kind to me. They make you feel welcomed. We have been exposed to other families and developed some good relationships. We visit each other at times and talk about our issues. We support each other. This is a spiritual place but also a gathering place. I come here to pray but also meet other church congregants and talk to them.

Aida and David, who are quite involved in church gatherings, also touched upon the benefits of interpersonal relationships with church congregants:

Aida: We don’t have the same exposure to people that we used to have back home. We have no contact with neighbors, acquaintances, or friends like we used to in Egypt. But we have been able to develop a few close contacts and even friendships here in church that helped us compensate for our friends and acquaintances we left behind in Egypt. Our contact here is not as elaborate as our contacts in Egypt of course, but they are good enough to make us feel supported in many ways.

David added: We can have conversations with our friends at church. We mostly meet at church because it’s hard for us and for them to travel to each other’s homes. We look forward to do that at least once a week, after church. We sit together at one table and have lunch and talk about things. We share our struggles, our happy moments, and our grandchildren’s stories.

Agnes, a 65-year-old woman, enhances her interpersonal relationships through doing volunteer work in church and related organizations:
I volunteer to help out in church events. If there is a religious festival, fundraising event, day care, or summer camps, I become involved and that’s how I feel better, through serving others. Interacting and serving others make me feel good.

Muslim women have access to support groups conducted by a Muslim female spiritual leader, called a da’iya, who can also give general advice about religious and personal matters. If a woman or man seeks guidance about a specific situation, a religious matter, or resolution for a personal issue or family-related problem, then they would primarily seek the counsel of the Sheikh, a Muslim male cleric and scholar. Hannah, a 75-year-old Muslim woman, described her experience with the da’iya:

We discuss different issues about life and how to manage the stress we encounter in our daily lives. The da’iya uses the words of religion to guide us and help us monitor our behaviors. Such support makes me feel good. It alleviates some of the depression that I have because I get to talk to others who may have the same problems. Of course I can talk to her individually and seek her advice also.

Ekbal is another 68-year-old woman who discussed the support she has received at the Islamic center. She highlighted in particular the moral support and counsel she received from the Sheikh and her fellow congregants:

I talk to the Sheikh if I have a problem or when I am not sure about something I am doing. He listens and guides me. I let things off my chest and vent about my problems. He helps me feel better. I know if I am doing right or not after I talk to him. He has redirected me towards the right path a number of times. I also have a couple of friends in the congregation that I am close to. They also listen and guide. I attend the support group with the da’iya, and I get the support to deal with stressful situations through my fellow congregants. The most important thing is that there is somebody there to listen to you and provides you with emotional support. The part about advice is unimportant sometimes, but having someone to listen and support is very important.

Anais, a 66 year-old-woman, pointed out the uniqueness of the support she receives from going to the Islamic center and how important it was for her mental health:

I really get a lot of respect. I get accepted in the center. I made some friends there. When somebody doesn’t come, I ask about them. Most people there speak Arabic, so I get to communicate freely. People treat me nicely. It feels good. What matters
is the support, companionship, togetherness, belonging, and the feeling of warmth and safety. That compensates for the loneliness and alienation of being in unfamiliar surroundings.

**Utilizing Religious and Spiritual Values, Rituals, and Philosophies**

All participants, whether from the Coptic or Muslim group, stated that their religious and spiritual beliefs provided a source of support post migration. All Coptic participants attended church regularly and were part of the church’s congregation and activities. Likewise, all Muslim participants attended a mosque regularly and were part of a mosque or an Islamic center’s congregation. Most participants from both groups described having a strong faith in God through their respective religious teachings that equipped them with strength, endurance, patience, resourcefulness, and resilience.

Marlene, a 62-year-old woman who reported coming to church at least three times a week to attend the Sunday mass and other spiritual meetings, described how her faith has helped her in many ways and has made her stresses more manageable:

> I feel I really can adapt to these difficulties because I am a religious person. I am convinced that everybody has a cross to bear, and I have mine. The existence of church in my life serves as the ultimate adaptive factor. I feel absolutely great when I come to church. Sunday is the best day of the week for me. The mass sustains me spiritually and fortifies my soul against troubles. The communion makes me stronger. And the spiritual meetings further guide and help me deal with my troubles more effectively.

Maria, a 68-year-old woman, echoed similar sentiments as she described how her faith has carried her through tough times, and added how her special relationship with God empowers her in different ways:

> If it wasn’t for my faith in Christ, I would not have been where I am today. My faith has always been strong, in Egypt and in America, and it has served me well in both places. I can’t describe to you what this special relationship means to me in words, but it blesses me in so many ways. It gives me a sense of purpose, confidence, esteem, and a reason to live. Faith, through the Bible, is a way of life;
it permeates every bit of my existence and dictates how I see and explain things, and how I relate to others.

Agnes, a 66-year-old woman, acknowledged the importance of her faith but shifted her focus to the importance of activities offered by her church in helping her cope:

I feel absolutely great when I attend mass. But beyond that, I am very active in church activities. I attend religious meetings, and partake into spiritual activities offered for seniors every week. We discuss spiritual matters in connection to aging. How we [older people] can make sense of our life at this time and how we can still be productive in different ways even though we can’t work and provide financially. These spiritual meetings help us elevate our self-esteem and guide us through turmoil.

David and Aida described the role of their religious and spiritual beliefs in guiding them through the difficulties of immigration. However, they focus their attention and praise on commending the spiritual role of the Coptic Church in helping the congregants, many of whom are recent immigrants, cope with their difficulties:

David: The church here plays out an important part in absorbing our emotional angst. It provides us with spiritual guidance. When we get very worried or anxious, we go to church and pray. So the church has been a pillar in our adaptation. It has provided us with some peace of mind.

Aida: I have to be at church every Sunday even in inclement weather conditions. The mass, the communion, and the experience of being at church sustain me. The meetings that I sometimes attend are additional channels for spiritual growth. The church has been a place of safety for me and a sanctuary for the Copts since ancient times.

Angela, who was observed wearing a big cross around her neck and having a large tattooed cross on her wrist, a sign that identified Copts to others in old times and a tradition that has been carried on by most traditional Copts in the modern times, discussed what it meant to identify as a Copt:

I am a Copt Orthodox. This identity alone has provided me with the utmost sense of support, pride, belonging, and strength beyond anything else in combination. The church is my sanctuary; it’s my place of birth, baptism, a pillar of strength, and will be my place of death. I am part of the church and the church is part of
me, irrespective of where I am and where I live. Spirituality is what feeds me. My religious beliefs guide me. My identity alone provides me with a natural inclination toward healing and managing stress.

Mark, a 76-year-old man, on the other hand, described how he incorporated his spiritual beliefs in his daily activities, since he couldn’t go to church regularly for health reasons, and how they provided him with a sense of solace:

When I am upset about something, I listen to the mass. I have it recorded in many versions. I have the holiday version and regular Sunday’s prayers. I listen to hymns. I read the Bible and pray from the Agpeya [the Coptic book of hours] several times a day.

Olivia echoed similar spiritual activities she partook in throughout her daily routine, as her way of enriching herself and preventing further stress. She also added that she was most delighted when she involved her grandchildren in this process because she also got to teach them such virtues:

I tend to read to listen and recite Coptic hymns throughout the day. It helps keep my spirituality and keeps my mood leveled and ready to receive any negative events with relative calmness. I also listen to recorded sermons on CDs. I watch Agapy [the Coptic channel]. It has excellent religious programs for all ages. I call on my grandchildren to watch, and learn with me from, spiritual programs directed toward children in which they summarize and dramatize Bible stories and make them come alive.

Arthur, a 70-year-old man, revealed how his Coptic faith was a stabilizing factor in the aftermath of his immigration as he discussed how he maintained spiritual presence:

The [Coptic Channel] is great and it fuels my interest about certain questions in the Bible that I don’t have answers to. Certain programs explain and simplify certain verses and concepts. So I follow this channel and it helps fulfill my spirituality and keep me occupied in a positive sense. My whole life revolves around my religious beliefs, the church, kind and charitable deeds, since I was a child, and now it’s no different. As a matter of fact, now I need that more than ever. It is the most familiar concept to me in an unfamiliar place that keeps my [mental] health intact.
Reengaging and finding meaning in life through volunteering in church-related activities and services were salient for those in the Coptic group who had the physical capability. Those who reported volunteering also reported that they had always done this type of work and continuing to help others through the church provided them with a sense of normalcy, engagement, and continuity in late adulthood. Two participants, in particular, stand out in terms of volunteering in both church activities and services and affiliated places where they can serve children with disabilities or others who are in need for companionship.

Antoinette, a 69-year-old woman, reported on her experience with volunteer work through the Coptic Catholic Church and how she regained a sense of purpose:

I am a Copt Catholic with strong affiliation to my Church. In Egypt, I always helped and volunteered all my life ... in nursing homes and orphanages to serve those in need. When my life became more stable here, I started volunteering in church activities and in similar places that are affiliated with the church. It gives me meaning in life and a sense of achievement. I feel that my time is still valuable and can make a little bit of a difference. This type of work reminds me of something familiar to my heart, and it makes feel happy ... more importantly I feel that I belong.

Maria, who also reported volunteering in many church activities, added a slightly different perspective:

I help others by volunteering in the Orthodox church. I help with setting up for religious meetings, and gatherings, Sunday school activities, and other spiritual tasks. But in reality, I help myself too. I get to give others. I have always had a tough time taking from people and not give something back. So this gives me a sense of engagement, independence, and dignity. It makes me feel that I am valued and that I can stand on my two feet and even though I am, in a way helpless, because of my situation, I nonetheless still can provide emotional and sometimes physical support to others.

Similarly, Most Muslim participants reported that their faith was an instrumental method of coping with adversities and challenges they have encountered post-immigration. A number of
Ekbal described her preferred method of dealing with stress:

When I am upset, angry, or stressed, I read the Qur’an. I don’t really have a close friend per se as I used to, so I take refuge in reading the Qur’an. It gives me consolation and foresight. It gives me wisdom and helps me bear my difficulties.

Anais, on the other hand, described the different aspects of involvement she had in the Islamic center, and how they provided her with a sense of belonging:

I go to the Islamic center quite often. I attend prayers and I serve there. I help out other people with all sort of things. But I like it because it keeps me busy and the same time, I follow my religious teachings and fulfill them with good deeds and by helping others.

Amal, a 67-year-old woman, described how her spiritual and religious beliefs translate into good deeds that in turn help her manage difficulties both directly and indirectly:

My faith is very strong and it helps me absorb difficulties and deal with them wisely. But it’s even beyond that because I feel happy when I am among a group of people that I fit into. I feel that it’s [mutually beneficial] and at times I feel that I benefit more than the people I help because I don’t feel alienated and I feel protected from the public that doesn’t understand me and my traditions and criticize it blindly.

Raef, a 72-year-old man, described his preferred stress-reduction strategy and how it helped him manage the stresses of daily life:

I trust in God very much and I try to be pious, I feel I am driven by His guidance. I have my trust through God. I never miss a prayer and always attend the mosque. I read the Qur’an regularly. I feel that I am still alive and [fairly healthy] because I serve him.

Amani, a 65-year-old woman, discussed the advantages of her weekly spiritual activities and how they helped her develop adaptive skills to cope with stress:

I pray on a daily basis, I read the Qur’an, I pray at the mosque, attend women’s group, and I help out at the Islamic center, volunteer. I help out in different ways. My faith in God makes me see the glass half full. My religion teaches moderation, humility, and the importance of seeing the positives. It calls for helping oneself and being industrious. I am able to control my psychological state by focusing on
the positives and drawing on my religious teachings. I feel that I am strong, but I humble myself; I let things go and don’t insist on things going my way.

Summary

The experience of migratory loss and grief and acculturative stress among elderly Egyptian immigrants is tempered by the differential availability and utilization of personal, familial, cultural, and societal coping resources. This process also is mediated by the appraisal of stress as well as the appraisal of coping resources. Notwithstanding the intervening variable of the appraisal process in the stress and coping dynamics, a common pattern of coping strategies emerged from the participants’ narratives.

It was noted from the interviews of participants that those who were able to cope well and adapt through the transition of immigration are those who possess psychological resilience, higher education and socioeconomic status, and those who strategically or directly utilized the support of their family system, social services, and religious institutions. Those who had more control over their situations showed a tendency to utilize problem-solving coping strategies. Those who had less control resorted to emotion-focused coping skills and strategies to temper the impact of stressors. Most of such coping skills and strategies were centered in cultural and/or religious perspectives and values. However, many participants utilized a mix of both problem-focused and emotion-focused coping strategies.

The coping strategies and mechanisms discussed in this chapter have all taken an adaptive frame of reference. Maladaptive coping strategies, listed in the literature, such as religious overzealousness, compulsive gambling, and substance use were not identified by participants. However, in some instances, certain participants reported experiencing depressive and anxiety symptoms for not having the capability to manage the stressors effectively. Certain
coping elements and resources acted as protective factors that helped in absorbing the shock and
distress of the transition across participants irrespective of their differences.
CHAPTER X: DISCUSSION AND CONCLUSION

Introduction

The 30 stories presented throughout this dissertation provide insights into the experience of Arabic-speaking immigrants in late adulthood. Through their important and heartfelt narratives, elderly Egyptian immigrants in this study incarnate the interwoven mosaic of their extraordinary journeys with all its challenges, struggles, opportunities, rewards, and adaptive strategies of coping. From afar, these individuals intersperse within society unrecognized by others for both their uniqueness and diversity. On the surface, they live their lives in the shadow of their immigration sponsors and the constraints imposed upon them by the limitations of their circumstances. In transition, they seek to reassert their resilience by harnessing their strengths and rechanneling their strains. Along the way, they struggle to develop a sense of integrity, not fully realizing the potent wisdom of their life history, the inherent worth of their lived experience, and the significance of their journey.

In research, elderly Arab immigrants are invisible (Salari, 2002). Their invisibility is highlighted by the fact that a few studies focus on this population. Compounding the struggle to understand their lived experience, most existing studies are quantitative. Finally, as is common with research about immigrant ethnic elders, many of the studies about elderly Arab immigrants fail to distinguish between the elderly who immigrated to the United States early on in their lives and grew older while here and those who immigrated and settled in the United States in late adulthood.

The findings of this dissertation help to fill the void created by the paucity of research about elderly Arab immigrants by exploring and describing the lived immigration experience among elderly Egyptians, as one representative group of Arabs, who have immigrated to the
United States in late adulthood after their official retirement age, which is 60 years old in Egypt. This study moves beyond uncovering the challenges they face or how similar or different they are in relation to peers from other immigrant ethnic groups. Rather it uses in-depth interviews to delve into their personal realms, to unravel and identify the meanings associated with the different dimensions of their lived immigration experience. Their stories reveal a host of exceptionally complex sets of deficits, challenges, difficulties, struggles, opportunities, rewards, strengths, and skills. This dissertation contributes to a number of emerging areas of research in the field of aging, immigration, and mental health.

Faced with developmentally challenging, age-related tasks, elderly Egyptian immigrants further disengage into uncharted territories, marked by concomitant disruptions in their social roles, relationships, socioeconomic status, living arrangements, self-esteem, self-image, and psychological integrity. The interviews with 30 elderly Egyptian immigrants revealed a detailed portrait of the social and psychological processes they endured as they tried to resettle and adjust to life in the United States. The men and women define their experiences through prescribed cultural, social, and political forces that provide insight into the pushes and pulls of immigration. They describe their daily routines and their relationships with their children, their children’s spouses, and grandchildren—both conflicting and rewarding. They express their grief while sharing their losses and reflecting on the stressors that come with life in a new environment. They discuss different counterbalancing opportunities and rewards existing within social and family structures that helped them survive. They finally process their lifelong set of skills, adjustment mechanisms, and coping strategies that have enabled them to maintain their psychosocial equilibrium.
Salient Push and Pull Factors Impacting Elderly Egyptian Immigrants

The first question that this research explores and addresses is the push and pull factors, embedded in the immigration context, which urged or motivated Egyptian elders to move to the United States. The circumstances that force or contribute to emigration have been the basis of numerous research studies in the field of immigration (Castles & Miller, 2009). However, what make such push and pull factors unique in this study is that they highlight two distinctive phenomena: fulfilling the developmental tasks and needs of late adulthood and avoiding the sociopolitical upheaval resulting from the “Arab Spring.”

During the last five years, a big part of the Arab world was jolted by what was coined as the “Arab Spring” and later as the “Arab Winter.” These were waves of revolutionary demonstrations that originated in Tunisia in December 2010, and quickly expanded to Egypt and subsequently to the rest of the Arab world, protesting the oppressive social and political conditions. The demonstrations took different forms, from civil resistance and disobedience to strikes, marches, rallies, and assemblies. Some of these revolts and protests were met with a mix of responses from authorities, pro-regime militias, and counter-demonstrators, ranging from violent confrontations, excessive police force, and mass arrests to strategic social and political reforms to quell such protests. Some have culminated in the resignation of long-established regimes in Tunisia, Egypt, Libya, and Yemen, as power taken by the established institutions filled the resulting leadership void, while some others escalated into armed conflicts, such as in the case of Libya and the ongoing civil war in Syria (Dabashi, 2012; Lutterbeck, 2013).

Armed militias with extremist religious affiliations, such as the Islamic State of Iraq and Syria (ISIS) arose amid such chaos, voids, and shifts of power (Sly, 2013; Withnall, 2014). These changes adversely affected the populations in these countries. Egypt saw a surge of chaos
and lawlessness, including crimes, violent assaults, and acts of terrorism. A significant decline in economic activities led to serious economic stagnation and a lack of essential goods and services. With scapegoating, hostilities and targeted assaults, the Coptic minority suffered numerous terroristic acts and violent campaigns (Abouzeid, 2011; Elgundy, 2011; Elyan & Blair, 2011; Simon, 2013; US Congress, 2012; Zaki, 2010).

It is important to note that these sociopolitical events have impacted the participants’ worldview, immigration experience, and thus permeated their narratives to varying degrees. Many elderly Egyptian immigrants in this study left Egypt for the United States during or in the aftermath of this time of unrest and power struggles. Even those who left Egypt before the outbreak of unrest felt the enormity of the chaos through their families and friends who remained in Egypt. Despite the different narratives, both Copts and Muslims reported that their lives were affected profoundly by the changes in Egypt.

Among the 15 Copts, 12 participants identified as Coptic Orthodox and 3 participants identified as Coptic Catholic, and included 3 couples, 6 widowed women, and 3 widowed men. The majority were sponsored by family members, most notably children. Some participants came to the United States with the intent to apply for asylum. The main push factor that made them leave Egypt was the differential treatment they characterized as discrimination, prejudice, exclusion, and in extreme cases, violence and persecution. The chaos and lawlessness, and the augmented hostilities against Copts that followed the Egyptian revolution, reinforced their decision to leave Egypt.

The 15 Muslims in the study included 2 couples, 7 widowed women, 1 divorced woman, and 3 widowed men. As the majority group in Egypt, religious persecution did not appear among the reasons that caused Muslim participants to leave Egypt for the United States. However, the
general dissatisfaction with living conditions and the economic stagnation along with the uncertainty, chaos, and lawlessness that accompanied the Egyptian revolution motivated many of them to leave and, at times, expedited their departure.

Aside from religious persecution, social upheaval, political chaos, and economic uncertainties, the most important pull factor for participants, regardless of their religion, was the desire to reunify with their children. As elders, the wish to reunify with their children was compounded by their health and companionship needs. All participants desired to be close to their children and grandchildren to receive and give affection and obtain assistance with their health care needs. Participants’ needs often meshed with those of their children, at least at the outset. It enabled the children to monitor and care for their parents’ health and personal care needs while they received the help from their parents in the form of domestic and housekeeping services, babysitting, child rearing, teaching their children the Arabic language, and passing on to them cultural and religious values.

Another pull factor was the belief that they would gain new freedoms in the United States. Freedom of religion was a particularly salient factor for the Copts who, as previously noted, felt the brunt of discrimination and hostilities as a minority in Egypt. Four Coptic participants applied for asylum. One participant was sponsored by her brother. The rest were sponsored by their children. Regardless of their immigration situation, Coptic participants emphatically identified religious freedom as important as reunifying with their children for their presence in the United States. Freedom of religion was not a pull factor for Muslims. Instead, prior to immigration, they had worried that they would not be able to practice Islam as freely in the United States as they could in Egypt. This perception later changed, to varying degrees among different participants, when they saw they could practice their religion freely.
Migratory Loss and Grief Is a Risk Factor for Distress that Hinder Adjustment

The second question that this research explores and addresses is the risk factors of stress and distress induced by this transition and how they impact on the adjustment efforts of elderly Egyptians. Many researchers have documented the experience of tangible and symbolic loss and grief among immigrants of various age groups, including the elderly, and how they impact their adjustment process (Casado & Leung, 2001; Casado, Hong, & Harrington, 2010; Henry, Stiles, & Biran, 2005; Henry et al., 2009; Markovitzky & Mosek, 2005; Ward & Styles, 2003; Weiss, 1988). The findings of this study confirm the findings of earlier studies and build on this body of important research. Some of these findings, however, are unique to Egyptian elders due to the distinctive context of immigration and Egyptian cultural elements.

More specifically, the context of immigration that forced some participants to emigrate and motivated others to leave, or at least expedited their departure in the aftermath of the Egyptian revolution, also forced them sell their apartments under time constraints and considerable duress. As a result, many incurred significant losses creating emotional and financial struggles. Those who had to exchange their Egyptian for US currency also incurred serious financial losses due to inflation of the Egyptian currency. These losses increased financial insecurities and psychological vulnerabilities, particularly among the highly educated who once held professional positions in Egypt.

Loss and grief was also triggered by the loss of significant social networks that participants once had in Egypt. However, it was rather unique in that it acutely triggered the loss of collective identity, distinctive gender roles, instrumental relationships, and influence embedded in the Egyptian cultural dynamics. For example, men focused on the loss of their
significant relationships with their neighbors and friends whom they met at neighborhood cafes where they played cards, dominos, and chess, drank tea, and smoked hookahs. This social context significantly reinforced the men’s sense of self-esteem and positive self-image, as “wise elders.” Losing their relationships, along with their social status and roles, which had been the hallmark of life in Egypt, meant losing their voice and ability to make influential decisions within the hierarchy of the family system.

In contrast, women reported greater attachment to family relationships and focused on family-related losses. Reflecting traditional gender roles inherent in the Egyptian cultural dynamics, compared to male participants, the majority of women suffered most from the loss of their siblings, cousins, and family members in their closely knit social network. They grieved the loss of intimate bonds and conversations provided by these relationships. Women also lost influence based on the social role in the family and community which had enhanced their self-image and the respect they received from others. Most women were quicker to open up about their feelings of loss and grief during the interviews as compared to their male counterparts. Their narrative was quite expressive, detailed, and emotional.

Both women and men also lost the independence they once enjoyed in Egypt, as they had to rely on their children to fulfill their needs. Yet, women lost their sense of independence in another notable way. The patriarchal patterns and traditional gender roles in Egypt that gave men more control in decision-making and subjected women to rather submissive roles in Egyptian society also became salient through some participants’ accounts. In Egypt, some married women assumed a subservient role as they were dependent on their husbands. Following the death of a spouse, they experienced increased independence in Egypt, in part due to gaining the power of decision-making and in part due to receiving a survivor’s pension. However, upon arrival in the
United States, these women experienced the loss of independence and renewed sense of
dependence, this time on their children. As they catered to the needs of their children, their
children’s spouses, and grandchildren while not being able to care of their own needs, they
gradually became passive and disempowered.

**Acculturative Stressors Compound the Impact of Losses and Increase Risk for Distress**

Acculturative stressors are the other facet of migratory loss and grief which impeded the
participants’ adaptive capacities and augmented their vulnerabilities and risk for physical and
psychological distress. These findings regarding acculturative stress mirror and further build on
existing research, as it confirms that elders who move from traditional Middle-Eastern societies
to highly industrialized societies suffer most from a cultural shock due to the stark difference of
societal norms and customs (Emami et al., 2000). The normative and cultural differences that
many elders in this study experienced are reflective of what Torres (2006) calls “culture shock
inspired role reversal,” which may be harder to accept than role reversal prompted by age-related
physical disabilities. Foner and Derby (2011) particularly highlight a theme of conflict related to
immigrant family dynamics that is more pronounced among immigrant groups who come from
cultural norms and practices that differ sharply from those of mainstream American cultures, and
that sheds light on the concerns of the women in this study: causes of tension and
intergenerational conflict between parents and children. Family conflict, in this study, primarily
stemmed from a cultural clash between the women participants and their children’s wives and, to
a lesser extent, their children and grandchildren.

Due in part to cultural expectations and in part to lack of affordable senior housing—such
as section 202 subsidized housing for the elderly which had very lengthy waiting lists—elderly
parents tend to live with their children. Living with their children increasingly created enormous
stress for participants. They found this living arrangement to be limiting and problematic due to explicit and implicit restrictions and constraints imposed upon them by either the household norms or by their own sense of guilt and demoralization. After living in larger quarters in Egypt, they resented being crammed into a tiny bedroom or in a small two-bedroom apartment, without enough space to move around or have control over their daily activities. They also felt overworked as they took on new roles, such as household chores and child care, that left them physically and emotionally exhausted as well as frustrated and unappreciated.

In such a crammed living environment, salient differences between the Egyptian and American cultural norms, customs, values, and daily behaviors became apparent and induced both stress and conflict for many participants, particularly women. A source of concern for women stemmed from women’s liberal dress code. This concern was augmented by the display of intimate behaviors in public and the media’s lack of censorship of graphic sexual material. Yet, the most stressful situation for many women came from their negative view of their children’s, children’s spouses, and grandchildren’s behaviors and lifestyles that emulated such normative differences. When they tried to address this situation, some women across both groups were met with resistance and conflict, particularly from their daughters-in-law. As a result, they felt less influential in their ability to transmit their “moral values” to the younger generation. A few women, on the other hand, felt that their children, fearing the loss of Egyptian values, were unnecessarily strict and punitive with their grandchildren. This situation also created stress for these women since they had to intervene and ask for leniencies on behalf of their grandchildren.

**Unfavorable Context of Reception Creates Financial Constraints and Exacerbate Distress**

The findings of this study corroborate and further build on the findings of previous research that studied the negative impact of an unfavorable context of reception on the adaptation
process of immigrants. As shown by previous research, and as will be discussed later, the context of reception can create protective factors through resources and opportunities that buffer migratory loss and acculturative stress. Alternatively, it can create risk factors that exacerbate migratory loss and acculturative stress that contribute to health and mental health distress (Portes & Borcz, 1989; Mui & Kang, 2006; Portes & Rumbaut, 2001, 2006, Stepick & Stepick, 2009).

The 1996 Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) which barred new immigrants from receiving federally funded public benefits—such as Social Security Income, public assistance, food stamps, and Medicaid—for five years exemplifies a risk factor for distress created by an unfavorable context of reception. The underpinnings of these immigrant policies are based in anti-immigrant sentiments that paint a negative stereotypical picture of immigrants as lazy and dependent people who drain the “system” and further create a fiscal burden for natives. Thus, providing them with jobs, benefits, and services would contribute to fiscal deficits (Brojas, 1999a; Brojas, 1999b; Brojas, 2002; Brojas & Hilton, 1996).

Lack of employment left the majority of participants without a source of income. The language barrier, which frustrated most participants and hindered their communication with others around them, combined with an “aged look” and an inability to transfer professional credentials and utilize them in the American labor market, “immensely reduced” their “competitive chances of landing a job.” Some participants received a very small public pension from prior employment in Egypt. The amount barely covered monthly food costs. Nearly all were barred from receiving social welfare benefits for five years, including Social Security Income (SSI) and food stamps (SNAP). In the absence of income, they had no choice but to rely on their children and other family members for financial support more than they liked. Those with an asylum status did receive a meager income from cash assistance that, along with food
stamps, barely covered their basic necessities for survival but did not suffice to give them independence from their children.

Given the lack of programs that evaluate their foreign professional credentials, the lack of job training programs, the lack of access to jobs due to an aged look, and the lack of a steady income, financial constraints became a major source of acculturative stress for participants in this study. Financial constraints particularly became more salient and exacerbated psychological distress among certain participants when they needed to relocate and live in their own apartments. Since they did not have the financial means to do so, in the absence of subsidized senior housing, they felt trapped in their children’s apartments. Indeed, the 2 participants who received SSI and food stamps reported being independent and doing fairly well as compared to their counterparts who could not receive these income supports or to those who held an asylum status and received a meager income through cash assistance.

As pointed out by Lee (2007), who studied the immigration experience among elderly Korean immigrants, despite the conflict reported with their families, many participants in this study felt ashamed and guilty for depending on their children and interfering in their lifestyle. These feelings often culminated in perceiving themselves as a burden on their children and their families. Many were reluctant to share their ambivalence, confusion, and fear with their children, not wanting to burden them or cause them more problems with their spouses. Some internalized their feelings, suffered in silence, and isolated themselves, thus augmenting their psychological distress. Most participants wished to get their own apartments and hoped for subsidized senior housing. Having their own place would grant them independence, peace of mind, a space to breathe and exercise control over their daily activities, and in the meantime alleviate the feeling that they are burdensome on their children.
Aging Compounds Migratory Loss, Grief, Acculturative Stress, and Exacerbates Distress

The findings of this study begin to address some of the questions posed by previous researchers about how the losses incurred by the aging process intersect with and compound the losses and acculturative stress incurred by immigration. The aging process, particularly after retirement, can trigger material, physical, and symbolic losses related to decreased income, unfavorable changes in appearance and body image, deterioration of physical and cognitive functions, loss of status, role changes, discontinuity of daily routine tasks, disengagement from certain activities, and compromise of independence (Gele & Harslof, 2010). For the participants in this study, these developmental losses compounded the material and symbolic losses and acculturative stressors that accompanied immigration.

Many participants, for example, as yet without any physical or functional limitations, feared the losses associated with the aging process itself. Their hardest task was to “mentally separate” the losses that they actually incurred due to the migratory transition from the potential future losses they fear eventually will accompany aging. This general and not unrealistic fear, particularly among those who had been active in Egypt, was that the losses incurred by immigration are just a symbolic precursor to what the losses of aging entail; that is, it is just a matter of a short period of time until the latter comes into play. On the other hand, those participants who acknowledged physical and functional limitations—such as difficulty walking for long distances, unsteady gait, and other knee and hip problems—felt more demoralized by such losses since they understood that their chances of achieving real or symbolic independence were slim.

What reinforces such losses in the minds of the elderly Egyptian immigrants relates to acculturative stress stemming from the differences in how Egyptian and American societies view
aging. In Egypt, aging is regarded as a source of wisdom and strength to guide youths and help them resolve problematic issues of all sorts. These cultural norms become almost extinct in modern American society, which places more value in individual choices and youth (Nandan, 2007). Such norms and values related to aging trickle down to the family system and permeate the lives of immigrants as they assimilate. The roles often are reversed as the elderly lose such powers and voice within the family system hierarchy to their children, daughters-in-law, and grandchildren in both implicit and explicit terms. Collective identity, interwoven in traditional family relationships, that calls for honoring family needs and superseding the individual’s needs, is no longer in existence.

While aging theories often describe older age as a process of intentional disengagement, the immigrants in this study wanted to remain active and to continue some semblance of their daily routine. They, however, were forced into disengagement by the lack of language ability and the aged status. Such circumstances curtailed their “interactions with English speakers around them” and reduced “their chances of networking,” which reinforced their role loss and the concomitant feeling of exclusion, loneliness, inadequacy, and lack of usefulness.

**Protective Processes Foster Resilience and Buffer the Impact of the Transition**

The third question that this study explores and addresses is the protective factors and processes that deflect, defuse, or counterbalance risk factors for stress and distress, enhance adaptive capacity, and facilitate adjustment efforts. Prior to this study, there has been little research about the opportunities or rewards that elderly immigrants derive as part of the context of reception or the sources of their personal strengths and coping skills. Rather, most existing studies focus on the losses, stressors, deficits, or risk factors that contribute to health and mental health issues. One of the advantages of this study is that it describes the dynamics of protective
factors and processes that foster resilience among participants—both derived from opportunities and rewards existing within the social and family structure as well as those existing within their strengths and coping skills—and how they buffer the risk factors, temper the impact of losses and stressors, and facilitate adjustment efforts.

Further, this study virtually expands the conceptual parameters of the context of reception, beyond its traditional elements discussed previously, to include and describe other opportunities that are specifically inherent in the immigration experience among Egyptian elders. Participants in this study took advantage of such opportunities and resources offered to them through their social contexts and networks and family supports and utilized their strengths, skills, cultural values, and religious convictions to manage the impact of their stressors. It is the interactive and transactional processes among risks, resources, and contexts that fostered their resilience and enhanced their functioning (Gilgun, 1999; Masten, 2001; Rutter 1987, 1995; Waller, 2001; Werner, 1990, 1993, 1995).

**Freedom of Religion Is an Opportunity and Protective Factor for Both Copts and Muslims**

An important example of such opportunities existing within the social structure is embodied in freedom of religion for both Copts and Muslims. Copts had faced direct hostilities in Egypt based on their religious identity. Freedom to worship without restrictions, going to church without fear, and displaying religious symbols in public without constraints meant a great opportunity for Copts to practice their faith. Muslims did not expect to be allowed to have the freedom to practice Islam and develop their own congregations. Freedom meant being allowed to have the traditional Muslim dress such as the hijab and being allowed to go to the mosque and worship. This finding reflects what Foner & Alba (2008) point out regarding the significance of
religious freedom in the United States and how practicing their religion helps immigrants adapt and integrate into society.

**Freedom from Traditional Constraints and Impositions**

Another notable opportunity among both Coptic and Muslim women is acquiring freedom in terms of women’s rights, which differed from the patriarchal norms and rather restrictive conditions they faced as women in Egypt. Freedom for women included the right to privacy, the absence of scrutiny by others and criticisms from neighbors, and not having to conform to one rigid set of norms. The sense of freedom loomed larger for women than for men given that patriarchal Egyptian society imposes culturally prescribed “moral” constraints and restrictions on women.

It should be noted, however, that this sense of freedom was relatively compromised within each group’s respective subculture, religious congregation, and ethnic enclave, since the norms and beliefs of the homeland also played out to some extent within these settings. Notwithstanding such an impediment, women who experienced the compromise of such personal freedoms also recognized that they were not as restrictive as in Egypt. This is because in the United States, women had other channels and options within society at large and away from their own subculture or congregations to exercise such freedoms. Whereas in Egypt, they could not maneuver or circumvent such restrictive societal norms and had no choice but to conform to them since they were surrounded by people who consistently enforced these expectations.

**Health and Senior Services Alleviate Stress for Participants and Their Caregivers**

An opportunity of great significance that participants benefitted from is the receipt of medical and health care services through Medicaid, despite the bureaucratic obstacles and uncertainties they had encountered initially. This vital opportunity provided participants with a
significant tool for survival in the United States. It afforded them the ability to address life-threatening ailments and chronic health conditions and pursue preventive treatments and follow-up measures. It also helped them to address certain short- and long-term personal care needs, such as rehabilitation services, nursing services, and home health aide services. It also alleviated the enormous financial pressures and concomitant strains that their sponsoring families would have incurred and that would have added more stress to family dynamics.

In the same vein, another significant opportunity covered by Medicaid available to those who lived in the borough of Brooklyn emanated from attending the adult day care center that catered to Arabic-speaking members. This program, which is equipped with a number of Arabic-speaking staff members, an activities director, and a social worker, created healthy channels for participants to manage the acculturative stressors of immigration. It provided participants with traditional meals, cultural events, and educational classes in Arabic and in English, and different recreational activities, including games, physical exercises, and intellectual stimulation. It also arranged for different trips and guest speakers. It assisted participants with transportation to their medical appointments and monitoring their health care needs. In addition, it provided assistance with benefits and entitlements, and referrals to social service programs.

Beyond these qualities and benefits, consistent with the finding of Emami and colleagues (2000) who studied the positive impact of participation in an adult day care center among elderly Iranian immigrants in Sweden, it also buffered the sense of isolation and alienation they felt as immigrants in a new environment and served as an integrative mechanism into their own, Arabic-speaking, subculture. It fulfilled the participants’ social and emotional needs for bonding, gave them a healthy outlet and a safe space to voice their concerns with one another and through partaking in support groups. It provided them with a sense of purpose, structure, direction,
consistency, togetherness, enjoyment, and familiarity knowing that they have a welcoming and an enriching place to go. The program also afforded participants and their children respite simultaneously. It gave participants respite away from the rather cluttered, demanding, and chaotic home environment and, equally important, gave them independence from their children, as they were transported back and forth by the bus belonging to the program. By the same token, it gave the children respite from transporting their parents to medical appointments, following-up on their social service and health care needs, or worrying about a socialization outlet for them. All such services addressed many of the participants’ psychosocial needs.

Living in Ethnic Enclaves Buffers Prejudices and Enhances Transnational Activities

The findings of this research corroborate existing research suggesting that living in ethnic enclave acts as a protective factor against prejudices and discrimination of the wider society (Bakalian & Bozorgmehr, 2009; Howell & Jamal, 2008; Jamal, 2005). Most participants, who lived in the ethnic enclaves of Queens and Brooklyn, denied experiencing discrimination. In fact, most participants, from both the Coptic and Muslim group, particularly pointed out that they were treated very well despite their distinctive attire or ethnic mannerisms. However, when the geographical location shifted to places that lack ethnic minorities, a few participants suffered varying degrees of prejudice and discrimination. This is exemplified by the discriminatory treatment that three participants, who lived in a majority “White” neighborhoods, reported. Ethnic enclaves also protected Arabs from the post-9/11 nativist backlash. For example, there were fewer violent incidents or hostile confrontations in the ethnic enclaves of New York City, Paterson, Dearborn, and Los Angeles, with high concentrations of Arab Americans (Jamal, 2005; Howell & Jamal, 2008). Bakalian & Bozorgmehr (2009) attribute this more positive outcome to
the fact that Arab Americans are known to wider society: as co-workers, neighbors, classmates, friends, and in other capacities which defuses prejudicial responses.

In addition to offering a protective factor against prejudice and discrimination, ethnic enclaves and communities serve as mediums to transnational activities. Transnationalism is an all-encompassing term that describes the multifaceted processes and activities which immigrants transport and maintain through their sociocultural, social, familial, and religious ties. Most participants lived in ethnic enclaves or communities in the boroughs of Brooklyn and Queens. These neighborhoods serve as the conduit of ethnic, sociocultural, and religious activities within which participants live and interact on a daily basis.

Within a short walking distance from their residences, a variety of Arabic food stores, cafes, and other ethnic businesses that carry different Arabic merchandise and products, such as traditional Egyptian attire, dresses, headscarves, hijabs, and jewelry, are found. Likewise, usually within a walking distance, the local Coptic church or mosque serves the respective community and provides different modes of assistance to newly arriving immigrants, from temporary, short-term, shelter and assistance with networking for jobs to moral support and spiritual guidance. Access to the Arabic press, media, news, television programs, and various communication channels sustained the elders’ connections to their loved ones at home, reconnected them to their roots, and provided them with a tangible and symbolic sense of continuity. Such immigrant, ethnic enclaves and communities within which participants live absorb and facilitate everyday life as they serve as an intermediary place between Egyptian and American societies.

This is consistent with what Logan, Alba, and Zang (2002) point out: that neighborhoods serve important adaptive functions for new arrivals whose customs and language are different from the majority population because they provide newcomers with social capital, affordable
housing, family ties, and a familiar culture. Newcomers temporarily live in such neighborhoods out of constraints and necessity until they are incorporated into American society to a certain degree and can transition into more mainstream settings. Such immigrant or ethnic enclaves are “Little Sicily,” “Greektown,” and “Chinatown,” and in this case “Little Egypt” in Queens and “Arabtown” in Brooklyn.

Opportunities Existing Within the Family Structure Kept Participants Positively Occupied

Another advantage was embedded in the opportunity to have positive interactions, special ties, and reciprocal affection with their children and grandchildren. In some cases, the negative experiences of conflict and strains faded and gave way to accommodation, and at times shifted to collaboration on all sides. These positive experiences overrode the downside of intergenerational conflict noted above. This double-edged relationship and the gradual shifts in immigrant family dynamics confirms what Forner and Derby (2011) describe as the other side of conflict, the theme of accommodation and cooperation among the generations.

Coptic participants, for example, often accompanied their children and grandchildren to church on Sunday, which created a bond with the younger generation, especially for women who often took care of their younger grandchildren. Their religious involvement with their grandchildren and the opportunity to teach and instill Christian values enabled them to feel partially successful in fulfilling their obligations, duties, and responsibilities. Muslim women reported a similar experience and felt good about redirecting their grandchildren to what felt as the “right path.” Despite their anxiety about, and critique of, normative differences, which was more pronounced in the narrative of Muslim women than their Coptic counterparts, a number of Muslim women felt that their grandchildren would ultimately benefit from the American progressive school and value system.
**Problem-focused Coping Embedded in Cultural and Religious Values Foster Resilience.**

Many participants utilized problem-solving coping strategies primarily or in conjunction with emotion-focused coping strategies to “bounce back” and manage immigration-related stressors. Those who had more control over their circumstances due to the availability of personal, financial, or social resources resorted to utilizing problem-solving strategies more frequently. Problem-solving strategies took many forms, but the common denominator among them was that participants addressed the root and cause of the problem directly.

**Learning English.** Consistent with the findings of the autonomy stage in Adler’s (1975) model of cultural adjustment, participants who had professional education and were from a higher socioeconomic background directed their efforts to self-empowering and self-improvement measures through education. These participants pursued learning English as they deemed it the most important pre-cursor to integration. Those efforts also reflected the Egyptian cultural values of diligence, cultivation of hard work, and self-determination. At the time of the interviews, some participants reported that they had achieved an intermediary level of fluency in English while others were still struggling with improving their basic language skills. The common denominator among such participants, however, was the belief that they can improve their chances in life in the United States by taking specific measures to learn and grow, highlighting the importance of believing in their ability, or having self-efficacy in changing the outcome of their situation.

**Utilizing social capital within family supports and religious institutions.** The impact of cultural values and beliefs on resilience became salient in how participants in this study strategically utilized the social capital within family, social service, and religious systems and services, when available, to tackle the sources of stress directly. The importance and emphasis
given to developing interpersonal connections and social networks was consistent with the Egyptian cultural values of collectivism, social reciprocity, and interdependence of the individual on family and society. Family and social support took different shapes and forms.

The gains, either through the financial or logistical supports that participants received from family members, church or mosque congregants, or community services were put to use to address their basic needs of paying for shelter, food, and clothing. In addition, some participants who experienced difficulties in caring for their personal care needs received assistance with activities of daily living (ADLs), such as bathing and dressing, and instrumental activities of daily living (IADLs), such as shopping, laundry, transportation, assistance with finances, assistance with medication, and initial and follow-up phone calls to set up and manage medical services.

The arrangement for the provision of these services were, for the most part, strategically planned and sought by those participants who were oriented to utilizing their problem-solving skills. For example, some participants learned about the different skills that different family members, church or mosque congregants, or available community services presented to them and planned their outreach to each according to their respective skills and capabilities in order to maximize their chances of receiving the help they needed. On the other hand, receiving help required that the other party was willing to offer and provide the assistance sought by those participants. If they could not, then those participants would ask somebody else for assistance. In some cases, some participants would ask their child to transport them to a doctor’s appointment or pick up necessary items for them. However, if the child could not meet such needs, then they would ask an acquaintance, a friend of the family or a church/mosque congregant to fulfill such needs as necessary.
Circular immigration. One of the most unique coping strategies for managing the psychological distress arising from family conflict and the acculturation process among participants was circular immigration. Circular immigration in this context, according to participants, entailed going back and forth to Egypt for a period time with the purpose to “clear their head and think clearly,” “regroup,” “plan their return more strategically,” “preserve some of the dignity they had left in their advanced age,” and to be able to garner sufficient resources to manage such stressors more effectively. What makes this finding distinctive in this study are two elements. The first is that the intensity of psychological distress that some participants perceived and experienced outweighed the push and pull factors that originally had forced or motivated them to come to the United States. The second is that, contrary to other participants who utilized problem-focused coping strategies through advantageously tapping into their resources to address their stressors directly and control their circumstances, participants who utilized circular immigration as a problem-focused coping strategy lacked such resources. Ironically, however, both groups—those who possessed and utilized resources and those who did not and had to go back to Egypt in a circular fashion—felt equally empowered because they had control and took direct action to address the stressors.

In the literature, the phenomenon of circular immigration refers to moving back and forth between an origin and destination country involving more than one migration and return. The literature primarily confines the discussion of circular immigration to certain categories of immigrants who repeatedly come to the United States and go to their country of origin for a period of time in order to make a living through work (Hugo, 2003; Levitt, 2001; Levitt & Glick Schiller, 2004; Massey et al., 1994). For example, often the term is used to describe labor immigration where migrant workers can earn a high income in the country of destination after
which they return to their low-cost country of origin to maximize their economic gains (Grasmuck & Pessar, 2001, Levitt, 2001; Massey, et al, 1994; Massey, Durand, & Malone, 2002). To a lesser extent, circular immigration also has been used variably to describe other situations among transnational immigrants. Examples include students, researchers, professionals, and business entrepreneurs who travel back and forth between their respective country of origin and the United States in relation to job contracts, business ventures, attending universities, or conducting research, as well as children who are sent by their parents to relatives overseas to spend a period of time there (Grasmuck & Pessar, 2001; Hugo, 2003, Levitt, 2001; Levitt & Glick Schiller, 2004; Massey, et al., 1994; Massey, Durand, & Malone, 2002; Newland, Mendoza, & Terrazas, 2008).

It should be noted that no previous research studies known to date involving elderly immigrants have documented this phenomenon in details among this particular group of immigrants. Thus, this study expands the traditional definition of circular immigration beyond what currently exists in the literature to include and describe elderly Egyptian immigrants who, as a problem-solving strategy, tend to travel back and forth between Egypt and the United States with the purpose of managing the stress stemming from the initial phase of settlement.

**Emotion-Focused Coping Embedded in Cultural and Religious Values Foster Resilience**

The findings of this study corroborate and build on previous studies that have examined the relationship between the coping process and age and found that older adults, compared to other age cohorts, show nonreactive emotion-focused coping strategies manifested in greater use of cognitive strategies of reappraisal, particularly positive reframing and acceptance of stressful situations (Aldwin, 1991; Aldwin et al., 1996; Brandstader & Greve, 1994; Costa, Zonderman, & McCrae, 1991; Diel, Coil, & Labouvie-Vief, 1996; Folkman et al., 1987; Lachman, 1986).
Such findings have been attributed to a more refined and mature repertoire of defense and coping strategies that are associated with more advanced age and accumulated life experiences, particularly during a period of changes and losses that are beyond personal control. However, little research exists about the coping strategies and mechanisms among late-in-life immigrant elders in managing acculturative stress and the adjustment process. Thus, the findings of this study are among the first to document and detail such experience in depth among elderly immigrants and could be used as a launch pad for further research.

**Cognitive strategies embedded in cultural and religious values.** The utilization of cognitive coping strategies among participants was an enduring emotion-focused approach that mirrors its efficacy in the literature as both a stress-reducing strategy and as an effective technique in treatment of mental health issues such as depression and anxiety (Gross, 1999; Gross, McRae & Ciesielski, 2012; Gross & Thompson, 2007; Mahony, Burroughs, & Lippman, 2002; Stoeb & Janssen, 2011). Among the most notable of such strategies, however, is the culturally based concept of acceptance. Acceptance involved managing the stress-inducing situation by acknowledging its presence, the inability to overcome it, and not trying to control, change, or avoid it. As one participant described acceptance, “a matter of unaltered factual reality that one must not wrestle with but one must make peace with.” For both Copts and Muslims, their language of acceptance automatically translated into Egyptian cultural expressions and phrases of contentment, satisfaction, and hope such as, “thank God,” “thank God for any and every condition,” “thank God for what He brings,” “it’s the will of God,” and “I am accepting of my fate.” For the Coptic group, it also translated into such religious expressions as, “everyone has a cross to bear” and “God doesn’t give you a cross you can’t bear.” For Muslim
participants, it translated into similar expressions of religious connotations such as, “God does not burden a person beyond his capacity” and “with every difficulty, there’s a relief.”

Other cognitive coping strategies that participants utilized included cognitive reappraisal and positive reframing of stress-inducing situations to alter the associated negative emotional response. Cognitive reappraisal and reframing involves seeing a specific situation from a different light while attributing different characteristics or values to it with the intent to dismantle the negative emotional reaction associated with the trigger. Cognitive diversion was another strategy utilized by some participants. It entails distracting themselves from thinking about a stressful situation or not dwelling on a specific stress-inducing thought. Diversion can take the form of shifting attention away from the source of stress to something else that is stress-reducing, neutral, positive, or productive. A long-term variation of cognitive diversion is avoidance or distancing oneself from, and not thinking about, a stress-inducing problem. The frequent use of culturally based humor and jokes among participants proved to be an important and often a very effective coping strategy through the reframing of, and diversion from, stressors.

In the same vein, the finding of this research confirms and builds on the findings of previous research in highlighting the importance of another cognitive strategy, reminiscence, which most participants used to remember and relive past experiences. Previous research has documented that reminiscence, generally among the elderly, can serve as a way for enjoyment and remembering good and happy times. Equally important, it can also serve as a life review process and working towards resolving past and/or present issues of change and loss through revisiting certain memories throughout one’s entire life and enhancing a sense of integration, reconciliation, closure, ego-integrity, and peace before death (Biren & Cochran, 2001;
Reminiscence, according to participants, took the form of reliving past experiences through recalling and visualizing them at the present time. Reminiscence paved an adaptive path to temporarily escape a stressful reality and revisit past memories of productivity, physical strength, independence, and affection. More importantly, reminiscence, according to participants, not only transcended time but also space and distance, as it served as a conduit to their culture and a medium of connection to their “younger” selves. For some participants, this process served to reconcile negative conditions with positive memories, as it constituted the only viable method of reorienting themselves towards positive memories of mastery and control. For some others, it provided them with a tool to address past issues, such as putting closure to unresolved conflicts, reconciling wrong decisions, and mourning plans that did not materialize.

**Behavioral strategies embedded in traditional gender roles and values.** Consistent with previous research about the utilization and efficacy of behavioral coping strategies among immigrants of different age groups in the management of acculturative stress (Acharya & Northcott, 2007; Harris, Cronkite, and Moos, 2005; Lee & Chan, 2009), this research confirms and presents further evidence of the importance of behavioral and physical actions in the coping process among elderly immigrants. To a certain extent, some participants among men and women alike, particularly those who had physical strength, utilized their skills, whether stemming for professional, manual, or general life skills, to cope with stress through behavioral channels. There were gender differences consistent with Egyptian traditional norms and values, among men and women, however, in how they utilized behavioral strategies. Men had a tendency to do laborious physical work, such as building sheds and mowing lawns, and taking
prolonged walks and promenades; women had a tendency to cook, sew, clean, organize, and take care of children. Regardless of such differences, such actions helped participants feel busy, utilized their creative selves and skills, and equipped them with a sense of symbolic control over certain situations that compensated for lack of control in others. In addition, the actual physical activity was beneficial in reducing stress, as participants felt calmer after having expended their energy on positive and goal-oriented actions.

Utilizing relationships within family and religious support systems. Participants who found it challenging to utilize the social capital embedded in their support systems steered their coping efforts toward sharing their troubles with significant others. Significant others through whom participants tapped emotional support, in this context, included a wide range of people from their social circle, including family members. For those who were married, support from the spouse was central to Egyptian immigrants’ coping strategies and often cited as a source of emotional support during times of difficulty. This was particularly the case when the expected support from the children did not materialize. Couples emphasized that they received indispensable emotional support from their spouses that helped compensate for the lack of support in other areas. The children and grandchildren also came as a favorable choice to participants. Some participants had a strong and positive relationship with their children and/or their grandchildren through which they received emotional support. For women who lacked emotional support from their families in the US, they resorted to calling their siblings in Egypt to “vent”. Other women looked somewhere else to fulfill their emotional needs of support.

The first alternative for the Coptic group is the priest of confession, called Abouna, who also provided counseling as well as moral and spiritual guidance and support. Similarly, for the Muslim group, the female spiritual leader for women, called da’via, and the Muslim cleric and
scholar, called Sheikh, provided advice, moral support, and spiritual guidance. Another avenue through which participants derived emotional and moral support is from their respective church or mosque congregants who were also instrumental in providing emotional support and guidance. For those participants who attended the adult day care center in Brooklyn, they had more of an exposure to other Arabic-speaking, members from whom they sought comfort and emotional support. Emotional support took on different forms and included venting negative feelings and experiences, seeking advice with certain decisions, and addressing certain problems.

**Utilizing religious and spiritual values, rituals, and philosophies.** This research findings related to the effectiveness of religious and spiritual coping among elderly Egyptian immigrants support previous studies that found it to serve as a protective factor of buffering effect against psychological distress (Brown, Caldwell, & Antonucci, 2008; Chatters, Taylor, Jackson, & Lincoln, 2008; Kim, 2013; Lee & Chan, 2009; Nelson-Becker, 2005; Nelson-Becker & Canada, 2008; Pargament et al, 2004; Soonthornchaiya & Dancy, 2006), and further contribute to that area of important research. In the same vein, the findings also serve to support sociological research about the importance of religion in the integration process of immigrants. Foner & Alba (2008) assert that religion is seen as an integrative tool into American society and an adaptive measure that eases the transition of the immigration experience. It is a mechanism that helps immigrants cope by providing them with tools for settlement such as help with employment, socialization, a sense of belonging, community, and spiritual guidance.

Religion and religious identity was a source of strength and an instrumental method of coping with adversities and challenges that Egyptian elders, regardless of their religious differences, have encountered post immigration. For Copts and Muslims alike, religious faith is essential as it permeates their daily thoughts, worldviews, feelings, language expressions, and
deeds. The coping efforts and behaviors among Copts revolved around their religious and spiritual faith: going to Sunday mass, attending prayer services regularly, serving in spiritual meetings and religious activities. Copts also coped through partaking in church-related social activities and functions and volunteering activities to help out others in need. In the same vein, Muslims coped through various religious activities: attending mosque prayers regularly and partaking in the religious and social activities in the affiliated Islamic center, and volunteering their efforts to help others. It was through these engaging and volunteering activities, for participants from both groups, that they derived some sort of engagement, continuity, integration, high self-esteem, and positive self-image.

Additionally, as discussed earlier, for Muslims and Copts alike, religious philosophies of coping also are intertwined with cultural philosophies of coping and serve as the basis for managing stress and distress for them. Religious rituals in particular serve as a medium of healing for elderly Egyptians because they provide certain explanations to suffering. They also act as integrating mediums that fortify their sense of belonging. Due to the familiarity of religious and spiritual practices, partaking into them serve to connect elderly Egyptian immigrants with their past, with other congregants, and with the culture in which such practices and rituals exist. Thus, religious and spiritual beliefs and practices restore a sense of equilibrium as they counteract feelings of isolation, loneliness, estrangement, disengagement, and discontinuity that result from immigration, and which become a protective factor against depression and anxiety.

**Ethnic Identity Is a Source of Pride, Strength, and Resilience**

Racial and ethnic identity plays an important role in shaping immigrants’ adjustment process, as it can either impede or enhance their integration to the new society (Alba & Knee,
The findings of this research confirm previous research findings that strong identification with an ethnicity or culture tends to be a buffer against the stress associated with acculturation (Mossakowski, 2003; Murphy & Mahalingam, 2004; Smith, 2006). For elderly Egyptian immigrants in this study, their strong ethnic identification was a protective factor against the uncertainties, losses, and stressors they encountered as a result of the transition. Such ethnic pride anchored and grounded them in their cultural values and provided them with a mechanism of orientation, strength and resilience.

More specifically, the findings of this research both compare and contrast to previous research findings that examined racial and ethnic identity among Arab groups. It should be noted that ethnic and racial identification among Arab American groups is complex and multifaceted. Differences in religion, ethnic heritage, socioeconomic and education status, and skin color, in addition to sociopolitical circumstances of the host country which historically has attributed different racial labels to Arab immigrants, have resulted in multiple layers of identity (Ajrouch & Jamal, 2007). Consistent with findings from previous research and similar to their Christian (i.e., Lebanese Maronite and Iraqi Chaldeans) counterparts (Ajrouch & Jamal, 2007), Copts in this study did not embrace the pan-ethnic term “Arab” or “Arab American,” as they felt that it did not describe or apply to them. Nonetheless, Coptic participants took pride in their Arabic language, customs, cultural values, and traditions embedded in their Egyptian culture and which they shared with other Arab groups.

Contrary to findings with previous research suggesting that Muslim participants generally are more embracing of the ethnic term “Arab” or “Arab American” (Ajrouch & Jamal, 2007; Jamal & Naber, 2008), most Muslims in this study, similar to their Coptic counterparts, did not embrace the ethnic term “Arab” or “Arab American,” as they felt that it did not describe them
and rather gave supremacy to their national and ethnic Egyptian identity. Even among the few Muslim participants who felt that the term “Arab” described them, they still gave precedence to their Egyptian ethnicity and reported that identifying as “Arab” came “secondary” to their “primary” identity as Egyptian. Muslims also took such pride in their Arabic language as well as traditions and cultural elements they share with other Arab groups.

Moreover, both Copts and Muslims in this study found it difficult to separate their religious and ethnic (Egyptian) identities. The majority of Copts described the two identities as intertwined in a unique way with no preference given to one or the other. While speaking of bittersweet experiences as a marginalized minority in Egypt, the Copts also felt a sentimental longing for their land of birth, belonging, and identity. In other words, the Copts showed both strong ethnic and religious identification, placing a high value on being Christian and Egyptian. Most never felt that they had to choose one over another because for them the word “Coptic” meant “Egyptian Christian” and embodied both identities. As one Coptic participant explained, “the word Copt means that I am an Egyptian Christian, I cannot be one without the other. They are both important to me. Egypt is a country that lives within me; it’s not me that I lived in Egypt.” Muslims also did not separate their religious and ethnic (Egyptian) identity. Similar to their Coptic counterparts, most Muslims gave equal weight and pride to being Muslim and Egyptian. When asked to give priority to one of their other identities, most Muslims reported that the two identities as equally important and are intertwined.

Furthermore, the findings of this research generally contrasted the findings of previous research which has established certain associations between racial identification and religion or ethnicity among those with Middle Eastern/Arab ancestry. More specifically, Ajrouch and Jamal (2007) found that Christians identified more as “White,” whereas Muslims, who are also
classified as “White” on the census, tended to identify more as “other.” In terms of ethnicity, Ajrouch and Jamal (2007) found that Lebanese/Syrians were more likely to identify as “White” compared to Yemenis and Iraqis. However, in this study, most participants from both groups, whether Christians or Muslims, were rather perplexed and had difficulty deciding on how to answer the racial question. On the one hand, most participants from both groups did not perceive themselves as “White,” contrary to their categorization as such by the US Census. Some saw themselves as “Brown,” “Tanned,” “Mediterranean,” “Middle Eastern,” or a number of combinations of these orientations. While a few referred to themselves as “ethnic Whites” but “not really White” as they compared themselves to others from a European background. However, most participants ultimately felt that the concept of race was irrelevant and could not quite identify with a certain “race or “color,” as their supreme sense of identity and pride was entrenched in their “Coptic” or “Egyptian” ethnic identity.

**Gender Differences in Coping Styles and Patterns**

The gender of the participants appeared to play a role as well in how they chose coping strategies. In both the Coptic and Muslim groups, male participants showed more resilience and greater “acceptance” than women in tolerating normative differences. Eventually, and despite their disapproval, however, many women gradually accepted those differences and worked through them effectively. Some women, for example, tried to model traditional values and mannerisms to their children and grandchildren, such as attending prayer services regularly, speaking in a lower tone of voice, and dressing “modestly.”

Furthermore, a number of women felt safe to cry during the interview and share their symptoms of depression or anxiety as they made references to certain losses. This researcher had to stop a number of interviews to address such issues and the participants’ underlying feelings,
and resumed the interviews again when the participants gave consent. In a number of instances, this researcher further provided these women, upon their receptivity, with referral sources for mental health treatment that accommodated Arabic-speaking clientele. It was noted also that women spent more time praising their children’s achievements as they took satisfaction in their children’s success. Another notable difference among female participants is that they utilized their interpersonal skills and strategies in seeking relationships with others in their social circles as they sought emotional support.

Male participants, on the other hand, did not show the same tendency as they did not talk about their feelings, as their references to emotions were brief and rather focused on the facts. As discussed earlier, it was noted that male participants cope with stress in different ways than women. Men, for the most part, were observed during the interviews to be generally more cautious and reserved about expressing themselves and less inclined to verbalize their feelings. Men mainly, with insignificant exceptions, relied on either problem-focused coping or utilized emotion-focused coping through behavioral means. These findings support previous research on sex differences in coping styles (Diel, Coil, & Labouvie-Vief, 1996; Ptacek, Smith, & Dodge, 1994; Stein & Nyamathi, 1999; Tamres, Janicki, & Helgeson, 2002).

**Limitations of the Study**

There are several limitations that must be taken into account when examining the findings of this study. As is frequently the case in qualitative research, the sample size was small. In addition, most participants lived in the ethnic enclaves of Queens and Brooklyn, with the exception of a few who lived on Long Island and Staten Island. Moreover, many participants interviewed for this study filtered their experiences through the lens of the Egyptian revolution and its aftermath. Thus, their experiences of losses, grief, acculturative stress, opportunities, and
coping strategies are not representative of the general US population of elderly Egyptian immigrants and may be different from those elderly Egyptian immigrants who had immigrated before the Egyptian revolution or compared to those living elsewhere in the United States. Similarly, such experiences may be different from other Arabic groups. Therefore, the results are unique to the participants and the context of this study. The results should be regarded with caution before applying them more generally to a larger immigrant population of Egyptian elders or other Arabic-speaking ethnic groups.

This study was retrospective in nature. The data was based on the participants’ memories and self-reporting of past experiences that occurred between 2 to 10 years ago. Most participants were able to remember their experiences and elaborate on them. Few others had a little difficulty remembering details of their experiences, particularly if they happened in the distant past and as a result may have impacted their narrative.

This study was a cross-cultural research endeavor. The interviews simultaneously were translated and transcribed into English and then coded in English. Although I preferred this method—rather than code the transcript in Arabic, translate it into English, and subsequently code it—to avoid the loss of meaning. Nonetheless, the translation process may have created errors or caused loss of meanings which were embedded in the native language. I attempted to address this limitation by summarizing each interview in Arabic and comparing it to the English translation of each interview before data analysis.

Lastly, researcher’s bias, embedded in my assumptions and preconceptions, may have influenced the results. To address this potential pitfall, I exercised reflexivity through note taking and reflecting on both my professional and personal experience, listening to the narratives of the participants repeatedly, and identifying the potential biases before data analysis.
Implications for Social Work

The results of this present study have several implications for social workers who specifically practice with the elderly, Arabic-speaking immigrant population, and generally for those who practice in the field of immigration, aging, and mental health. This study gives a better understanding of the immigration experience, including the context of immigration, context of reception, challenges, difficulties, and potential stressors arising from migratory loss, grief, and acculturation as well as opportunities, rewards, coping strategies, and risk and protective factors that either hinder or impact the adaptation process among Arabic-speaking immigrants in late adulthood. This study may help practitioners understand the multidimensional issues that those immigrants encounter and struggle with, assist them in connecting with community resources and services, and help them manage the stressors of daily life. It may also help practitioners understand their clients’ expectations, family relationships, and roles within a developmental and cultural context, and help them rebuild a sense of competence and resolve issues that impede the achievement of integrity in the last phase of their life.

More specifically, this study provides mental health practitioners with a better understanding of risk and protective factors and processes which impede or enhance physical health, mental health, and psychological well-being. It provides a picture of how Egyptian religious and cultural values impact coping approaches and patterns in different contexts. This study also underscores the importance of cultural competence in social work practice in general and the therapeutic process in particular. It conveys the rather unique cultural dynamics of the Egyptian population and how social work professionals must strive to understand their meanings in order to provide effective services. Notwithstanding that, it also highlights the variations that exist within a single culture and how the same cultural elements are utilized differently among
people that speak the same language according to such variables as religion, socioeconomic status, educational background, gender, marital status, and different family dynamics of support.

Despite the similarities that bond Arab immigrants through language, cultural values, norms, and traditions, their specific groups’ experiences may be different by virtue of belonging to diverse ethnicities, sociopolitical environments, national boundaries, and religions. Notwithstanding differences, however, it is through the understanding of common denominators of such values, norms, and beliefs that practitioners are able to achieve at least elementary ways of relating to their clients from such backgrounds, approaching their assessment with care, and serving their psychosocial needs with sensitivity, empathy, and competence.

The findings of this study suggest the paramount importance of developing programs that cater to the needs of this population, namely the need for subsidized housing, adult day care centers, and culturally competent and language accessible mental health programs. A great deal of angst can be alleviated if there is availability of subsidized senior housing, particularly section 202, that effectively caters to the needs of this population. The living arrangements described by elderly Egyptian immigrants created stressors and distress for them and for their children in most cases. The number one wish for these participants was to get their own little “shelter” contained within “4 walls” in order to exercise some control over their lives. After the interviews, I helped several of those participants apply for section 202, senior housing, through filling out applications.

The existence of an adult day care center and affiliated services has been shown to be very helpful and effective in alleviating stressors for the elderly and immensely curbing their sense of loneliness, isolation, alienation, and disengagement from society. It has provided them with a sense of belonging, a medium of continuity, and a tool of integration. It has also paved a
healthy channel of communicating in their native language and in English, forging a bond with others in similar situations, and partaking in recreational activities that involve the physical, cognitive, emotional, and social domains. It also has provided members with social services, assisted in transporting them to medical appointments, and monitored their health care needs.

In addition, the program has arranged for lectures that are geared towards enhancing the members’ health and mental health. It has catered to their dietary and transportation needs by providing a van that picks up and drops off members as well as ethnic meals and nutritious snacks. It has arranged for trips of all sorts that enriched their exposure to different lifestyles that they otherwise would have been unable to learn about and experience had they not partaken in the adult day care center. By the same token, it gave them respite from the often stressful and isolative home environment and reduced their dependence on their children. In turn, it gave their children respite from the stresses of caregiving, driving their parents to medical appointments, following-up on their health care needs, and finding them a healthy channel for socialization. Thus, it is imperative that future endeavors are geared toward replicating this model of service for the elderly population of different ethnic backgrounds.

Equally important is the development of mental health services and programs that cater to the psychosocial and mental health needs of ethnic elders, including elderly Arabic-speaking immigrants. Based on this research’s findings, in addition to my professional observations and experience as both a mental health clinician and a geriatric consultant, there is an extreme shortage in geriatric programs in general and mental health programs in particular which are geared toward addressing the psychosocial and mental health needs of the Arabic-speaking elderly. In the same vein, this extreme shortage in programs is analogous to a parallel shortage in Arabic-speaking mental health practitioners and geriatric social workers. Through the interviews,
it became apparent that several participants have experienced at one point or another Post
Traumatic Stress Disorder (PTSD), depressive and/or anxiety symptoms. Most reported that they
have no reservation in talking with an Arabic-speaking mental health practitioner to help address
and alleviate their symptoms. However, they didn’t know of any mental health practitioners who
would fulfill that need for them. Some participants reported seeing a psychiatrist or their family
practitioner at different points post immigration, and that they were taking psychotropic
medications. However, those medications merely helped to “take the edge off” without providing
them with the means to address their distress. Again, I made efforts in connecting some of these
participants to the rather few Arabic-speaking clinicians I know in their respective borough of
residence. More efforts should thus be exerted toward the direction of developing such programs
or services and creating incentives for Arabic-speaking students and mental health professionals
through educational scholarships and grants to pursue such programs of study and expertise.

As previously discussed, participants in this study showed resilience in the face of
distress. They effectively utilized opportunities and tapped into available resources to manage
the stressful demands of their new environment. They particularly utilized their cultural and
religious philosophies and activities to make sense of, and cope with, their stressors. Thus,
mental health services and programs should identify and build on the individuals’ strengths and
protective factors to promote empowerment, encourage growth, and foster resilience among
them. Of particular importance is helping elderly immigrants to reorient themselves to past
experiences where they exercised control and efficacy. It is equally important to ensure their
connection with familiar cultural milieus and religious practices which can provide them with a
sense of connectedness and safety. For those who experience Post Traumatic Stress Disorder or
mood disorders due to pre-immigration or post-immigration trauma, mental health interventions
and activities should be tailored to promote a sense of safety and calming, hope, self-efficacy, and connectedness among them (Hobfoll et al., 2007).

Additionally, in the policy domain, I join my voice to those who argued against the five-year ban on public benefits to elderly immigrants (Treas and Mazumdar, 2004; Yoo, 2002). The welfare reform law (PRWORA) of 1996, which restricted elderly immigrants’ access to social welfare benefits, was a reaction to the depiction of immigrants as irresponsible, negligent, and abusive of public assistance (Fujiwara, 2005; Yoo, 2002). Due to their limited labor market involvement, elderly immigrants were portrayed further as non-contributing members of society and thus unworthy of public assistance (Fujiwara, 2005; Yoo, 2002). As shown in the findings, such restrictions to Social Security Income benefits, public assistance, and food stamps negatively impacted participants. Financial constraints increased their dependence on their children which simultaneously suffocated their voice within the family system and decreased their sense of self-determination.

Even though participants in this study were not involved in the labor market, due to circumstances beyond their control, they nonetheless provided their children with domestic services and respite from different parental responsibilities. They performed laborious house chores and time-consuming tasks such as food shopping, cooking ethnic meals, and cleaning. They also performed wide-ranging child care activities, as they were the caregivers, language teachers, and “spiritual guides” to their grandchildren. They also became the “shock absorbers,” and “emotional containers” of their children’s stressors. These services and activities that participants rendered affectionately, and free of charge, helped maintain the cohesion of the family system.
Therefore, the analysis and evaluation of any immigrant policy and its impact on the welfare state must go beyond a mere economic, cost-benefit, calculus. In this case, it must consider the multidimensional contributions of the elderly to their immigrant families who often struggle with their own adjustment, and whose reliance on such support is essential for their advancement in the labor market and the American society. Thus, I urge policy makers to take into consideration the multidimensional aspects of this policy and its impact on the welfare of immigrant families.

**Directions for Future Research**

All of the existing research on psychosocial and cultural adjustment processes of elderly immigrants, including this study, is cross-sectional in design as they are conducted retrospectively at a single point in time. Future studies should explore an understanding of the processes of adjustment and adaptation over time through a longitudinal design at different points in time. The results of this study suggest that the intensity, types, and nature of migratory loss and grief, acculturative stress, opportunities, rewards, and coping strategies experienced by participants all are impacted by different variables and different periods of the immigration process. More research is needed to examine the immigration and adjustment experience through the lenses of those different variables and other regions in the United States. Future quantitative studies would be useful in further testing the validity and reliability of those characteristics.

This study also found a number of coping and adjustment strategies. Future quantitative and qualitative studies should further examine the effectiveness of these strategies in the context of various adaptation experiences of other Egyptian immigrants. Replication studies are also recommended as they would test and enhance the findings of this study.
All studies on assimilation into the American culture have been based on a sample of younger, first-generation immigrants and their second-generation children. Such studies have found the assimilation has become segmented because of the diversity of contemporary immigrant flows and the complexity and heterogeneity of American society today. There are different paths along which the process of assimilation takes place and different sectors of the society to which immigrants and their children assimilate. The elderly don’t achieve integration and assimilation into the American culture in such terms or according to existing theories. In other words, due to their intricate circumstances, existing theories of assimilation do not apply to elderly immigrants, and thus a new model, with a more appropriate developmental and psychosocial orientation, must be formulated.

Given the complex, unique, and peculiar circumstances of Arab groups in the United States, among whom are the elderly immigrants, more nuanced research is necessary to examine and compare how recent sociopolitical events differentially impacted them and transformed their communities. A major empirical question is how interactive variables such as religious affiliation, context of immigration and reception, geographical location, socioeconomic status, citizenship status, community support, and access to social welfare services have impacted their experience. Another related question is how these “risk and protective factors” have shaped their responses in the post-9/11 era and impinged on their health, mental health, and coping strategies, and whether they have taken active measures to assimilate versus embracing ethnoreligious identity and remaining in ethnic enclaves. Another important question is related to the “Arab Spring” and its aftermath and how the ensuing chaos has shaped their immigration experiences and patterns in the United States.
Conclusion

The present study offers rich descriptions of the immigration experience among elderly Egyptian immigrants that also serves as the basis for understanding the experience of elderly Arab immigrants to the United States. Based on the lived experience of (30) Egyptian immigrants interviewed for this study who have immigrated to the United States after the age of 60 and live in New York State, rich qualitative data through thematic analysis formed the basis of understanding the phenomenon of immigration in late adulthood among this group. Through the understanding of the pre-immigration push and pull factors, challenges, difficulties, losses, stressors, opportunities, rewards, strengths, skills, coping strategies, risk and protective factors that impact their health and mental health and either impede or enhance the process of adaptation among them are better understood.

A number of participants, particularly those who have the personal, financial, and social resources exemplified in high educational attainment, financial means, language proficiency, social, and emotional support, have shown an optimal adaptive capacity to this transition. While other participants, particularly those who lack high educational attainment, lack financial means, and lack adequate social support, invariably have shown less of a tendency to adapt to their circumstances and have reported a higher degree of psychological distress exemplified in depressive and anxiety symptoms. Those who were able to exercise some degree of self-determination through the utilization of opportunities and coping strategies also achieved a greater degree of adjustment. Also, regaining a sense of continuity, engagement, and meaning in life through familial responsibilities, volunteering opportunities, social gatherings, and spiritual involvement all have been conducive to their positive mental health and overall well-being.
It is imperative that older immigrants get the attention and services they deserve through research and funding for programs. This study is used merely as a launch pad for understanding the complex and multifaceted circumstances of elderly Arab immigrants. As of this writing, hundreds of thousands of people in the Middle East, from different age groups and backgrounds, are suffering daily as a result of wars, ethnic strife, religious extremism, and intolerance of all kinds, particularly the vulnerable among whom are targets such as children, women, and the elderly. Those who are able to flee such disastrous conditions to the Western Hemisphere, among which is the United States, bring with them their painful memories, unique stories of survival, and quest for basic freedoms. The elderly among them is of particular interest due to their vulnerabilities and special needs.

With each story I listened to and heard, I was deeply touched, profoundly transformed, and genuinely honored in different and special ways. Through the participants’ narratives, their zest for life, resilience, strengths, struggling to do the best of their circumstances, and making sense of their life stories, it was apparent that they were trying to achieve a sense of integrity in their last chapter of their lives. It is my hope that this study motivates additional research toward a greater understanding of the immigration experience among vulnerable populations of immigrants, particularly those who are refugees and asylees, including among whom are the elderly and ethnic minorities who come from Arab countries. Future research should replicate, build on, and expand the themes in this research. Of particular interest in future research is understanding the unique vulnerabilities and strengths in the process of stress and coping, and the impact of risk and protective factors on this process, among elderly Arabic-speaking immigrants, so better services can be tailored to serve this vulnerable population.
My name is Ihab Girgis. I am a PhD student from the Social Welfare Doctoral Program at the Graduate Center, City University of New York. I would like to invite you to participate in a research study about the immigration experience of elderly Egyptian immigrants.

The purpose of this study is to better understand the challenges and opportunities that elderly Egyptian immigrants face once they settle in New York.

You may participate if you have immigrated to the United States after you turned 60 years of age and have been here for at least 2 years. The research findings will be used to better serve the needs of older Egyptian immigrants.

The interview will last from one to two hours. With your permission, the interview will be tape recorded. Your participation in this research study is voluntary, and you may withdraw from the study at any time. The information gathered during this study will remain confidential.

As a token of appreciation for your time, you will be given a $15.00 gift card from a department store.

If you have any questions about this study, or if you would like to participate, please call Ihab Girgis @ (917) 648-0885.

Thank you for your consideration
Ihab Girgis
نشرة تجنيد لدراسة بحثية

اسمي إيهاب جرجب. أنا طالب دكتوراه في الخدمة الاجتماعية في مركز الدراسات العليا، جامعة مدينة نيويورك. وأود أن أدعوكم للمشاركة في دراسة بحثية عن تجربة الهجرة من المهاجرين كبار السن.

والغرض من هذه الدراسة هو فهم أفضل للتحديات والفرص التي تواجه المهاجرين كبار السن المصريين بمجرد الاستقرار في مدينة نيويورك.

يمكنك المشاركة إذا هاجرت إلى الولايات المتحدة بعد بلوغ الستين من العمر وهنا منذ ما لا يقل من عامين. سيتم استخدام نتائج البحوث لخدمة احتياجات كبار السن من المهاجرين.

تستمر هذه المقابلة من ساعة إلى ساعتين وسوف تكون مسجلة على شريط. مشاركتكم في هذه الدراسة البحثية طوعية، ويمكنك الانسحاب من الدراسة في أي وقت. المعلومات التي يتم جمعها خلال هذه الدراسة سوف تظل سرية.

تقديرًا على وقتك سوف تحصل على بطاقة هدية قيمتها 15.00 $.

إذا كان لديك أي أسئلة حول هذه الدراسة، أو إذا كنت ترغب في المشاركة، يرجى الاتصال بإيهاب جرجب @ 858-648-917 (917).
APPENDIX B

INFORMED ASSENT TO PARTICIPATE IN A RESEARCH STUDY

-Title of Research: The immigration experience among elderly Egyptian immigrants
-Principal Investigator: Ihab Girgis, LCSW
-Phone Number of Principal Investigator: (917) 648-0885

You have been invited to participate in a research study being conducted at CUNY Graduate Center based in Hunter College School of Social Work. The following information will explain the purpose of the study, what you will be asked to do, and the potential risks and benefits. You should ask questions before deciding whether you wish to participate, or at any time during the course of the study.

The goal of this study is to gather information about and better understand the challenges and opportunities that elderly Egyptian immigrants encounter as a result of their immigration experience to the United States, and how they cope with such transition. You are being asked to participate because you were identified as a person who immigrated to the United States at age 60 or older from Egypt. I am interested in learning about your own immigration experience.

1. PROCEDURES. Participation in the study involves completion of a short demographic data collection sheet and answering series of questions during a face to face interview with the principal investigator whose name is mentioned above. The interview will last for approximately one hour and will collect information about your immigration experience and the challenges it created for you. The interviews will be audio taped by the researcher and later transcribed for the purpose of data analysis. The interviews will be conducted at a setting that is mutually agreeable to the participant and the researcher.

2. RISKS. Potential risks include possible emotional feelings of sadness when asked questions during the interview. Participation in this research may cause a loss of privacy. All names and information given in response to survey questions will be stored in a locked cabinet at a secure location.

3. CONFIDENTIALITY. If you agree to be in this study, we will collect information that identifies you. We will only collect information that is needed for the research. The information gathered during this study will remain confidential in a locked drawer during this project. Only research personnel will have access to the study data and information. All transcripts and summaries will be given codes and stored separate from any names or other direct identification of participants. There will not be any identifying names on the tapes, and participants’ names will not be available to anyone. You will not be identified by your name in study records or publications. All audio tapes and survey materials will be disposed of when the study is complete. The results of the research will be published in the form of a graduate paper and may be published in a professional journal or presented at professional meetings. The information will help social workers better understand the immigration experience among elderly Egyptian immigrants and how to provide them with appropriate and quality services.
4. BENEFITS. The anticipated benefit of participation is the opportunity to discuss feelings, perceptions, and concerns related to your immigration experience.

5. COSTS. There is no cost to you for participating in this study.

6. COMPENSATION. As a token of appreciation for your time, you will be given a $15.00 gift card from a department store.

7. QUESTIONS. If you have any questions about the study, you may call the above investigator. If you have questions about your rights as a research subject, or concerns about being in the study, you may contact the Office of the Institutional Review Board (the committee that oversees research at this institution).

8. PERMISSION. Your participation in this research study is voluntary. You have the right to refuse. If you do not join the study you will not be penalized or lose benefits to which you are entitled. If you join the study, you may withdraw at any time during the study without having to give an explanation or incurring any penalty.

You have read the above description of the research study. You have been told of the risks and benefits involved and your questions have been answered to your satisfaction. A member of the research team will answer any future questions you may have. You voluntarily and willingly agree to participate in this research study being conducted by Ihab Girgis, LCSW, a doctoral candidate in Social Welfare at Hunter College School of Social Work and know that you can withdraw from the study at any time without penalty. By signing this form below, you agree to participate in this study.

YOUR NAME:___________________________________________

I agree to give my consent for my participation in this study.

__________________________________________________________________________

YOUR SIGNATURE        Date
ملحق (ب)

الموافقة على المشاركة في مشروع بحثي

عنوان المشروع: تجربة الهجرة من المهاجرين العرب كبار السن

الباحث الرئيسي: إيهاب جرجبس طالب دراسات عليا

كلية سيلبرمان للعمل الاجتماعي في كلية هنتر بجامعة مدينة نيويورك

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موقع الدراسة: كنيسة القديس أبراهام القبطي الإرثوذكسية

المركز الإسلامي الأمريكي في كويز

مقدمة / الغرض: أنت مدعو للمشاركة في دراسة بحثية. وتجرى الدراسة تحت إشراف إيهاب جرجبس، طالب الدراسات العليا للعمل الاجتماعي في كلية هنتر بجامعة مدينة نيويورك. وغرض هذه الدراسة هو جمع معلومات حول وفهم أفضل للتحديات والظروف التي تواجه المهاجرين المصريين من كبار السن نتيجة لتجربة الهجرة إلى الولايات المتحدة. نتائج الدراسة قد تساعد على تحسين الخدمات للمهاجرين كبار السن الناطقين بالعربية.

المصادر والمخاطر المحتملة: مشاركك في هذه الدراسة قد تشعر مشاعر من الحزن. إذا واجهت مثل هذه المشاعر نتيجة لهذه الدراسة، ستمارك معنا إذا كنت ترغب في تخلي هذا الجزء من المشاركة. إنهائها تماما، الحديث عن ما يزعجك، أو إعطائك بيانات الاتصال وكأهلي الخدمات الاجتماعية التي تحتاجها. قد يسبب المشاركة في هذا البحث فقدان الخصوصية أو إنتهاك للسرية. لذا، سنستخدم جميع الأسماء والمعلومات المقدمة ردا على أسئلة الاستطلاع في خزانة مغلقة في مكان آمن.

الفوائد: لا توجد فوائد مباشرة. ومع ذلك، المشاركة في الدراسة قد تقدم معلومات عن شأنها المساهمة في مساعدة المجتمع المصري في أمريكا.

طوعية المشاركة: مشاركك في هذه الدراسة طوعية، وقد تقرر عدم المشاركة بلا انحياز، عقوبة أو فردان للفوائد التي تحقق لك خلاف ذلك. إذا قررت ترك الدراسة، يرجى الاتصال بالباحث الرئيسي، إيهاب جرجبس، لإبلاغه القرار.

الاعتبارات المالية: المشاركة في هذه الدراسة لا تشمل أي تكاليف للمشارك. إذا قررت المشاركة، سوف توفر لك بطاقة هدية بقيمة $15.00 بعد الانتهاء من الدراسة.
السرية: وسيتم جمع البيانات خلال مقابلة معك. من شأنها أن تكون مسجلة باستخدام جهاز تسجيل صوتي. لن يستخدم الباحث اسمك لحماية السرية الخاصة بك. سيتم إعطاء كل شخص عداً فقط وهذا العدد سوف يصبح جزءًا من المعلومات التي يتم جمعها. وسيتم إعطاء رمز لجميع النصوص والملخصات و سيتم تخزينها منفصلة عن اسمك والمعلومات الأخرى التي تعرف لك مباشرة. لن يكون هناك أي أسماء على الأشرطة السمعية، وأسماء المشاركين لن تكون متاحة لأي شخص. وسيتم تخزين كافة الأشرطة في ملف مشفر بجهاز كمبيوتر أو في درج ملف خلال هذا المشروع وستكون هذه المعلومات متاحة لأعضاء فريق البحث فقط. لن يتم تحديد المشارك بالاسم في سجلات الدراسة من المشورات. سيتم التخلص من جميع الأشرطة السمعية ومواد الدراسة عند الانتهاء من الدراسة. وسيتم نشر نتائج البحث في شكل وثيقة دراسات عليا وقد تنشر في مجلة مهنية أو تقدم في الاجتماعات المهنية في المستقبل.

للأسئلة / الاتصال بالأشخاص التالية: إذا كان لديك أي أسئلة حول البحث الآن أو في المستقبل، يجب عليك الاتصال بالباحث الرئيسي، أي: جرجس على: (917) 648-0885 أو من خلال البريد الإلكتروني: igirgis@gc.cuny.edu.

أو من خلال البريد الإلكتروني: Hunter College Human Research Protection Program “HRPP” office at (212) 650-3053.

إذا كان لديك أي أسئلة تتعلق بحقوقك كمشارك في هذه الدراسة، يمكنك الاتصال بالرقم التالي: HRPP@hunter.cuny.edu.

بيان الموافقة: "قد قررت الوفاء أعلاه من هذا البحث وأنا أفهمه. لقد أبلغت عن المخاطر والمنافع المشتركة، ولقد تمت الإجابة على أسئلتي، ولقد أدركت أن أي أسئلة في المستقبل قد تتم الإجابة عليها من قبل الباحث الرئيسي للدراسة. أنا أتفق طوعاً للمشاركة في هذه الدراسة.

تتوقع هذه الامتنان لم يتنازل عن أي حق من حقوقي القانونية.

وستعذبي لسخة من هذا البيان.

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The purpose of this interview is to better understand the immigration experience of elderly Egyptian immigrants in the United States. I am interested in learning about your own immigration experience. Your input and experience will be very important in helping me develop appropriate initiatives, strategies, and services to better address the needs of Egyptian and Arab elders in the United States. The interview will ask you different questions about the reasons for your migration, your life in the United States, and the struggles and opportunities you have encountered until now. It should take between an hour to two hours to complete this interview.

The interview is voluntary. You do not have to participate if you do not wish to. You can stop at any time without having to give a reason. If you do not wish to answer specific questions, you can skip them. Your name and other personal information will not be shared with anyone outside the research team. Your identity and participation in this study will be kept strictly confidential. Any potentially identifying information that you discuss will be removed when the interview is transcribed. Your answers will not be shared with any organizations or individuals.

Dimension 1: Context of Exit: Push and Pull Factors

1. Tell me about your life in Egypt before you migrated?
2. Why did you leave Egypt? Describe the circumstances during which you left.

Dimension 2: Context of Reception & Settlement

3. How would you describe your experience upon first arriving in the US?
4. Do you live in your own place or with family members? What are the challenges?
5. What is a typical day of yours like? What are the changes in your daily roles?
6. What impact has the move from Egypt to NYC had on your family relationships?
7. Have you developed relationships with people outside your family? What are they?
8. What is your experience with people from the mainstream culture in the US?
9. Can you tell me about your current financial situation? Any financial constraints?
10. Have you needed any help with housing and social services?
11. How would you describe your health since you came to the US?
12. Have you ever felt lonely, anxious, stressed, or worried? If yes, tell me more
13. Have you had new experiences, opportunities since you came to the US? Tell more

Dimension 3: Coping Strategies and Resources

14. Given your overall experience, can you tell me about how you generally managed when moving here as an older person? And what helped you adapt?
15. What things about your community have helped you settle in here?
16. How would you describe your abilities or strengths?
ملحق ج

دليل الاستجواب

الغرض من هذا الاستجواب هو فهم أفضل لتجربة المهاجرين المصريين كبار السن في الولايات المتحدة. أرغب في فهم تجربتك الخاصة بالهجرة. تجريبي تساعدنى على اتخاذ المبادرات الملائمة وتنمية خدمات أفضل لاحتياجات كبار السن من المصريين والعرب في الولايات المتحدة. خلال المقابلة سوف سترحع عليك أسئلة مختلفة حول أسباب الهجرة الخاصة بك، حياتك في الولايات المتحدة، الصعوبات والفرص التي واجهتها حتى الآن. من المتوقع إكمال هذه المقابلة بين ساعة إلى ساعتين.

المقابلة طويلة. لن تكون ملزما إذا كنت لا ترغب المشاركة. يمكنك التوقف في أي وقت دون الحاجة لإعطاء سبب. إذا كنت لا ترغب في الإجابة على أسئلة محددة، يمكنك تخطيها. لن يتم تقاسم إجابةك وغيرها من المعلومات الشخصية مع أي شخص خارج فريق البحث. وستبقى هوتك والمعلومات في هذه الدراسة سريّة تمامًا.

سنتجه إجابة أي معلومات تعنيك أو من شأنها أن تقصده إلى معرفة هوتك. إجابتك تكون سريّة ولا تقاسم مع أي منظمات أو أفراد.

البعد الأول: سياق الخروج: عوامل الدفع والجذب

أخيرني عن حياتك في مصر قبل أن تهاجر؟
لمدى تركت مصر؟
لماذا تركت مصر؟

بعد الثاني: سياق الاستقبال والاستقرار

كيف تصف تجربتك عند وصولك إلى الولايات المتحدة لأول مرة؟
هل تع инвести في مكان الخاص بك أو تعيش مع أفراد الأسرة؟
ما هو تأثير التنقل من مصر إلى مدينة نيويورك على علاقات العائلة؟
هل قدمت علاقات مع أشخاص من خارج العائلة؟
ما هي تجاربك مع المواطنين من الثقافة السائدة في الولايات المتحدة؟
هل يمكن أن تخبرني عن وضعك المالي الحالي؟
هل كان بحاجة لنمط الاجتماعي؟
كيف تصف صحتك منذ مجيئك إلى الولايات المتحدة؟
هل تع ترايد أو الاستقلال؟ إذا كان الجواب نعم، هل هي أكثر هل كان لديك تجارب جديدة وفرص منذ مجيئك إلى الولايات المتحدة؟

بعد الثالث: استراتيجيات ومصادر التأهّل

بالنظر لمجمل تجربتك، هل يمكن أن تخبرني قليلا عن كيف تعائض كنت كشخص كبير السن بعد انتقالك هنا؟
ما هي العوامل في المجتمع التي تنتمي إليها التي ساعدتك على الاستقرار؟
كيف تصف قدراتك ونفوذ القوة الخاصة بك؟
APPENDIX D

DEMOGRAPHIC QUESTIONNAIRE

Please complete the following questions. You may skip any questions you prefer not to answer.

1. What city or town you were born in Egypt?
   ________________________________________

2. How old were you on your last birthday?
   ____________________________________________ years

3. When did you migrate to the United States?
   Month ____________     Year_________

4. Gender
   a. Male      b. Female

5. What is your religious affiliation?
   a. Christian
      Denomination: Catholic_____  Orthodox _____  Protestant ____
   b. Muslim
   c. Other

6. How you identify in terms of race and ethnicity
   a. White
   b. Arab
   c. Arab-American
   d. Coptic
   e. Muslim
   f. Egyptian
   g. Other please specify____________

7. What is your marital status?
   a. Married
b. Single  
c. Widowed  
d. Divorced  

8. What is your highest level of education attained?  
   a. No formal education  
   a. Elementary or Junior High School  
   b. High School  
   c. College Degree (BA or BS)  
   d. Graduate School  

9. How did you arrive to the United States?  
   a. I arrived with a tourist visa  
   b. My family petitioned me who _____  
   c. My spouse petitioned me  
   d. Asylum seeker or Refugee please specify _____  
   f. Other please specify _____  

10. What is your current legal status?  
   a. Undocumented  
   b. Authorized to live and work in the US  
   c. Green card holder  
   d. Pending, through family  
   e. Other please specify _____  

11. What is your yearly income  
   a. None, depend on family support  
   b. Less than $10,000  
   c. More than $10,000  
   d. Other please specify _____  

12. Which is of the following best describes your living situation?  
   a. I own my apartment or house  
   b. I rent an apartment or house  
   c. I live in federally subsidized senior housing  
   d. I rent my own room in an apartment or house  
   e. I share a room in an apartment or house  
   f. I live in my child’s house or apartment please specify _____  
   G. Other please specify _____
APPENDIX E

BRIEF BIOGRAPHIES OF PARTICIPANTS

To protect the participants’ identifies, their names were changed and each of them was given a pseudonym that matched their religious background.

Coptic Group

George, a 72-year-old male, and Antoinette, a 69-year-old female, are a couple who immigrated to the United States in 2010 after their son sponsored them for permanent residence. George was a former accountant who worked for the public sector and retired in 2003. Antoinette was a former French teacher in a Catholic school who retired in 2006. They both initially lived with their son and his family which includes 2 children and eventually relocated to a senior housing apartment in Queens in 2013. Both were circular migrants for the first 3 years of their residency, due to difficulties they encountered in the initial phase of settlement. They spent about 8 months in Egypt and 4 months in the US, until they permanently settled in the United States in 2013.

Daniel, a 70-year-old male, and Karen, a 66-year-old female, are a couple who immigrated to the United States in 2011 after their son sponsored them for permanent residence. Daniel was a physician in Egypt and worked in one of the Arabic Gulf states in the private sector for a number of years before retiring in 2008. Karen was also a physician by professional training but only worked for a few years in the medical profession after obtaining her degree. They both live in Long Island with their son and their son’s family which includes 3 children. They came to the United States to support their son and his family and take care of their children.

David, a 66-year old male, and Aida, a 63-year-old female, are a couple who immigrated to the United States in 2011 after their daughter sponsored them for permanent residence. David was a former engineer who worked in the public sector in Egypt and retired in 2008. Aida was a health care professional working for a public school in Egypt and retired in 2010. At the time of the interview, they temporarily lived with their daughter and her family, including 3 children, in a 3-bedroom apartment, in Queens as they were circular immigrants, spending some time in the United States and some time in Egypt due to the constraints of their living arrangement and financial situation.

Marlene is a 62-year-old widowed female who came to the United States on a visitor’s visa and applied for asylum status in the United States early in 2012. Marlene worked as a finance manager in a bank in Egypt and retired in 2010. Marlene had a post graduate degree in finance and banking. Marlene lives with her daughter and her family, including 2 children, in a 2-bedroom apartment in Queens.
Agnes is a 65-year-old widowed female who came to the United States in 2011 on a tourist visa and subsequently applied for an asylum status. Agnes worked in the financial field in Egypt in the public sector and was department director of her company. Agnes lived with her daughter and her family, including 3 children, in a 3-bedroom apartment in Brooklyn.

Olivia is a 67-year-old widowed female who came to the United States in 2007 after her brother sponsored her for permanent residence. Olivia was an elementary school teacher in a Catholic school in Egypt. Olivia was among the few participants who was able to secure a job in the United States, as a result of her strong social network and effort from church, and worked as a bus matron for a few years after budget cuts laid her off about a year prior to the date of the interview in 2013. Olivia didn’t qualify for Social Security because she didn’t collect the necessary 40 credits, and didn’t qualify for a pension since she didn’t put in enough years in the city system. She was able, however, to acquire a very modest retirement bonus. Olivia lives with her unmarried son in a 2-bedroom apartment in Queens.

Maria is a 68-year-old widowed female who came to the United States in 2011 on a tourist visa and subsequently applied for asylum status shortly after. Maria was a social worker in Egypt and worked for the public sector. Maria had initially lived with her divorced daughter and 2 children but subsequently moved into a 3-bedroom apartment whom she shares with 2 other roommates. Maria’s entire public assistance money pays for her rent, and she survives on food stamps for the rest of the month.

Elizabeth is a 69-year-old widowed female who came to the United States in 2005 after her son sponsored her for permanent residence. Elizabeth was a nurse working in the public sector in Egypt and retired in 2004. Elizabeth is a citizen of the United States. She receives welfare benefits, including SSI and food stamps, and lives in a 1-bedroom studio apartment in Brooklyn belonging to an acquaintance from church.

Angela is a 70-year-old widowed female who came to the United States in 2011 after her daughter sponsored her for permanent residence. Angela has 1 son and 2 daughters, all of whom live in New York. Angela worked as a nurse’s aide in the public sector in Egypt and retired in 2003. She lived with her daughter and her family, including her 3 children, in a 3-bedroom apartment in Brooklyn.

Martin is a 68-year-old widower who came to the United States in 2010 on a tourist visa and subsequently applied for asylum status. Martin was a college professor in Egypt. He taught philosophy and history and he was a human rights activist. He initially had lived with his son and his family, including 2 children, but eventually moved out into a studio apartment in Brooklyn.

Arthur is a 70-year-old widower who came to the United States in 2008 after he was sponsored by his older son for permanent residence. Arthur was a former engineer in Egypt who worked for the public sector and retired in 2003. Arthur initially lived with his son and his family, including
1 child, and eventually moved into a studio apartment in Brooklyn. Arthur also has another son who lives in Brooklyn with his family.

Mark is a 76-year-old widower who came to the United States in 2003 after he was sponsored by his only son for permanent residence. Mark was an accountant in Egypt who worked for the public sector and retired in 1998. Mark initially lived with his son and his family, including 2 children, and eventually moved into a subsidized senior housing apartment in Brooklyn. Mark is a citizen of the United States and is a recipient of social welfare benefits. He had worked for a few years in the United States as a bookkeeper, first in a supermarket, then in a gas station, and finally in a clothing store, all belonging to Arabic-speaking owners, before getting laid off after the latter business went out of business.

**Muslim Group**

Masood, a 76-year-old male, and Mali, a 75-year-old female, are a couple who immigrated to the United States in 2009 after their son sponsored them for permanent residence. Masood was a former architect in Egypt who worked for the public sector until his retirement in 1998. From 1998 until 2005, he worked as a consultant in the private sector. Mali had a college degree in economics and political science. The couple lived a few months with their daughter and her family, including 3 children, and a few months with their son and his family, including 2 children, both of whom live on Long Island, as they alternate their residence. They both were circular immigrants from 2009 to 2012, due to difficulties they encountered in the US, until they had to settle in the US due to deteriorating health and unstable conditions in Egypt.

Khaled, a 68-year-old male, and Khadijah a 66-year-old female, are a couple who immigrated to the United States in 2011 after their daughter sponsored them for permanent residence. Khaled was a business administrator who worked for the public sector until his retirement in 2007. Khadijah was a creative artist who worked in the field of fashion and art and retired in 2009. They both live with their daughter, in her house, and family including 3 children, in Queens. They had been circular immigrants during the first 2 years until they settled in New York in 2013.

Amani is a 65-year-old divorced female who came to the United States early in 2012 after her daughter sponsored her for permanent residence. Amani worked in the business field in Egypt, in the public sector, and was a department head of the marketing department of her company before she retired in 2009. Amani lived with her daughter and her family, including 2 children, in her house in Queens. She also has a married son who lives with his family in Brooklyn.

Anais is a 66-year-old widowed female who came to the United States in 2011 after her oldest daughter sponsored her for permanent residence. Anais was a homemaker in Egypt who dedicated her life in raising her 4 children. Anais lived with her oldest daughter and her family, including 3 children, in a 3-bedroom apartment in Brooklyn. Anais has another daughter who
also lives in New York, and has 2 sons, one of whom lives in North Carolina and the other lives in New Jersey.

Amal is a 67-year-old widowed female who came to the United States in 2011 after her daughter sponsored her for permanent residence. Amal was a homemaker in Egypt who dedicated her life to raising her 3 children. Amal lived with her daughter and her family, including 2 children, in a 3-bedroom apartment in Queens. Amal has 1 daughter and 1 son who live in Egypt.

Ekbal is a 68-year-old widowed female who came to the United States in 2010 after her son sponsored her for permanent residence. Ekbal was a homemaker in Egypt who dedicated her life to raising her 3 children. Ekbal lived with her daughter and her family including, 2 children, in a 2-bedroom apartment in Staten Island.

Hannah is a 70-year-old widowed female who came to the United States in 2010 after her son sponsored her for permanent residence. Hannah was a homemaker in Egypt who dedicated her life to raising her 2 children. Hannah lived with her son and his family, including 2 children, in a 3-bedroom apartment in Brooklyn. She also has a daughter who lives in Brooklyn.

Farida is a 70-year-old widowed female who came to the United States in 2008 on a tourist visa. Her daughter subsequently sponsored her for permanent residence. Farida was a homemaker who raised 3 children and also worked in her late husband’s grocery store on a part-time basis. When her husband passed away, she managed the store for a few years until her eldest son took over. Farida lived in Queens with her daughter and her family, including 3 children, in a 3-bedroom apartment.

Soraya is a 71-year-old widowed female who came to the United States in 2011 after her son sponsored her for permanent residence. Soraya was a homemaker who dedicated her life in raising 3 children. Soraya lived with her son and his family, including 2 children, in a 3-bedroom apartment in Brooklyn.

Maya is a 72-year-old widowed female who came to the United States in 2009 after her daughter sponsored her for permanent residence. Maya was a homemaker in Egypt who dedicated her life in raising 5 children. Three of Maya’s daughters live in New York. They came to the United States in different phases. Maya lived with her oldest daughter and her family, including 3 children, in a 3-bedroom apartment in Brooklyn.

Amir is a 69-year-old widower who came to the United States with his son in 2009 after his son sponsored him for permanent residence. Amir was a civil engineer who worked for both the public and private sectors in Egypt before he permanently retired in 2005. Amir lived with his only, single son in a 2-bedroom apartment in Staten Island. Amir has another daughter who lives in Egypt.
Karim is 71-year-old widower who came to the United States in 2009 after his son sponsored him for permanent residence. Karim originally came to the United States with his wife who passed away in 2011. He had been a circular immigrant, going to Egypt in the fall and winter and coming back to the US to spend the spring and the summer, mostly due to difficulties he faced in settling here. He eventually settled permanently in New York in 2011 due to the chaos in Egypt. Karim was a high school history teacher and gradually climbed up the ranks to become an assistant principal and eventually a principal of the high school in which he taught for his entire career before he retired in 2002. Karim lives with his son and his family, including 3 children, in Long Island.

Raef is 72-year-old widower who came to the United States in 2011 after his son sponsored him for permanent residence. Raef was a financial analyst who worked for the private sector in Egypt before he retired in 2006. Raef had initially lived with his son and his family, including 2 children, in his son’s house in Brooklyn but eventually moved to a nearby studio apartment paid for by his son.
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