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Culture and Grief: Migratory Grief Experience of an Irish, Venezuelan and Polish Sample

Master Thesis

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Abstract

The Migratory Grief experience of a multicultural sample was explored. Five hypotheses were tested: A relationship between MG and: (1) motivations to migrate; (2) being mostly forced to leave homeland; (3) A relationship between being mostly forced to leave and Intention of returning to homeland (IRH); (4) Differences in MG based on IRH; (5) Mental health and MG are negatively related. 2150 Irish ($N=458$), Venezuelan ($N=1021$), and Polish ($N=671$) migrants were surveyed using the Migratory Grief and Loss Questionnaire, General Health Questionnaire, and socio-demographic questions. MG and motivations to migrate were significantly related for the general, Venezuelan, and Polish, but not for the Irish sample; motivation was a modest predictor. A relationship between being mostly forced to leave homeland and MG was found, nonetheless, the prediction was modest. The hypothesis of a relationship between being mostly forced to leave and IRH was not supported. Results showed differences in MG based on IRH. Higher MG was positively related to mental health. Theoretical and clinical implications, limitations, and suggestions for further research are discussed.

Preface

Thank you,

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To my dearest friends, for bearing with me throughout this demanding year. You bring joy into my life, even in the darkest of times. You are the luck of my life.

Introduction

International migration has emerged as a major demographic force throughout the world. The United Nations (2019) estimates that 271.6 million people (3,5% of the world's population) are considered migrants. Many factors could motivate this, for instance: economic and political circumstances, family reunification, natural disasters, or armed conflicts (Wickramasinghe & Wimalaratana, 2016).

Motivations to migrate change along with socio-economic and geopolitical factors, and can be studied on the basis of push and pull factors (Wickramasinghe & Wimalaratana, 2016). Push factors are conditions that motivate people to leave their homes forcefully, like lack of jobs, political persecution, or poor basic services. Pull factors attract people to another location, offering better living conditions (Krishnakumar & Indumathi, 2014). Research suggests both factors may influence concomitantly the migration decision (Pernice et al., 2009; Udahemuka & Pernice, 2010).

The study of migration has also focused on its impact on mental health, as it is considered a risk factor (Simich et al., 2006). Findings show that migration involves a period of increased stress and can lead to psychiatric disorders, particularly post-traumatic stress, anxiety, and depressive disorders (Bhugra et al., 2010; Ding et al., 2011; Fazel et al., 2005; Levecque & Van Rossem, 2015; Missinne & Bracke, 2012).

Nap et al. (2015) found migrants' mental health is associated with acculturation (understood as the adaptation to living in a new cultural environment). They affirm it can be subdivided into three aspects: participation in the new society (referring to skills of social integration), original culture maintenance (the possibility to keep their traditions), and feelings of loss of homeland. Koneru et al. (2007) conducted a literature review on acculturation and mental health in Hispanics/Latino-Americans, Asians/Asian-Americans, and other ethnic groups,

and found participating in the new society while maintaining the culture of origin was associated with improved mental health when compared to other strategies. Kamperman et al. (2007) reported a higher prevalence of psychiatric problems was related to less preservation of traditions and more feelings of loss of homeland among Surinamese, Moroccan, and Turkish samples based in The Netherlands.

This aspect of loss has been addressed by Bhugra (2004), who affirms migration involves leaving social networks behind while experiencing loss, dislocation, and isolation. The emotional reaction to that loss of homeland has been described as homesickness (Arredondo-Dowd, 1981; Fisher, 1989; Garza-Guerrero, 1974; Lee, 1994). Stroebe et al. (2015) identified three main features: separation from home, relocation, and missing the familiar place and people. A research angle was proposed, stating homesickness could be considered a “mini-grief,” a negative emotional state primarily due to separation from home and attachment persons, characterized by longing for and preoccupation with home, and often with difficulties adjusting to the new place” (Stroebe et al., 2016, p. 350). The 55 studies reviewed by Stroebe et al. (2015) suggest homesickness is a risk factor for psychological and physical health. Studies revealed a higher homesickness’ risk when perceived controllability over the decision to relocate was low. Flett et al. (2009) found low perceived controllability was associated with anxiety and homesickness in university students living away from home. This is consistent with findings of a link between perceived control and homesickness in children (Thurber & Weisz, 1997).

While studies on homesickness accurately address the loss of aspects of homeland and the adaptation process to the new country, they do not include consideration of the effects these may have on migrants’ identity. The latter was described by Bhugra and Becker (2005) as the totality of one’s perception of self, which can be shaped by aspects like language, religion, or

ethnicity. Vromans et al. (2012) argue the cultural transition that comes with migration may be associated with loss extended beyond the other, to include loss or change in self-identity.

Ward and Styles (2003) conducted a qualitative study to determine if losses resulting from migration threatened the identity of women originally from the U.K. and Ireland. They found it had an impact on their identity but was perceived as self-growth, as most participants described feeling more confident, stronger, and independent after migration. Khawaja and Mason (2008) studied a South-African sample and found these migrants experienced a loss in self-image and self-esteem, which was related to loss of social status and support.

The concept of Migratory Grief (MG) has emerged in scientific literature, including both factors of homesickness and loss of identity. Albeit scarce, quantitative studies have been conducted to assess its' impact in different groups. Casado et al. (2010) designed an instrument to measure MG, tested it among Chinese immigrants living in the United States, and found a two-factor solution: attachment to homeland and identity discontinuity. Furthermore, Casado and Leung (2002) found those who experience more intense MG had more depressive symptoms among Chinese elderly populations living in the United States and argue there is a significant relationship between MG and psychological distress.

The studies reviewed suggest migration is a risk factor for mental health (especially when its controllability is low), and entails the adjustment to the new place, while grieving for what was left behind, including self-identity aspects. Research questions arose, deriving the following hypotheses: There is a relationship between MG and motivations to migrate; There is a relationship between being mostly forced to leave homeland and MG; There is a relationship between being mostly forced to leave and Intention of returning to homeland (IRH); There are differences in MG based on IRH; Mental health and MG are negatively related.

Method

Design and Procedure

A correlational study was conducted. Data were collected online between December 2019 and February 2020, using Qualtrics (<https://www.qualtrics.com>). The questionnaires were distributed using the researcher's social media (Gmail, WhatsApp, Facebook, Twitter, Instagram, and LinkedIn), to reach Venezuelan, Polish and Irish migrants. The survey was distributed and snowballed in the native languages. Translations to Spanish and Polish were made by the researchers, back-translated by native speaker mental health professionals, and corrected according to their comments.

Participants received information about the study and signed a consent form before filling the survey, which took approximately 15 minutes to complete. They were requested to answer all questions, however, they were free to abandon the study at any point, anonymity was guaranteed, and they received the researchers' and supervisor's contact information.

Participants

Participants had to be older than 18 years old, originally from (or have the nationality of) Venezuela, Ireland or Poland, and have migrated elsewhere. 3177 responses were received, 1027 (32.32%) were deemed invalid due to unfinished questionnaires (1016), or because respondents were not from selected countries (11).

The sample consisted of 2150 participants; 1021 Venezuelan (47.5%), 671 Polish (31.2%), and 458 Irish (21.3%). 82.5% ($N=1744$) were between 18 to 47 years old. 1091 (50.7%) were women ($N=664$ Venezuelan, $N=72$ Polish, $N=355$ Irish) and 1059 (49.3%) men ($N=357$ Venezuelan, $N=599$ Polish, $N=103$ Irish). The majority ($N=1970$, 91.6%) had obtained a form of higher education, and 80.7% ($N=1736$) was employed (see Table 1).

Table 1*Socio-Demographic Characteristics*

	General		Irish		Venezuelan		Polish	
	N	%	N	%	N	%	N	%
Age								
18-27	555	25.8	82	17.9	309	30.3	164	24.4
28-37	786	36.6	218	47.6	269	26.3	299	44.6
38-47	433	20.1	108	23.6	170	16.7	155	23.1
48-57	266	12.4	34	7.4	185	18.1	47	7
58-67	93	4.3	13	2.8	75	7.3	5	.7
68-77	14	.7	1	.2	12	1.2	1	.1
78+	3	.1	2	.4	1	.1	0	0
Gender								
Female	1091	50.7	355	77.5	664	65	72	10.7
Male	1059	49.3	103	22.5	357	35	599	89.3
Education								
Primary school	22	1	4	.9	2	.2	16	2.4
Secondary school	158	7.3	21	4.6	103	10.1	34	5.1
Higher certificate	473	22	89	19.4	124	12.1	260	38.7
Bachelor's Degree	706	32.8	168	36.7	400	39.2	138	20.6
Postgraduate Degree	791	36.8	176	38.4	392	38.4	223	33.2
Employment								
Yes	1736	80.7	411	89.7	751	73.6	574	85.5
No	414	19.3	47	10.3	270	26.4	97	14.5
Marital Status								
Single	504	23.4	73	15.9	309	30.3	122	18.2
Relationship not living together	170	7.9	24	5.2	94	9.2	52	7.7

Cohabiting relationship	519	24.1	168	36.7	140	13.7	211	31.4
Married	808	37.6	179	39.1	378	37	251	37.4
Divorced	131	6.1	13	2.8	86	8.4	32	4.8
Widowed	18	.8	1	.2	14	1.4	3	.4
<hr/>								
Children								
Yes	965	44.9	186	40.6	457	44.8	322	48
No	1185	55.1	272	59.4	564	55.2	349	52
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Years in Host Country								
0-5	1345	62.6	179	39.1	873	85.5	293	43.7
6-10	403	18.7	160	34.9	65	6.4	178	26.5
11-15	212	9.9	57	12.4	40	3.9	115	17.1
16-20	106	4.9	23	5	32	3.1	51	7.6
21-25	48	2.2	18	3.9	7	.7	23	3.4
26-30	8	.4	4	.9	2	.2	2	.3
31-35	17	.8	10	2.2	1	.1	6	.9
36-40	4	.2	1	.2	0		3	.4
41-45	3	.1	2	.4	1	.1	0	
46-50	2	.1	2	.4	0		0	
51-55	1	.0	1	.2	0		0	
56-60	1	.0	1	.2	0		0	

Instruments

Socio-Demographic Section

The questions were composed by the researchers and asked about: age, gender, marital status, level of education, working status, nationality, country of origin, time since migration, presence of attachment figures, motivations to migrate, language proficiency, possibility to keep traditions, the extent to which Push and Pull factors influenced migration decision, and intention of going back to homeland.

Migratory Grief and Loss Questionnaire

This instrument measures migratory grief. Internal consistency is high (.94) (Casado et al., 2010). It has a two-factor structure (Attachment to Homeland and Identity Discontinuity) and 18 items. It is scored using a four-point Likert scale (0=never, 1=occasionally, 2=often, 3=always) (Casado et al., 2010). The test had a Cronbach's alpha of .92 (.91 for Irish, .92 for Venezuelan and Polish).

General Health Questionnaire

This questionnaire detects diagnosable psychiatric disorders (Goldberg & Hillier, 1979). The 12 item version was derived from the original one of 60 items (Goldberg & Williams, 1988). It has two factors: depression and social dysfunction (Werneke et al., 2000). It is scored using a four-point Likert scale (0-1-2-3), with higher scores indicating poorer health (Sánchez-López & Dresch, 2008). A validity assessment was done in 11 languages and found coefficients were almost as high as the original version (Goldberg et al., 1997). The GHQ-12 English, Polish (Makowska & Merecz, 2001), and Spanish (Sánchez-López & Dresch, 2008) versions were used. The instrument had a Cronbach's alpha of .86 (.87 for Irish and .86 for Venezuelan, and Polish).

Data Processing and Analysis

IBM SPSSv25 was used for all analyses. Statistical frequencies and descriptives of background variables were tested for differences between sub-samples using Chi-Square or ANOVA tests. Further analyses were decided according to the nature of the hypotheses (H) and variables. For H1 and H2, multiple regressions; for H3, logistic regressions, for H4 ANOVA tests, and for H5 Pearson's correlation were run.

Results

Migration Background

All background variables were found statistically significantly different. Tukey's Post Hoc tests ($p < .05$) for motivations to migrate showed Irish and Polish did not differ significantly in scores of education, social and personal security, in which Venezuelans scored higher. Venezuelans and Irish did not differ significantly in economic factors, while Polish scored lower. For push and pull factors, Polish and Irish did not differ significantly in push, while Venezuelans scored higher. For Language proficiency, Polish scored significantly lower than Venezuelans and Irish. For being able to keep cultural traditions, Venezuelans scored lower than Irish and Polish. For feeling welcome in the host country, Polish scored lower than Irish and Venezuelans (see Table 2).

Table 2

Migration Background Characteristics

	General				Irish				Venezuelan				Polish			
	N	%	M	SD	N	%	M	SD	N	%	M	SD	N	%	M	SD
Education			3.2	3.3			2.1	2.5			4.2	3.6			2.5	2.7
Economic			7.4	3.0			7.4	3.0			7.7	2.9			7.0	3.2
Political			5.8	3.8			2.7	2.5			8.7	2.3			3.6	3.1
Social			4.1	3.5			3.4	3.1			4.6	3.6			3.7	3.4
Pers.S.			5	4.0			1.6	1.7			8.5	2.4			1.9	2.1
Pull F.			7.5	2.5			7.4	2.3			8.0	2.2			6.8	2.7
Push F.			7.0	3.2			6.1	3.1			8.3	2.7			5.7	3.3
S. others in host country before mig.	Yes	1267	58.9		203	44.3			711	69.6			353	52.6		
	No	883	41.1		255	55.7			310	30.4			318	47.4		

S. others in host country after mig.	Yes	1733	80.6		341	74.5		910	89.1		482	71.8	
	No	417	19.4		117	25.5		111	10.9		189	28.2	
S. others still in homeland	Yes	2028	94.3		451	98.5		990	97		587	87.5	
	No	122	5.7		7	1.5		31	3		84	12.5	
Lang. Prof.				8.0	2.8		8.7	2.9		9.0	1.9	6.0	2.9
Feeling welcome in host country				7.3	2.1		7.6	1.9		7.6	2.1	6.6	2.2
Keep cultural traditions				7.2	2.2		7.4	2.0		6.9	2.1	7.6	2.2
MGLQ				23.0	12.4		22.8	11.2		26.8	11.9	17.3	11.7
GHQ-12				20.1	7.3		19.1	6.2		19.3	7.6	21.9	7.3
	Yes	792	36.8		198	43.2		412	40.4		182	27.1	
IRH	No	590	27.4		94	20.5		259	25.4		237	35.3	
	N/S	768	35.7		166	36.2		350	34.3		252	37.6	

H1: There is a relationship between MG and motivations to migrate

A multiple regression was run to predict MG from motivations to migrate. All assumptions were met except for normality. It was decided to proceed since the test is robust, and the sample size was large. The model showed a significant relationship between variables, $F(5, 2144) = 24.489, p < .001, \text{adj. } R^2 = .052$. Motivation was a modest predictor since the model explained 5.2% of the variance of MG. Personal security and education were significant, $p < .05$. Education decreased, personal security increased MG (see Table 3).

Another multiple regression was run to compare the model per sub-samples. All assumptions were met except for normality. The model was significant for Venezuelans $F(5,$

1015) = 5.748, $p < .001$, adj. $R^2 = .023$ and Polish $F(5, 665) = 2.858$, $p < .001$, adj. $R^2 = .014$, but not for the Irish $F(5, 452) = 1.693$, $p = .135 > .001$, adj. $R^2 = .008$. For Venezuelans, education, personal security, and political factors were significant. The first two decreased, while the latter increased MG. For Polish, political motivation was significant and decreased MG (see Table 3). These results support the hypothesis for the general, Venezuelan, and Polish, but not for the Irish sample. Motivation was a modest predictor.

Table 3

Multiple Regression for the prediction of MG from motivations to migrate

	General			Irish			Venezuelan			Polish		
	<i>B</i>	<i>SE</i>	<i>p</i>	<i>B</i>	<i>SE</i>	<i>p</i>	<i>B</i>	<i>SE</i>	<i>p</i>	<i>B</i>	<i>SE</i>	<i>p</i>
Motivation												
Education	-.20	.08	.013*	.18	.20	.380	-.37	.10	.000*	-.26	.16	.104
Economic	.08	.08	.363	.17	.17	.332	.05	.13	.671	.13	.14	.375
Political	.14	.10	.155	-.34	.22	.123	.62	.17	.000*	-.41	.15	.007*
Social	-.07	.07	.349	-.32	.17	.055	.17	.10	.079	-.18	.13	.176
Personal												
Security	.63	.09	.000*	-.01	.33	.958	-.45	.16	.006*	.08	.22	.702

*Note: B= unstandardized regression coefficient; SE= Standard Error; *p<.05*

H2: There is a relationship between being mostly forced to leave homeland and MG

Push and Pull factors had a moderate correlation of $R = .339$, and therefore were treated as separate variables. A multiple regression was run to predict MG from Push and Pull factors while their interaction effect was considered. All assumptions were met except for normality. The model significantly predicted MG, $F(3, 2146) = 16.265$, $p < .001$, adj. $R^2 = .021$. Push and Pull were significant, $p < .05$, but their interaction was not. Pull factors decreased, while Push increased MG (see Table 4).

For the sub-sample test, all assumptions were met except for normality, and one outlier was identified but kept after running the model twice with no significant differences found. The model significantly predicted MG for Irish $F(3, 454) = 3.831, p < .001, \text{adj. } R^2 = .018$, Venezuelans $F(3, 1017) = 3.473, p < .001, \text{adj. } R^2 = .007$ and Polish $F(3, 667) = 3.171, p < .001, \text{adj. } R^2 = .010$.

For Venezuelans and Irish, Push and Pull factors were significant ($p < .05$), with Push increasing, and Pull decreasing MG. For Polish, Pull was significant (and decreased MG) but Push factors were not. The interaction effect was insignificant for all groups (see Table 4). The results support the hypothesis for all samples. Push and Pull factors were modest predictors.

Table 4

Multiple Regression for the prediction of MG from Push and Pull factors

	General			Irish			Venezuelan			Polish		
	<i>B</i>	SE	<i>p</i>	<i>B</i>	SE	<i>p</i>	<i>B</i>	SE	<i>p</i>	<i>B</i>	SE	<i>p</i>
Pull	-.287	.116	.013*	-.741	.254	.004*	-.397	.170	.020*	-.616	.206	.003*
Push	.607	.088	.000*	.346	.174	.047*	.327	.138	.018*	-.015	.151	.920
P*P	.004	.029	.893	-.008	.063	.904	.071	.048	.141	-.082	.047	.080

*Note: * $p < .05$*

H3: There is a relationship between being mostly forced to leave homeland and IRH

Logistic regressions were performed to ascertain the effects of Push and Pull factors and their interaction effect on IRH. All assumptions were met. The model was insignificant, $\chi^2(6) = 7.475$, Nagelkerke $R^2 = .004, p < .001$. It correctly classified 37.7%, failing to predict No intention of going back (0%) and predicting Yes in 65.3% and Not Sure in 38.3% of the cases.

The model was insignificant for Irish, $\chi^2(6) = 8.691$, Nagelkerke $R^2 = .021, p < .001$, and Polish, $\chi^2(6) = 4.102$, Nagelkerke $R^2 = .007, p < .001$. For Venezuelans, it was significant, $\chi^2(6)$

= 20.025, Nagelkerke $R^2 = .022$, $p < .001$. It correctly classified 40.9% of the cases, predicting 76.2% of Yes and 29.7% of Not Sure, but failing to predict No (0%). These results do not support the hypothesis.

H4: There is a difference in MG based on IRH

An ANOVA was run to determine if MG differed based on IRH. All assumptions were met except for normality and homogeneity of variances. Since evidence suggested better performance under violations of these assumptions (Lix et al., 1996), the Welch test was used to check statistical significance and the Games-Howell Post Hoc test to determine differences.

MG was significantly different between IRH groups, Welch's $F(2, 1403.362) = 492.352$, $p < .0005$, est. $\omega^2 = .313$. The model explained 31.3% of the variance. MG was higher among the Yes, followed by Not Sure and No groups, in that order. Games-Howell Post Hoc analysis revealed all mean increases were significant ($p < .05$) (see Table 5).

Significant differences were found for Irish Welch's $F(2, 250.081) = 41.984$, $p < .0005$, est. $\omega^2 = .151$, Venezuelans Welch's $F(2, 639.323) = 253.379$, $p < .0005$, est. $\omega^2 = .33$, and Polish Welch's $F(2, 392.551) = 218.902$, $p < .0005$, est. $\omega^2 = .393$. Differences in MG among categories were consistent with that of the general sample. Games-Howell Post Hoc test showed all mean increases were significant ($p < .05$) (see Table 5). These results support the hypothesis for all samples.

Table 5

One Way ANOVA to test differences in MG based on IRH

IRH	General			Irish			Venezuelan			Polish		
	M	SD	<i>p</i>	M	SD	<i>p</i>	M	SD	<i>p</i>	M	SD	<i>p</i>
Yes	31.28*	11.24	.00	27.77*	11.43	.00	34.35*	10.13	.00	28.13*	11.47	.00
Not Sure	21.57*	10.00	.00	20.54*	9.13	.00	25.03*	9.97	.00	17.46*	8.84	.00
No	13.92*	9.31	.00	16.51*	9.78	.00	17.47*	9.14	.00	9.004*	6.82	.00

Note: M= mean; SD= standard deviation; p= significance of mean differences at <0.05

H5: Mental health and MG are negatively related

A Pearson's correlation was run to assess the relationship between GHQ-12 and MG. All assumptions were met except for normality. There was a significant, moderate, negative correlation $R = -.421$, $p < .0005$. This was consistent across sub-samples: Irish $R = -.356$, Venezuelan $R = -.412$, Polish $R = -.405$, at $p < .0005$.

Understanding that higher scores in the GHQ-12 indicate more mental ill-health, and in the MGLQ higher MG, this negative correlation suggests higher MG is positively related to mental health, contrary to what was expected.

Discussion

The migratory grief experiences of an Irish, Venezuelan, and Polish group were explored. Considering migration is influenced by socioeconomic and geopolitical factors (Wickramasinghe & Wimalaratana, 2016), first, it is important to have a contextualization of each country's current situation. The Human Development Index of the United Nations offers a measure of average achievement in health, education, and income per capita, based on which it

creates a global rank, with the first position indicating more development (UNDP, 2019). In the last report, Ireland remained as 3rd, Poland ascended to 32nd, and Venezuela descended to 96th, out of 189 countries (UNDP, 2019). Venezuela's political, human rights, and socio-economic circumstances have led to the migration of over 4.5 million citizens, considered the largest exodus in Latin America's recent history (UNHCR, 2020).

For the first hypothesis motivations to migrate were considered in relation to MG, finding a significant, yet modest relationship for the general, Venezuelan and Polish, but not for the Irish sample. Significant factors and their effect on MG varied across sub-samples, consistently with findings suggesting differences in post-migration outcomes, based on motivations to migrate (Udahemuka & Pernice, 2010). For the general group, education and personal security decreased and increased MG, respectively. For Venezuelans, education and personal security decreased, while political factors increased MG. For Polish, only political motives were significant but decreased MG.

The opposite effects of political factors for Venezuelans and Polish could be addressed by understanding MG as the combination of the research angle for homesickness by Stroebe et al. (2015) plus identity discontinuity (Casado et al., 2010). Specifically, the element of preoccupation with home is relevant, when considering the socio-political situation of both countries. Venezuelans' higher MG and the enhancing effect political motivations had on it might be related to this preoccupation, since the majority of the sample still has significant others in their homeland. Moreover, this could explain why the model was not significant for the Irish, as apparently their motives were not linked to worrisome elements from their homeland, but were mainly based on economic reasons.

Bhugra (2004) suggested immigrants' experiences could be negatively perceived due to loss of status, which relates to the self-identity threat in MG. Nonetheless, the possibility to

improve this status through education, safety, or economic opportunities could buffer the effect of MG. Thus, both preoccupation with home and positive perception of access to improved life quality could explain why personal security was related to higher MG for the general sub-sample but decreased it for Venezuelans.

Migrating for the improvement of life quality could lead to an anticipated decision-making process, enhancing the perceived controllability and preparedness for potential challenges, which have been related to lower homesickness' risk (Flett et al., 2009; Kunz, 1973; Stroebe et al., 2015; Thurber & Weisz, 1997; Udahemuka & Pernice, 2010). This also applies for findings suggesting a relationship between being mostly forced to leave homeland and MG, which was significant, yet modest. Factors had an opposite effect on MG, with push increasing, and pull decreasing it respectively. Irish and Polish scored pull higher, while Venezuelans did so with push factors. MG was higher among Venezuelans and lower for Polish, for whom push factors were insignificant. Apparently, Polish and Irish perceive their decision to migrate as voluntary, and driven by the desire of status improvement, in contrast with Venezuelans, who seem to have been drawn to migration due to the country's situation. The impact this had on MG is consistent with findings suggesting reluctant immigrants report higher migration-related grief (Khawaja & Mason, 2008).

The hypothesis of a relationship between being mostly forced to leave homeland and IRH was not supported. Despite the influence motivations to migrate could have on the intention of returning to homeland (de Haas et al., 2015), research has found return behavior is complex, varies depending on conditions in sending and receiving countries, and other unobservable variables (Constant & Massey, 2002).

Nonetheless, IRH was found to explain differences in MG. Participants who answered affirmatively in IRH reported higher MG, which decreased when unsure and more so when

answering negatively. Consistently, Polish (who scored the lowest in MG) reported the lowest positive IRH rates. This relates to another feature of MG: longing for home. This has been discussed within the theoretical framework of attachment theory derived from Bowlby's work (1980), which has been expanded to explain homesickness (Thurber & Sigman, 1998; Thurber & Walton, 2012). The Dual Process Model of Coping with Homesickness (DPM-HS) by Stroebe et al. (2016) describes one key factor of home-related stressors is separation, which is the essence of homesickness. Additionally, the belongingness theory postulates that humans have an innate drive for lasting interpersonal relationships, which are threatened by relocation, contributing to negative emotional reactions, like grief (Watt & Badger, 2009).

Lastly, MG was moderately related to mental health, contrary to evidence suggesting homesickness and MG were associated with mental ill-health (Casado & Leung, 2002; Fisher, 1989; Khawaja & Mason, 2008; Stroebe et al., 2015; Thurber, 2005;). Interestingly, Polish (who scored the lowest in MG and highest in mental ill-health) scored the lowest in language proficiency and feeling welcome in the host country, both domains of acculturation (Nap et al., 2015).

This is consistent with Knipscheer and Kleber's (2007) findings of low mental ill-health among Ghanaian immigrants in The Netherlands. However, while measuring acculturation, they found keeping cultural traditions was associated with good health, while feelings of loss of homeland and greater orientation to people with the same cultural background were associated with higher ill-health.

The DPM-HS (Stroebe et al., 2016) postulates homesickness' home and new place stressors are linked but need independent consideration. Thus, adjustment difficulties can occur in absence of homesickness, and vice versa. Therefore, the effects on mental health could be influenced by aspects beyond attachment to homeland and identity discontinuity.

Despite the moderate positive relationship between MG and mental health, all sub-samples scored above the threshold of 12 in the GHQ-12 (Goldberg et al., 1997). This indicates more mental ill-health, aligned with evidence suggesting migration is a risk factor (Bhugra et al., 2010; Ding et al., 2011; Fazel et al., 2005; Levecque & Van Rossem, 2015; Missinne & Bracke, 2012).

These results provide new insights into the migratory grief experience of the multicultural sample studied. Nonetheless, limitations must be considered. The construct of migratory grief needs further research to provide a definition that differentiates it from other phenomena, like homesickness.

The cross-sectional design with no baseline data collection limited the availability of background information and the possibility to derive causal relationships from the results. Despite the large sample size, its heterogeneity in terms of socio-economic, migration and resettlement conditions were limited. Data were collected online and the reach was determined by the researchers' network, thus migrants without internet access or undergoing more dire circumstances could not be reached. This is relevant considering the migration crisis in Venezuela (UNHCR, 2020). Conclusions drawn must consider hypotheses one and two, despite significant, found variables to be modest predictors and the strength of the relationship between MG and mental health was moderate.

Further research is needed to develop a conceptually sound definition of MG and study its effects on other migrant groups to ascertain cultural, contextual, and individual differences. Attention must be paid to conditions in sending and receiving countries, how the migration process occurred, and to determinants of acculturation. Migrants' mental health requires further exploration.

Migration has turned into a phenomenon that one in every 35 people experiences globally (UNDESA, 2019). It is paramount to further explore the psychological implications it has for immigrants to develop proper guidelines that foster their adaptation in host societies and enhance the value they could bring to them, as well as their well-being.

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